



## GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

**T-12-BAT-10-23**

Review Date

**10/12/2023**

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

**BATAVIA, T.**

**PLANNING BOARD**

**Matthew Di Iorio**

**Site Plan Review**

**Site Plan Review for a new sign for an existing underground utility construction equipment business (Ditch Witch).**

Location  
Zoning District

**4754 E. Saile Dr., Batavia**

**Industrial (I) District**

### PLANNING BOARD RECOMMENDS:

**APPROVAL**

EXPLANATION:

**The proposed sign should pose no significant county-wide or inter-community impact.**

Director

October 12, 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-12-BAT-10-23



**\* GENESEE COUNTY \*  
PLANNING BOARD REFERRAL**

RECEIVED  
Genesee County  
Dept. of Planning  
9/25/2023

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 Batavia  
Address 3833 West Main Street Road  
City, State, Zip Batavia NY 14020  
Phone (585) 343 - 1729 Ext. \_\_\_\_\_

**2. APPLICANT INFORMATION**

Name Matthew Di Iorio  
Address 4754 East Saile Drive  
City, State, Zip Batavia NY 14020  
Phone (614) 443 - 9751 Ext. \_\_\_\_\_ Email tdiorio@ditchwitchmidstates.com

MUNICIPALITY:  City  Town  Village of Batavia

**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 type="checkbox"/> Special Use Permit          | <input type="checkbox"/> Comprehensive Plan/Update | <input type="checkbox"/> Final                |
| <input checked="" type="checkbox"/> Site Plan Review | <input type="checkbox"/> Other: _____              |   |

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

- A. Full Address 4754 East Saile Drive Batavia NY 14020
- B. Nearest intersecting road Bank Street
- C. Tax Map Parcel Number 5.-1-104.2
- D. Total area of the property 3.2 Acres Area of property to be disturbed 0
- E. Present zoning district(s) Industrial

**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  
Town of Batavia zoning schedule A
- C. Please describe the nature of this request Applicant requesting site plan a review for a 4x8 free standing business sign

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

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

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

Name Troy Williams Title CEO Phone (585) 343 - 1729 Ext. 208  
Address, City, State, Zip 3833 West Main Street Road Batavia NY 14020 Email twilliams@townofbatavia.com

Town  
TOWN VILLAGE CITY OF BATAVIA  
(circle one)

Application # \_\_\_\_\_

# Agricultural Data Statement

Date 9/25/2023

**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>Matthew Dilorio</u> Address: <u>4754 EAST SAILE DR</u> <u>BATAVIA NY 14020</u>	Name: _____ Address: _____ _____

1. Type of Application:  Special Use Permit;  Site Plan Approval;  Use Variance;  
(circle one or more)  Subdivision Approval

2. Description of proposed project: ADDITION OF A 4'x8' FREE STANDING SIGN

3. Location of project: Address: 4754 SAILE DR BATAVIA NY 14020  
Tax Map Number (TMP) 5-1-104.2

4. Is this parcel within an Agricultural District?  NO  YES (Check with your local assessor if you do not know)  
5. If YES, Agricultural District Number \_\_\_\_\_  
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
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: \_\_\_\_\_

[Signature]  
Signature of Municipal Official

9/25/2023  
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.

# Building and Zoning Application Permit No. \_\_\_\_\_

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

Date 9 / 6 / 23 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. 5-1-104,2

Owners Name Matthew Di Iorio Phone No. (614) 443-9751

Address 3660 Interchange Rd Project Road Width \_\_\_\_\_ ft

Applicants Name Matthew Di Iorio Project Address 4754 East Saile Dr, Batavia, NY 14020

E Mail Address tdiorio@ditchwitchmidstates.com Phone No (614) 443-9751 x2370

Description of Project: Adding a free standing 4' x 8' sign

Existing Use \_\_\_\_\_ Proposed Use \_\_\_\_\_

Estimated Cost Building \_\_\_\_\_ Plumbing \_\_\_\_\_ Mechanical \_\_\_\_\_ Miscellaneous \_\_\_\_\_

SEQR CLASSIFICATION Type 1  Type 2  Unlisted

Review completed by Planning Board  Zoning Board of Appeals

Permit Fee \$ \_\_\_\_\_ Application Date \_\_\_/\_\_\_/\_\_\_ Permit Expires On \_\_\_/\_\_\_/\_\_\_

Issuing Officer \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

IN SIGNING THIS DOCUMENT I HEARBY GIVE THE RIGHT OF AN ON SITE INSPECTION TO THE TOWN OF BATAVIA CODE ENFORCEMENT OFFICIAL OR THEIR DESIGNE. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PREFORMANCE OF CONSTRUCTION.

