



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID **V-01-OAK-1-22**
Review Date **1/13/2022**

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

OAKFIELD, V.
ZONING BOARD OF APPEALS
Lindsey Hilchey
Area Variance(s)
Area Variance for an addition to a single-family home.
Side Yard Setback Minimum required: 8 ft. Existing and proposed: 4 ft.
51 Garibaldi Ave., Oakfield
Residential (R-2) District

PLANNING BOARD DECISION

APPROVAL

EXPLANATION:

Given that the addition will not encroach any further on to the setback than the existing home, the variance should pose no significant county-wide or inter-community impact.

Director

January 13, 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 PLANNING
3837 West Main Street Road
Batavia, NY 14020-9404
Phone: (585) 250-0895

Clear Form

DEPARTMENT USE ONLY:

GCDP Referral # V-01-OAK-1-22



*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED
Genesee County
Dept. of Planning
1/6/2022

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) Oakfield ZBA
Address 37 Main St
City, State, Zip Oakfield, NY14125
Phone () - Ext.

2. APPLICANT INFORMATION

Name Lindsey Hilchey
Address 51 Garibaldi Ave.
City, State, Zip Oakfield, NY14125
Phone () - Ext. Email

MUNICIPALITY: City Town Village of Oakfield

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

- | | | |
|---|--|--------------------------------------|
| <input checked="" type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Map Change | 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 type="checkbox"/> Site Plan Review | <input type="checkbox"/> Other: _____ | |

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

A. Full Address 51 Garibaldi Ave.
B. Nearest intersecting road South Pearl St
C. Tax Map Parcel Number 3.-1-8
D. Total area of the property .26 Acres Area of property to be disturbed _____
E. Present zoning district(s) R-2

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
SetBacks
C. Please describe the nature of this request Required setback is 8 feet. Resident is asking for a 4 foot setback for an addition

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 type="checkbox"/> Location map or tax maps | <input 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 type="checkbox"/> Agricultural data statement | |

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

Name Mike Morris Title ZEO Phone (585) 250 - 0895 Ext. _____
Address, City, State, Zip 37 Main st Oakfield Ny 14125 Email villageceozeo@gmail.com

VILLAGE OF OAKFIELD

37 Main Street, Oakfield, N. Y. 14125

Telephone: (585)-948-5862 Fax: (585)-948-9588

Website: ivillage@rochester.rr.com

ZONING BOARD OF APPEALS APPLICATION

I (Name) Chad or Lindsey Hillchey of (address) 51 Garibaldi Ave, Oakfield hereby appeal to the Zoning Board of Appeals the decision of the Zoning Officer on the application for 2 story 18x20 addition dated 12/10/21

Type of Appeal: Area Variance: Use Variance: Interpretation: Application Fee: \$150

Date/ Plans Submitted: 12/10/21 Environmental Assessment Form Submitted: 1/5/21

- PROPERTY ADDRESS: 51 Garibaldi Ave
Tax Map Parcel #(s): 1838013.-1-8 Parcel size: 40 width 145 depth
Property Zoning District: 210- 1 Family Res
- Present Use of Property: Single Family Home
Proposed Use of Property: Single Family Home
Provision of Code Appealed (give section and subsection numbers):
Section 305 Existing Lots of record
- Has a previous applications for this property been made? No Planning Board No Zoning Board of Appeals. If yes, provide results: _____
- Is property located within 500 feet of a municipal boundary or on a state or county road? No

Description of Proposal / Detail of Request: (Use extra sheet if necessary)

Please review the legal criteria on the next page

Interpretation of Zoning Ordinance is requested

because _____

Area Variance is requested

because Owner would like the proposed addition to extend out the back of existing house, staying in line on west side with current house that is roughly 4.5' from property line

A Use Variance is requested

because _____

The applicant(s) hereby affirms they are title owner(s) and the above information is accurate and complete, to the best of their knowledge.

Applicant Signature 
Lindsey Hillchey (Jan 4, 2022 12:40 EST)

Applicant Name Printed Lindsey Hillchey

Mailing Address 51 Garibaldi Ave, Oakfield NY 14125 Phone # 585-356-1458

AREA VARIANCE TEST

New York State criteria: In making its determination, the ZBA shall take into consideration the benefit to the applicant if the variance is granted, as weighed against the detriment to the health, safety and welfare of the neighborhood or community by such grant. In making such determination the board shall also consider:

_____ 1) whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance;

_____ 2) whether the benefit sought by the applicant can be achieved by some method feasible for the applicant to pursue, other than an area variance;

_____ 3) whether the requested area variance is substantial;

_____ 4) whether the proposed variance will have an adverse effect or impact on the physical or environmental condition in the neighborhood or district; and

_____ 5) whether the alleged difficulty was self-created; which consideration shall be relevant to the decision of the board of appeals, but shall not necessarily preclude the granting of the area variance.

