



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

T-04-BYR-09-23

Review Date

9/14/2023

Municipality

BYRON, T.

Board Name

PLANNING BOARD

Applicant's Name

Peter Yasses

Referral Type

Special Use Permit

Variance(s)

Description:

Special Use Permit to operate a contractor's yard.

Location

6782 Byron Holley Rd. (NYS Rt. 237), Byron

Zoning District

General Commercial (C-2) District

PLANNING BOARD RECOMMENDS:

APPROVAL WITH MODIFICATION(S)

EXPLANATION:

The required modifications are as follows: 1) The applicant obtains comments and/or any required driveway permit from NYS DOT due to the change of use; and 2) the applicant maintain the proposed use entirely on the southern parcel. With these required modifications, the proposed contractor's yard should pose no significant county-wide or inter-community impact.

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) 341-5800



DEPARTMENT USE ONLY:
GCDP Referral # T-04-BYR-09-23

*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED
Genesee County
Dept. of Planning
8/25/2023

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 Pete Yasses
Address 6956 Byron Holley Rd.
City, State, Zip Byron, NY 14411
Phone (585) 721-6724 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 6772 and 6782 Byron Holley Rd. Byron, NY 14411
- B. Nearest intersecting road Townline Rd. Rt 262
- C. Tax Map Parcel Number 5.-1-95.113 and 5.-1-100
- D. Total area of the property 1.7 acre Area of property to be disturbed zero (pre existing building, fence)
- E. Present zoning district(s) C2 General Commercial

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 _____
- B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law
Section 9.06, c, x
- C. Please describe the nature of this request Applicant would like to utilize approx .5 acres as a contractors yard for the storage and sale of mulch, top soil, millings and gravel for use in construction jobs

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"/> SFQR 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

TOWN OF BYRON
APPLICATION TO THE
PLANNING BOARD
Special Use Permit

Special Use Number : _____
 Date : 8/20/23

OWNER

APPLICANT (If other than owner)

Name : Pete Vasses Name : _____
 Address : 6956 Byron Hollow Rd Address : SAME
Byron NY 14411
 Telephone # : 721-6724 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

Please Specify _____

3. Address of Project Site : 6772 and 6782 Byron Hollow Rd
 Tax Map Number : 5.-1-95.113 Zoning District : C2 Gen Commercial
5.-1-100

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 Contractor at another location in Byron would like to utilize this parcel to store and sell mulch, top soil and gravel next door to his storage units.

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.

Applicant's Signature _____ Date: _____ Owner's Signature (if other than applicant) _____ Date: _____

PROVISIONS of ZONING LAW for SPECIAL USE:

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 \$ 100-
Amber DeW
 Signature - Zoning Enforcement Officer
8/20/23
 Date

OFFICE USE ONLY

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			
Name of Action or Project: <i>Special Use Permit For Contractors yard</i>			
Project Location (describe, and attach a location map): <i>6772 and 6782 Byron Halley Rd -</i>			
Brief Description of Proposed Action: <i>Contractor at another location in Byron would like to utilize this parcel to store and sell mulch, top soil and gravel next door to his storage unit business</i>			
Name of Applicant or Sponsor: <i>Pete Yasses</i>		Telephone: <i>721-6724</i>	
		E-Mail: <i>Supervisor@TownofByron.org</i>	
Address: <i>6956 Byron Halley Rd.</i>			
City/PO: <i>Byron</i>		State: <i>NY</i>	Zip Code: <i>14411</i>
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 governmental 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?		<i>.5</i> acres	
b. Total acreage to be physically disturbed?		<i>0</i> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<i>1.7</i> acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input 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			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES		
	<input type="checkbox"/>	<input 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: _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	<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: <u>N/A</u>	NO	YES		
	<input checked="" 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: _____	NO	YES		
	<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: _____	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
b. Is the proposed action located in an archeological sensitive area?	<input type="checkbox"/>	<input type="checkbox"/>		
	<input 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?	NO	YES		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
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 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 plain?	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, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES		
	<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 type="checkbox"/>	<input checked="" type="checkbox"/>		
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

<p>18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	NO	YES
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	NO	YES
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	NO	YES
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p> <p>Applicant/sponsor name: _____ Date: _____</p> <p>Signature: _____</p>		



5-1-95.113

5-1-100

5-1-95.12

5-1-95.2

Byron Holley Road (NY 237)



5-1-95.113

5-1-100

5-1-95.12

Byron Holley Road (NY 237)

Distance: 206.8 Feet

Distance: 190.1 Feet

Special use
"Contractors
Yard"

5.-1-95.12

top soil

gravel

gravel

5.-1-100

Loading
Area

Millings

Fence

5.-1-95.113

Byron Storage
buildings

Permitted
Use
Approved
2021

Fence

sign

Driveway

Route 237
drive
way

237

Both parcels owned by applicant