I, \_\_\_\_\_, as Owner or Authorized Agent hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my knowledge.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Date

**Sign Attachment:**

Permit No. \_\_\_\_\_

Applicants Name Matthew Di Iorio Project Address 4754 Saile Dr, Batavia NY 14020

E Mail Address tdiurio@ditchwitchmidstates.com Phone No ( ) 614-443-9751 x2370

Description of Project: New freestanding low profile sign externally illuminated

**Sign Permit Section**

Type of Sign

New  Relocation  Alteration  Reface  Freestanding  Building Sign  Lighted

Sign Dimensions

Height 8 ft Area in Square Feet 4 x 8 = 32 total sq. feet

Wall area if attached to building \_\_\_\_\_ sq. feet Wall location: North  South  East  West

Total Number of existing signs on premises 0 Attached to Building \_\_\_\_\_ Free Standing \_\_\_\_\_

Total Number of signs applicant is applying for 1

New  Relocation  Alteration  Reface  Freestanding  Building Sign  Lighted

Sign Dimensions

Height \_\_\_\_\_ Area in Square Feet \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ total sq. feet

Wall area if attached to building \_\_\_\_\_ sq. feet Wall location: North  South  East  West

Total Number of existing signs on premises \_\_\_\_\_ Attached to Building \_\_\_\_\_ Free Standing \_\_\_\_\_

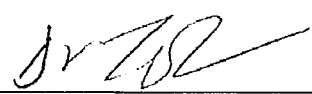
New  Relocation  Alteration  Reface  Freestanding  Building Sign  Lighted

Sign Dimensions

Height \_\_\_\_\_ Area in Square Feet \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ total sq. feet

Wall area if attached to building \_\_\_\_\_ sq. feet Wall location: North  South  East  West

Total Number of existing signs on premises \_\_\_\_\_ Attached to Building \_\_\_\_\_ Free Standing \_\_\_\_\_



7/14/2023

Signature of Owner or Authorized Agent

Date

# 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.

<b>Part 1 – Project and Sponsor Information</b>			
Commercial Sign			
Name of Action or Project: 4754 East Saille Dr, Batavia, NY 14020			
Project Location (describe, and attach a location map): Adding a free standing sign			
Brief Description of Proposed Action: We would like to add a free standing sign.			
Name of Applicant or Sponsor: Matthew Di Iorio		Telephone: 614-443-9751	
Address: 3660 Interchange Rd		E-Mail: <a href="mailto:tdiorio@ditchwitchmidstates.com">tdiorio@ditchwitchmidstates.com</a>	
City/PO: Columbus		State: OH	Zip Code: 43204
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"/>
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:			YES <input type="checkbox"/>
3. 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?			NO <input checked="" type="checkbox"/>
		4' x 8' sign acres	
		4' x 8' sign acres	
		3.2 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 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? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<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?	NO	YES	
	<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: _____	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? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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: N/A	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 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? 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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? 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: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