The ZBA, in the granting of area variances, shall grant the minimum variance that it shall deem necessary and adequate and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community. -----

USE VARIANCE TEST

New York State criteria: In making its determination, the ZBA shall take into consideration the benefit to the applicant if the variance is granted, as weighed against the detriment to the health, safety and welfare of the neighborhood or community by such grant. In making such determination the board shall also consider:

_____ 1) the applicant cannot realize a reasonable return, provided that lack of return is substantial as demonstrated by competent financial evidence

_____ 2) that the alleged hardship relating to the property in question is unique, and does not apply to a substantial portion of the district or neighborhood;

_____ 3) that the requested use variance, if granted, will not alter the essential character of the neighborhood; and

_____ 4) that the alleged hardship has not been self-created.

The ZBA, in the granting of use variances, shall grant the minimum variance that it shall deem necessary and adequate to address the unnecessary hardship proved by the applicant, and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community.
.....

The _____ Variance was Denied () Granted () with the following conditions as attached. (if applicable) The Interpretation was Supported () Overturned ()

Signed: _____ 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.

Part 1 – Project and Sponsor Information			
Chand and Lindsey Hillchey			
Name of Action or Project: Hillchey Addition			
Project Location (describe, and attach a location map): 51 Garabaldi Ave, Oakfield NY 14125			
Brief Description of Proposed Action: Construct a 18' w x 20' L 2 story addition onto back of existing home			
Name of Applicant or Sponsor: Getterr Done Construction Inc		Telephone: 585-322-9983	
		E-Mail: info@getterrdone.com	
Address: 6125 Route 362			
City/PO: Bliss		State: NY	Zip Code: 14024
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 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: Village Of Oakfiled			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ .13 acres			
b. Total acreage to be physically disturbed? _____ .009 acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ .13 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 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			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<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 <input type="checkbox"/>	YES <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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO <input checked="" type="checkbox"/>	YES <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 type="checkbox"/>	<input checked="" 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: _____ _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO <input type="checkbox"/>	YES <input checked="" 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 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <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? 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 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <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 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?	NO	YES
If Yes,	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
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)?	NO	YES
If Yes, explain the purpose and size of the impoundment: _____ _____	<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?	NO	YES
If Yes, describe: _____ _____	<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?	NO	YES
If Yes, describe: _____ _____	<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>Lindsey Hilchey</u> Date: <u>Jan 4, 2022</u>		
Signature: <u></u> Title: <u>N/A</u> <small>Lindsey Hilchey (Jan 4, 2022 12:40 EST)</small>		






Zoning Varaince and EAF Form_sent for signature

Final Audit Report

2022-01-04

Created:	2022-01-04
By:	Michael Fox (info@getterrdone.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAY9AG-V9dasbyt1zOq26sGG_NiUPicDe9

"Zoning Varaince and EAF Form_sent for signature" History

-  Document created by Michael Fox (info@getterrdone.com)
2022-01-04 - 4:06:51 PM GMT- IP address: 71.215.89.185
-  Document emailed to Lindsey Hilchey (strang1020@yahoo.com) for signature
2022-01-04 - 4:08:02 PM GMT
-  Email viewed by Lindsey Hilchey (strang1020@yahoo.com)
2022-01-04 - 5:38:22 PM GMT- IP address: 98.10.161.127
-  Document e-signed by Lindsey Hilchey (strang1020@yahoo.com)
Signature Date: 2022-01-04 - 5:40:42 PM GMT - Time Source: server- IP address: 98.10.161.127
-  Agreement completed.
2022-01-04 - 5:40:42 PM GMT

VILLAGE OF OAKFIELD, New York 14125

OWNER	Name: <u>Chad & Lindsey Hillchey</u>	APPLICANT (IF OTHER THAN OWNER)	Name: <u>Getters Done Const.</u>
	Address: <u>51 Garibaldi Ave</u> <u>Oakfield NY 14125</u>		Address: <u>6125 Route 362</u> <u>Bliss NY 14024</u>
	Phone #: <u>585-356-1458</u>		Phone #: <u>585-322-9983</u>

PROJECT SITE LOCATION: 51 Garibaldi TAX MAP # (TMP) 1838013.7-8

Check with the local Assessor

INSTRUCTIONS: Using a ball point pen please fill out this application as completely as possible. Submit additional Attachment(s) [listed on the back of this sheet] and the completed application to the Village Clerk. This application is NON-TRANSFERRABLE and is NOT a permit to commence work.

