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GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

Vor * PT	GCDP Referral ID	T-07-BAT-4-22	
Constanting of the Area of the	Review Date	4/14/2022	
Municipality	BATAVIA, T.		
Board Name	PLANNING BOARD		
Applicant's Name	Gateway GS LLC (Gallina Development)		
Referral Type	Site Plan Review		
Variance(s)			
Description:	Site Plan Review to modif at an existing business p	y a previously approved plan for 5 office park buildings irk (Gateway II).	
Location	Call Pkwy., Batavia		
Zoning District	Industrial Park (IP) Di	strict	
PLANNING BOARD	RECOMMENDS:		

APPROVAL

EXPLANATION:

The proposed site plan modifications should pose no significant county-wide or intercommunity impact.

Director

April 14, 2022

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 PLAN 3837 West Main Street Road Batavia, NY 14020-9404 Phone: (585), % !+ \$%	NNING Clear Form	$\mathbf{D} \in \mathbf{PAR}^{\prime}$ GCDP Referral # \mathbf{T}	
	* GENESEE CO Planning Board		RECEIVED Genesee County Dept. of Planning 4/7/2022
	Required Accordin NICIPAL LAW ARTICLE (Please answer ALL questions a	12B, SECTION 2	239 L, M, N
1. <u>Referring Board(s) Informa</u>	TION 2. <u>Applican</u>	t Information	
Board(s) Town of Batavia Planning E	Board Name Gallina	a Development	
Address 3833 West Main Street Roa	Address 7995	Call Parkway	
City, State, Zip Batavia, NY, 14020	City, State, Zip	Batavia, NY, 1402	20
Phone (585) 343 - 1729 E	xt. Phone (585) 285	1890 Ext.	Email jeff.radesi@gallinadev.com
MUNICIPALITY: City	l'own 🗌 Village of Ba	avia	
3. <u>TYPE OF REFERRAL:</u> (Check all appl			
 Area Variance Use Variance Special Use Permit Site Plan Review 	 Zoning Map Change Zoning Text Amendments Comprehensive Plan/Update Other:	Prelin	on Proposal ninary
4. LOCATION OF THE REAL PROPER	RTY PERTAINING TO THIS REI	FERRAL:	
A. Full Address 7995 Call Pkwy, E	Batavia		
B. Nearest intersecting road W. Sai	le Dr.		
C. Tax Map Parcel Number 41-57	7.2		
D. Total area of the property 8.9	Area of pro	perty to be disturbed	0.5
E. Present zoning district(s) Industri	rial Park		
5. <u>REFERRAL CASE INFORMATION:</u> A. Has this referral been previously	reviewed by the Genesee County I	Planning Board?	
NO YES If yes, give da	ate and action taken		
B. Special Use Permit and/or Varian	nces refer to the following section(s) of the present zonin	g ordinance and/or law
Not applicable			
C. Please describe the nature of this	request Changes to commerci	al buildings square	footage on a previously
approved site plan.			
	> C 11 · · · · ·		
6. <u>ENCLOSURES</u> – Please enclose copy(1, 1 1 1 1
 Local application Site plan Subdivision plot plans SEQR forms 	 Zoning text/map amendmer Location map or tax maps Elevation drawings Agricultural data statement 	ts New or 0 Photos Other:	updated comprehensive plan
7. CONTACT INFORMATION of the per	rson representing the community i	n filling out this form	(required information)
Name Daniel Lang	Title CEO/ZEO	Phone (585)	343 - 1729 Ext. 222

Address City State Zip 3833 V	Vest Main St. Rd. Batavia NY 14020	Email dlang@townofbatavia.com
riddiess, Gity, State, Zip 0000 V		