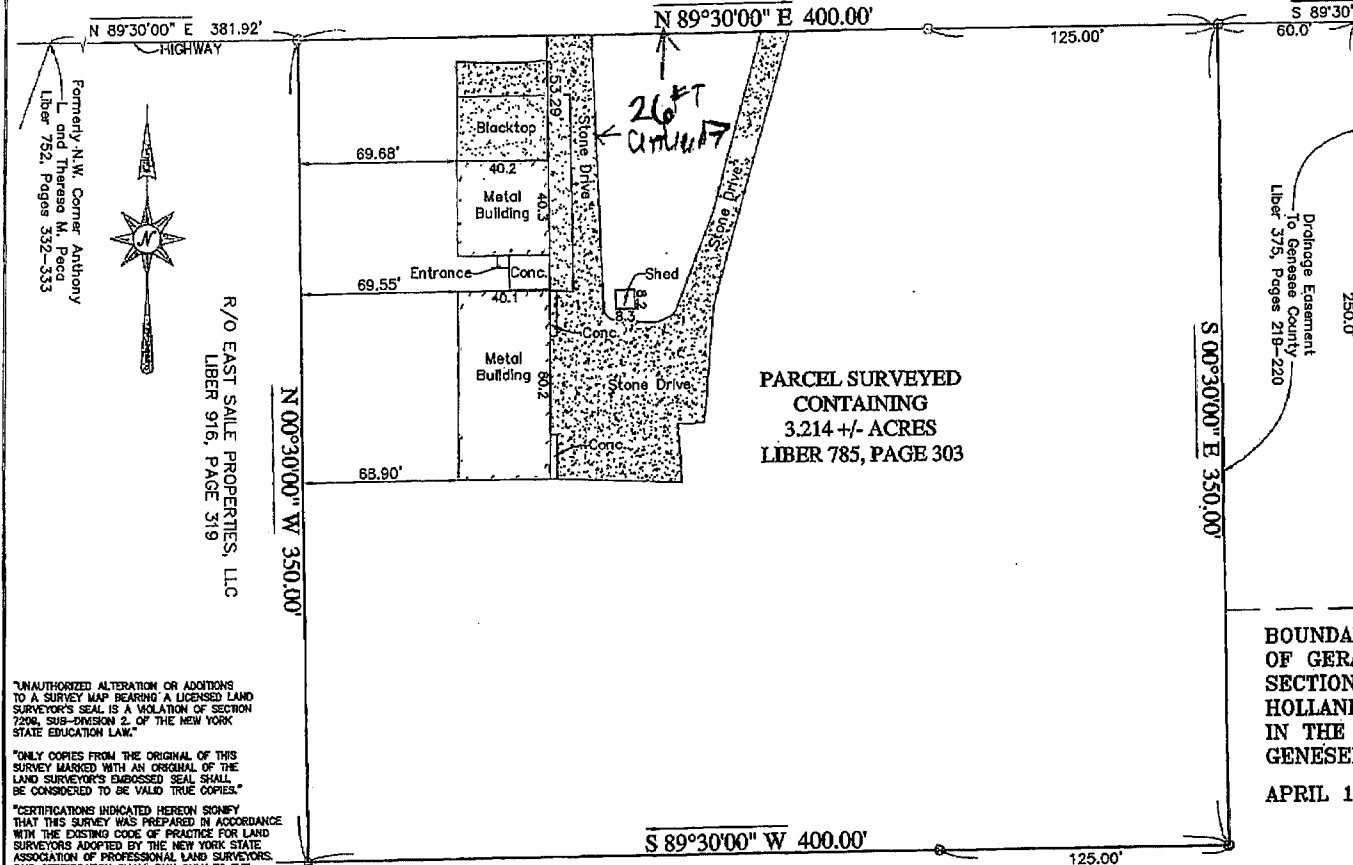
<p>14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:</p> <p><input type="checkbox"/> Shoreline   <input type="checkbox"/> Forest   <input type="checkbox"/> Agricultural/grasslands   <input type="checkbox"/> Early mid-successional</p> <p><input type="checkbox"/> Wetland   <input type="checkbox"/> Urban   <input type="checkbox"/> Suburban</p>		
<p>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?</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>16. Is the project site located in the 100-year flood plan?</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>17. Will the proposed action create storm water discharge, either from point or non-point sources?</p> <p>If Yes,</p> <p>    a. Will storm water discharges flow to adjacent properties?</p> <p>    b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?</p> <p>If Yes, briefly describe:</p> <p>_____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
<p>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)?</p> <p>If Yes, explain the purpose and size of the impoundment: _____</p> <p>_____</p>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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>	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p><b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor/name: <u>Matthew Di Iorio</u> Date: <u>9/6/2023</u></p> <p>Signature: <u></u> Title: <u>President</u></p>		





EAST SAILE DRIVE (50.0' R.O.W.)

