



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

T-03-BYR-09-23

Review Date

9/14/2023

Municipality
Board Name
Applicant's Name
Referral Type
Variance(s)
Description:

BYRON, T.
PLANNING BOARD
Roger & Karen Jaczynski
Special Use Permit
Special Use Permit for motor vehicle repair/storage.

Location
Zoning District

6833 Byron Holley Rd. (NYS Rt. 237), Byron
Neighborhood Commercial (C-1) District

PLANNING BOARD RECOMMENDS:

WITHDRAWN

EXPLANATION:

Withdrawn per the Town.

Director

September 14, 2023

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO:
GENESEE COUNTY DEPARTMENT OF PLANNING
3837 West Main Street Road
Batavia, NY 14020-9404
Phone: (585) 815-7901

DEPARTMENT USE ONLY:
GCDP Referral # T-03-BYR-09-23



*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED
Genesee County
Dept. of Planning
8/22/2023

Required According to:
GENERAL MUNICIPAL LAW ARTICLE 12B, SECTION 239 L, M, N
(Please answer ALL questions as fully as possible)

1. REFERRING BOARD(S) INFORMATION

Board(s) Town of Byron Planning Board
Address PO Box 9 7028 Byron Holley Rd.
City, State, Zip Byron, NY 14422
Phone (585) 548 - 7123 Ext. 15

2. APPLICANT INFORMATION

Name Roger & Karen Jaczynski
Address 7351 Beaver Meadows Rd.
City, State, Zip Bergen, NY 14416
Phone (585) 314 - 4245 Ext. _____ Email _____

MUNICIPALITY: City Town Village of Byron

3. TYPE OF REFERRAL: (Check all applicable items)

- | | | |
|--|--|---|
| <input type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Map Change | <input type="checkbox"/> Subdivision Proposal |
| <input type="checkbox"/> Use Variance | <input type="checkbox"/> Zoning Text Amendments | <input type="checkbox"/> Preliminary |
| <input checked="" type="checkbox"/> Special Use Permit | <input type="checkbox"/> Comprehensive Plan/Update | <input type="checkbox"/> Final |
| <input type="checkbox"/> Site Plan Review | <input type="checkbox"/> Other: _____ | |

4. LOCATION OF THE REAL PROPERTY PERTAINING TO THIS REFERRAL:

- A. Full Address 6833 Byron Holley Rd. Byron, NY 14411
B. Nearest intersecting road Townline Rd. Rt 262
C. Tax Map Parcel Number 5.-1-42
D. Total area of the property .8 acre Area of property to be disturbed zero (pre existing building, fence)
E. Present zoning district(s) C1 Neighborhood

5. REFERRAL CASE INFORMATION:

- A. Has this referral been previously reviewed by the Genesee County Planning Board?
 NO YES If yes, give date and action taken 2003
- B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law

- C. Please describe the nature of this request Applicant wishes to obtain a special use permit for vehicle storage lot which was revoked. Applicant made all of the requested repairs/ changes to address violations. The zoning in 2003 has been changed to C1. This now would be classified as a pre existing non conforming use.

6. ENCLOSURES – Please enclose copy(s) of all appropriate items in regard to this referral

- | | | |
|---|--|---|
| <input type="checkbox"/> Local application | <input type="checkbox"/> Zoning text/map amendments | <input type="checkbox"/> New or updated comprehensive plan |
| <input type="checkbox"/> Site plan | <input type="checkbox"/> Location map or tax maps | <input type="checkbox"/> Photos |
| <input type="checkbox"/> Subdivision plot plans | <input type="checkbox"/> Elevation drawings | <input checked="" type="checkbox"/> Other: <u>all documents emailed</u> |
| <input type="checkbox"/> SEQR forms | <input type="checkbox"/> Agricultural data statement | |

7. CONTACT INFORMATION of the person representing the community in filling out this form (required information)

Name Melissa Ierlan Title CEO/ZEO Phone (585) 402 - 0148 Ext. _____
Address, City, State, Zip _____ Email townofbyrocodes@gmail.com

C1 - Neighborhood
Comm
Special Use Number: ZBA-2023-018

TOWN OF BYRON
APPLICATION TO THE
PLANNING BOARD
Special Use Permit

Date: May 26, 2023

OWNER

APPLICANT (If other than owner)