- 1 Application for Use: RESIDENTIAL ; COMMERCIAL ; INDUSTRIAL ; RECREATIONAL ; SITE PLAN
- 2 Permit for: NEW CONSTRUCTION ; ADDITION ; ALTERATION ; REPAIR ; CHANGE IN USE
- 3 Is this parcel; A corner lot? YES ; NO ; In a Sewer District? YES ; NO ; In a Water District? YES ; NO
- 4 List the DIMENSIONS of the parcel: 40 x 145 and/or TOTAL PARCEL AREA (Acres) .13
- 5 What are the parcel setbacks [Ft.] from the project. FRONT _____; REAR 60 & SIDE yards (a) _____ (b) _____
- 6 Total % of coverage of ALL buildings on the parcel (including the proposed project): 34 TOTAL %
- 7 Does this project require County Health Department approval? NO ; YES , If yes, submit attachment F.
- 8 Is this parcel property subdivided? NO ; YES , If yes, provide documentation.
- 9 Do you give the Village VALID CONSENT to do the required inspections? YES NO , If no, what procedures?
- 10 Name of Architect/Engineer WW Structure Solutions Telephone # 716-525-4093
Address 3950 Batavia-Elba Townline Rd, Oakfield
- 11 Name of Contractor(s) Getters Done Const. Telephone # 585-322-9983
Address 6125 Route 362
- 12 Estimates cost of the project? 125,000 [Substantiation may be required]

13 Total Dwelling units: 1

15 Describe the proposed project and use:
2 story addition
18x20 Deno existing
garage

PROPOSED PROJECT	HEIGHT	LENGTH	WIDTH	SQ. FT.
HOUSE				
GARAGE				
ACCESSORY BUILDING				
SWIMMING POOL				
DECK				
COMMERCIAL/INDUSTRIAL				
OTHER <u>Addition Deno</u>	<u>16</u>	<u>20</u>	<u>18</u>	<u>720</u>
TOTAL SQ. FT.				<u>720</u>

[Use additional sheet(s) for more information]

****SIGNATURE BLOCK*******

I hereby certify that I have read the instructions 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 a permit does not presume to give authority to violate or cancel provisions of any other state or local law or ordinance regulating construction or performance of construction.

Signature - OWNER

[Signature]
Signature - APPLICANT (if different than owner)

Date

9/16/21
Date

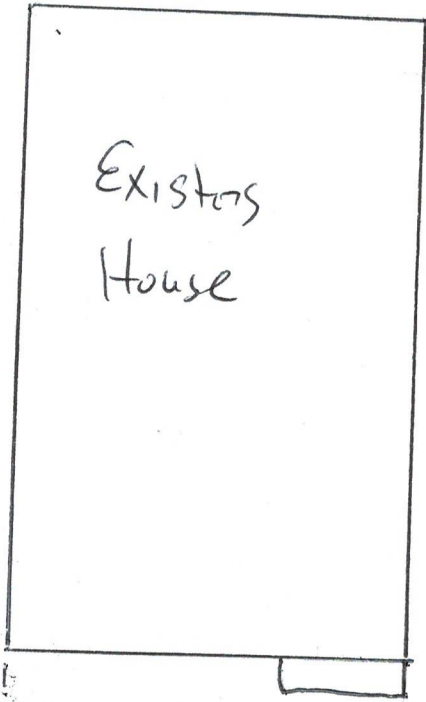
Action taken by Z.E.O./C.E.O.: Approved ; Denied ; Reason for denial; Schedule A

Article _____ Section _____ Subsection _____ Paragraph _____ Briefly Describe: _____ Zoning _____ District _____

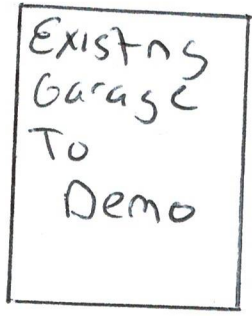
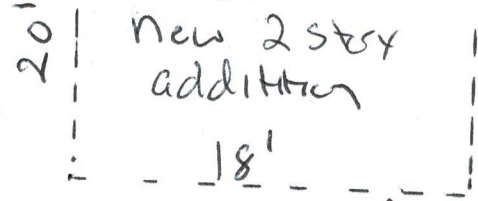
Z.E.O. Signature: _____
C.E.O. Signature: _____
Date of Action: _____

Wetlands Flood Plain	YES	NO	FEES: Cash _____ Check # _____ Receipt # _____	Special Use _____	Zoning _____
	<input type="checkbox"/>	<input type="checkbox"/>		Public Hearing _____	Building _____
				TOTAL _____	TOTAL _____

OFFICE USE ONLY



4 ft.



8'



8'



V-01-OAK-1-22



04/23/2018