Building and Zoning Application Permit No._____

Town of Batavia 3833 West Main Rd. Batavia NY 14020 PH. 585-343-1729

Date/ Zone Flood Zone Wellhead Protection Corner Lot
New Construction 🖌 Fence Pond Sign Alteration(s) Addition Demolition
Accessory Bldg. Mobile Home Fill Permit Home Occupation Land Separation Site Plan Approval
Special Use Permit Temporary Use Subdivision Zoning Variance Request Other Specify:
Tax Map No. 4-1-57.2
Dwners NameGateway GS, LLC Phone No. () 585-654-6650
AddressAddress
Applicants Name Andrew Gallina Project Address 7995 & 8003 Call Parkway
Mail Address Phone No () 585-654-6650
Description of Project:Proposed 7,800 SF building addition on Lot 2 (#7995) & Proposed 6,600 SF building
addition on Lot 5 (#8003). Lot 3 (# 7997) building square footage reduced from 27,000 to 17,400 SF
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Existing Use Open Lot Proposed Use Office Space
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Extimated Cost Building Plumbing Mechanical Miscellaneous EQR CLASSIFICATION Type 1 Type 2 Unlisted D eview completed by Planning Board D Eview completed by Planning Board D Ermit Fee \$ Application Date/ Permit Expires On/

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Signature of Owner or Authorized Agent

4/7/22

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.

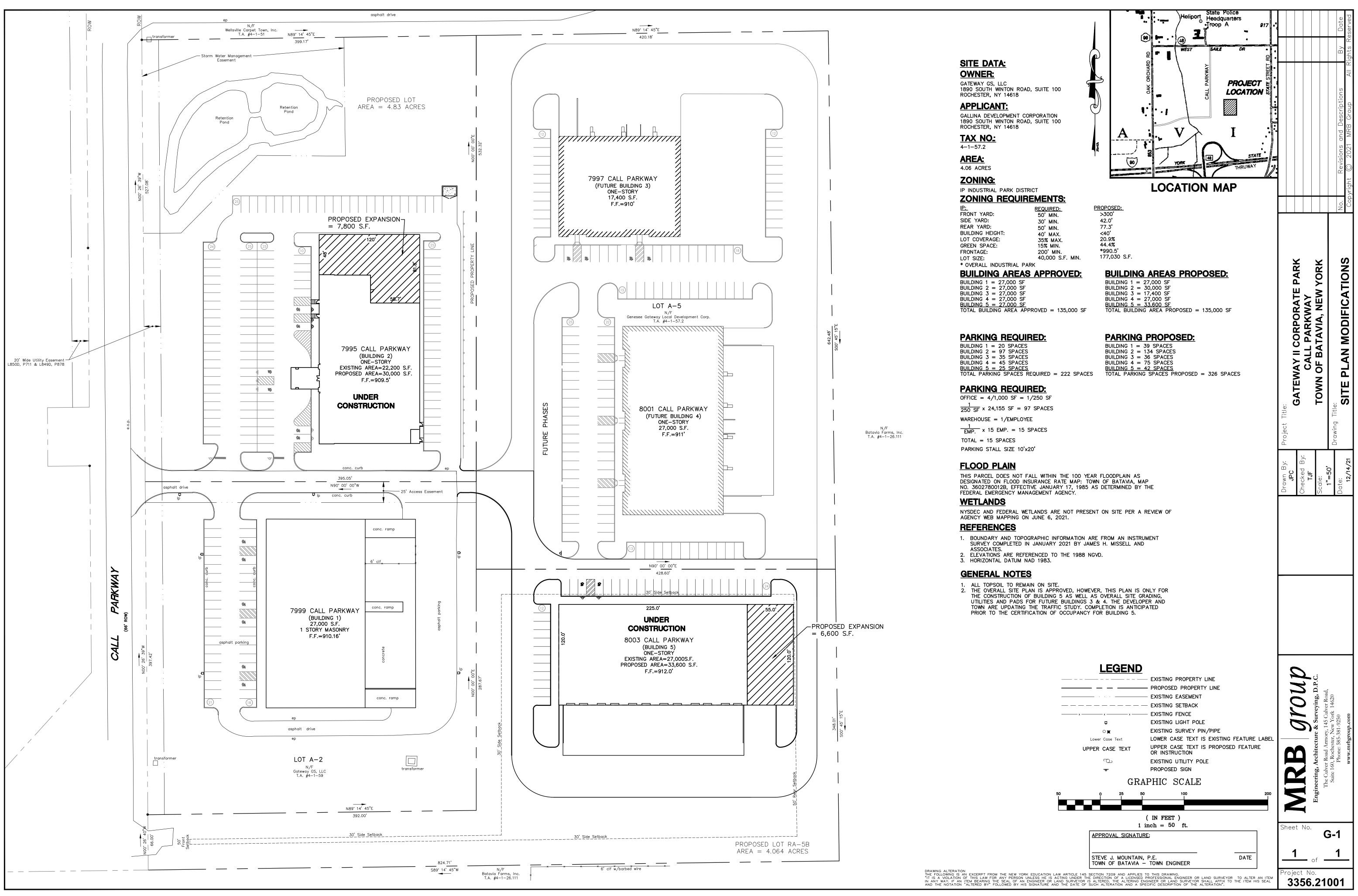
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project:			
Gateway II - Updates			
Project Location (describe, and attach a location map):			
7995 & 8003 Call Parkway			
Brief Description of Proposed Action:			
Proposed 7,800 SF building addition on Lot 2 (#7995) & Proposed 6,600 SF building addition on Lot 5 (#8003). Lot 3 (# 7997) building square footage is proposed to be reduced from 27,000 to 17,400 SF			
Name of Applicant or Sponsor:	Telephone: 585-654-6650	2	
Gateway GS, LLC	E-Mail:		
Address:			
1890 South Winton Road Suite 100			
City/PO:	State:	Zip Code:	
Rochester	NY	14618	
1. Does the proposed action only involve the legislative adoption of a plan, loca administrative rule, or regulation?	l law, ordinance,	NO YES	
If Yes, attach a narrative description of the intent of the proposed action and the e may be affected in the municipality and proceed to Part 2. If no, continue to quest	nvironmental resources th tion 2.	at 🔽 🗖	
2. Does the proposed action require a permit, approval or funding from any other	er government Agency?	NO YES	
If Yes, list agency(s) name and permit or approval:			
 a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 	8.9 acres 0.5 acres 11.5 acres		
 4. Check all land uses that occur on, are adjoining or near the proposed action: Urban Rural (non-agriculture) Industrial Commercia Forest Agriculture Aquatic Other(Spece Parkland 		ban)	