Name: Roger & Karen Jaczynski
Address: 7351 Beaver Mdw Rd
Bergen NY 14416
Telephone #: _____

Name: _____
Address: _____
Telephone #: _____

1. Request to the Planning Board to overturn the Zoning Enforcement Officer's decision to DENY GRANT an application for a Zoning Permit Application Number _____ Dated _____

2. APPLICATION FOR: Special Use Permit
Other

3. Address of Project Site: 5-1-42 6833 Byron Holley Rd Byron NY
Tax Map Number: 5-1-42 Zoning District: _____
Please Specify

4. Has a previous appeal been filed pertaining to this parcel? No
Yes If yes, list Appeal No. _____ Date _____ Purpose of Request: _____

5. Justification for Request: General Response corrections to zoning issues have been corrected. in regards to our previous special use permit per Planning Board (12/6/22)

A more SPECIFIC RESPONSE should accompany this application on separate sheet(s) of paper. Address each of the statements listed on the back of the PINK sheet which pertain to your specific appeal.

The Applicant shall submit with this request, appropriate supporting materials including, but not limited to, site plans, elevations, traffic circulation diagrams, neighborhood land use maps and any other material that will assist the Board in making a determination regarding this request.

CERTIFICATION: I hereby certify that I have read and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use will be complied with whether specified herein or not. The granting of an appeal does not presume to give authority to violate or cancel the provisions of any other state or local ordinance or law regulating construction or performance of construction and/or use.

Roger W Jaczynski 6/2/23 = Karen E Jaczynski
Applicant's Signature Date: Owner's Signature (if other than applicant) Date:

PROVISIONS of ZONING LAW for SPECIAL USE:

OFFICE USE ONLY

1. Article _____ Section _____
Subsection _____ Paragraph _____
state reason; _____
2. Table I or II - state reason; _____

FEE COLLECTED: Check # _____
Special Use Fee \$ 100
Public Hearing Fee \$ _____
TOTAL FEE \$ _____
Signature - Zoning Enforcement Officer _____
Date _____

Town of Byron

Application # ZBA-2023-018

Agricultural Data Statement

Date May 28, 2023

Instructions: This form must be completed for any application for a special use permit, site plan approval, use variance or a subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

Applicant	Owner if Different from Applicant
Name: <u>Roger + Karen JACZYNSKI</u> Address: <u>7351 Beaver Meadow</u> <u>Bergen NY 14416</u>	Name: _____ Address: _____

1. Type of Application: Special Use Permit; Site Plan Approval; Use Variance; Subdivision Approval

2. Description of proposed project: Storage lot for vehicles

3. Location of project: Address: 6833 Byron Hollow Rd
Tax Map Number (TMP) 5-1-44.2

4. Is this parcel within an Agricultural District? NO YES (Check with your local assessor if

5. If YES, Agricultural District Number you do not know)

6. Is this parcel actively farmed? NO YES

7. List all farm operations within 500 feet of your parcel. Attach additional sheets if necessary.

Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES	Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES
NONE	
Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES	Name: _____ Address: _____ Is this parcel actively farmed? <input type="checkbox"/> NO <input type="checkbox"/> YES

Signature of Applicant

Signature of Owner (if other than applicant)

Reviewed by:

Melissa Lewis
Signature of Municipal Official

5/28/23
Date

NOTE TO REFERRAL AGENCY: County Planning Board review is required. A copy of the Agricultural Data Statement must be submitted along with the referral to the County Planning Department.

Short Environmental Assessment Form

Part 1 - Project Information


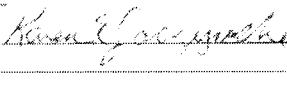
Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Special Use Permit Application for			
Name of Action or Project: Special Use Permit			
Project Location (describe, and attach a location map): 6833 Byron Holley Road Byron NY 14422			
Brief Description of Proposed Action: Establish establish the Special Use Permit for Fly By Night Auto			
Name of Applicant or Sponsor: Roger & Karen Jaczynski		Telephone: 585-314-4245	
Address: 7351 Beaver Meadow Rd		E-Mail: carqueen@rochester.rr.com	
City/PO: Bergen		State: NY	Zip Code: 14416
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ .80 acres			
b. Total acreage to be physically disturbed? _____ n/a acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ .80 acres			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

		NO	YES	N/A
5.	Is the proposed action.			
	a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.	Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7.	Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8.	a. Will the proposed action result in a substantial increase in traffic above present levels?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9.	Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ N/A	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11.	Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12.	a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13.	a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
We have owned the property for many years and never had a problem with run off water. Our building is storage only and has no running water, nor are we connected to the sewer.		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Roger W Jaczynski Karen E Jaczynski</u> Date: <u>6/2/23</u> Signature: <u> </u> Title: <u>owner</u>		

To the Byron Planning Board:

In reference to the reinstatement request for the special use permit for "Fly By Night" or 6835 Byron Holley Rd and the site plan information needed.