GREGORY W. TOWNSEND  
 Licensed Land Surveyor  
 115 Washington Avenue  
 Batavia, New York 14020  
 Phone (585) 344-1331  
 gwlownds@survey@gmail.com



PARCEL SURVEYED  
 CONTAINING  
 3.214 +/- ACRES  
 LIBER 785, PAGE 303

LEGEND  
 ⊙ EXISTING IRON PIN  
 ▲ EXISTING CONCRETE MARKER

REFERENCES  
 SURVEY MAP NO. 01-103-SUBDREV BY  
 GREGORY W. TOWNSEND, L.S., DATED  
 APRIL 7, 2011  
 ABSTRACT OF TITLE NO. G13318 BY  
 CROSSROADS ABSTRACT  
 EASEMENT TO NEW YORK TELEPHONE  
 COMPANY FILED AT LIBER 387 OF  
 DEEDS, PAGE 141  
 RIGHT OF WAY TO IROQUOIS GAS  
 CORPORATION FILED AT LIBER 407  
 OF DEEDS, PAGE 1088  
 OIL AND GAS LEASE TO FLINT OIL AND  
 GAS, INC. FILED AT LIBER 430 OF  
 DEEDS, PAGE 97

BOUNDARY SURVEY SHOWING THE PROPERTY  
 OF GERARD HAITZ, BEING PART OF LOT 1,  
 SECTION 14, TOWNSHIP 12, RANGE 1 OF THE  
 HOLLAND LAND COMPANY'S SURVEY. SITUATE  
 IN THE TOWN OF BATAVIA, COUNTY OF  
 GENESEE AND STATE OF NEW YORK

APRIL 16, 2021 SCALE 1" = 60'  
 JOB NO. 21-177

DATE *04/17/21* *Gregory W. Townsend*  
 N.Y.S.R.L.S. No. 50249

R/O HOLDINGS OF ADONIS, INC.  
 INST. #DE2021-311

"UNAUTHORIZED ALTERATION OR ADDITIONS  
 TO A SURVEY MAP BEARING A LICENSED LAND  
 SURVEYOR'S SEAL IS A VIOLATION OF SECTION  
 7206, SUB-DIVISION 2, OF THE NEW YORK  
 STATE EDUCATION LAW."

"ONLY COPIES FROM THE ORIGINAL OF THIS  
 SURVEY MARKED WITH AN ORIGINAL OF THE  
 LAND SURVEYOR'S EMBOSSED SEAL SHALL  
 BE CONSIDERED TO BE VALID TRUE COPIES."

"CERTIFICATIONS INDICATED HEREON SOLEMNLY  
 THAT THIS SURVEY WAS PREPARED IN ACCORDANCE  
 WITH THE EXISTING CODE OF PRACTICE FOR LAND  
 SURVEYORS ADOPTED BY THE NEW YORK STATE  
 ASSOCIATION OF PROFESSIONAL LAND SURVEYORS.  
 SAID CERTIFICATION SHALL RUN ONLY TO THE  
 PERSON FOR WHOM THE SURVEY IS PREPARED,  
 AND ON HIS/HER BEHALF TO THE TITLE COMPANY,  
 GOVERNMENTAL AGENCY AND LENDING INSTITUTION  
 LISTED HEREON, AND TO THE ASSIGNEES OF THE  
 LENDING INSTITUTION. CERTIFICATION ARE NOT  
 TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR  
 SUBSEQUENT OWNERS."

R/O EAST SAILE PROPERTIES, LLC  
 LIBER 916, PAGE 319

Drainage Easement  
 to Genesee County  
 Liber 375, Pages 218-220



Formerly N.W. Corner Anthony  
 L and Theresa M. Pezo  
 Liber 752, Pages 332-333

# Town of Batavia Web Mapping Application



**LEGEND**

- Water Tank
- Pump Station
- Hydrant**
  - Red
  - Yellow
  - Yellow w/ Blue Caps
- Blowoff**
  - Below-Grade Programmable Flushing Unit
  - Blowoff Connection
  - Portable Continuous Flushing Setup
  - Portable Programmable Hydrant Flushing Unit
- Fittings**
  - Type Not Specified
  - Bend
  - Cap
  - Cross
  - Coupling
  - Reducer
  - Blowoff Connection
  - Sleeve
  - Tee
  - Other
- Meters**
  - Unknown
  - Master Meter
  - Master w/ PRV-PSV
  - Meter
  - PRV-PSV

wandelcompanies.com

# T-12-BAT-10-23



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