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?		\checkmark	
b. Consistent with the adopted comprehensive plan?		\checkmark	
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		NO	YES
o. Is the proposed action consistent with the predominant character of the existing out of natural fandscape?			\checkmark
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES
If Yes, identify:		\checkmark	
		NO	YES
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		$\overline{\mathbf{V}}$	
b. Are public transportation services available at or near the site of the proposed action?		\square	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?		$\overline{\checkmark}$	
9. Does the proposed action meet or exceed the state energy code requirements?		NO	YES
If the proposed action will exceed requirements, describe design features and technologies:			V
10. Will the proposed action connect to an existing public/private water supply?		NO	YES
If No, describe method for providing potable water:			V
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment:			\checkmark
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or distric	t	NO	YES
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?		\checkmark	
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?			\checkmark
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
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:	_	<u> </u>	
	_		
		4819	100

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
Shoreline Forest 🖌 Agricultural/grasslands Early mid-successional		
Wetland 🗹 Urban 🗋 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
	\checkmark	
16. Is the project site located in the 100-year flood plan?	NO	YES
8	\checkmark	
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES
If Yes,		
a. Will storm water discharges flow to adjacent properties?	\checkmark	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:		
Existing storm water management facility on site.		
18. Does the proposed action include construction or other activities that would result in the impoundment of water	NO	YES
or other liquids (e.g., retention pond, waste lagoon, dam)?		
If Yes, explain the purpose and size of the impoundment:	\checkmark	
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES
If Yes, describe:		
20.Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?	NO	YES
If Yes, describe:		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BE	ST OF	
MY KNOWLEDGE		
Applicant/sponsor/name: Gateway GS, LLC Date: 4/7/8	2	
Signature: There hamp -MAB Group Title: Ayout		

PRINT FORM



T-07-BAT-4-22