The business is used for storage of vehicles purchased or acquired by Roger Jaczynski or Byron Repair. We use the vehicles for parts to repair customer's vehicles or to sell as needed. We store vehicles to supply local fire departments with training vehicles and we also work with local law enforcement when needed. We tow vehicles after accidents, some need to be impounded while the police investigate the incident. Some vehicles are taken off the road due to traffic infractions (no insurance, unlicensed drivers, stolen, etc.)

As such, our hours of operation at this site can vary. For the most part we are open Monday through Friday from 8:00 am until 5:30 pm, with the exception of some emergencies in the evening when vehicles will be taken into custody for whatever reason. The business does not get a lot of traffic as customers only come to this location to retrieve their belongings from their cars and are always accompanied by an employee.

We do not do repairs at this location. It is simply for storage of vehicles. As of 6/7/23 we have approximately 45 vehicles at this time. We have been working with a company to dispose of vehicles in a more timely manner and would appreciate the reinstatement of our special use permit so we can continue to operate our business in a more efficient manner.

Karen E Jaczynski
Roger W Jaczynski

June 2, 2023

To the Town of Byron

We are asking for our special use permit for the property referred to as "Fly By Night" (6835 Byron Holley Rd, Byron NY 14422) to be reinstated.

On December 6, 2022 we met with the Planning Board to discuss issues with our property. Over the years, our property became overrun and was in need of repair. Our business, Byron Repair is extremely busy and we fell behind in work we needed to do. After discussing with the board the issues that were of concern, we were given a six month time period to correct the items

At this time, we have made the corrections asked for in the minutes for December 6. We have repaired and repainted the fence and the building. The excess vehicles have been removed and a fire lane is in place as required. We have a new vendor that is very quick to respond to calls when we have vehicles ready for sale. We do have to follow New York state laws as far as storage of customer's vehicles that are abandoned after towing. We are doing our best to keep the corner as

clear as possible with the unpredictability of our business.

We would leave the permit as given to us years ago. We do not need more than 75 cars per original permit but would ask that the rolling gate requirement be removed as the Board and Jaczynski's felt it might impede traffic on the roadway that the town uses for access to bike path. The site map was a Google picture that Melissa Ierlan provided to me and the fire lane is wider than that today.

Respectfully submitted:

Roger W Jaczynski Karen E Jaczynski
Roger W Jaczynski

Karen E Jaczynski

The following are the fourteen conditions:

1. There must be a center strip for access by emergency vehicles that is at least 16 feet in width.
2. A six-foot wooden stockade fence must be used on all sides of the yard and maintained in an aesthetically pleasing manor for privacy.
3. Phase I is fencing around half of the yard that will be completed before any vehicles are stored there. Phase II will allow for expansion of the entire yard. When Phase II is completed, a rolling gate will be installed on the East End of the Yard.
4. In areas where sewer systems or easements exist, no vehicles are to be stored and a removable fence must be put in.
5. A maximum of three vehicles can be for sale at any one time in the front of the parcel.
6. Vehicles deemed for storage must be removed from the front of the building within 24 hours.
7. It is the Planning Board's understanding that Roger's intention is that once the storage yard is opened, no vehicles, other than those for customer service, will be stored at the four corners (Byron Repair) and that he also intends to discontinue use at the Beaver Meadow Road location.
8. A maximum of 75 cars be stored at any one time.
9. No stacking of vehicles.
10. A maximum of 15 percent of vehicles in storage will be for dismantling.
11. The Zoning Officer will inspect the storage yard annually.
12. No vehicles will be stored for more than 18 months.
13. There will be no loading or unloading of vehicles on public right-of-ways.
14. After completion of Phase II, bushes will be planted at the East End of the yard that faces the park.

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