

## GENESEE COUNTY PLANNING BOARD REFERRALS **NOTICE OF FINAL ACTION**

T-05-BAT-08-25 GCDP Referral ID

30000000000000000000000000000000000000	Review Date	8/14/2025
Municipality	BATAVIA, T.	
<b>Board Name</b>	PLANNING BOARD	
Applicant's Name	Daryl Martin (Architect	
Referral Type	Site Plan Review	
Variance(s)		
Description:		52 sq. ft. (40 x 91.3 ft.) rear addition to an existing motor business (Toyota of Batavia).
Location	3899 W. Main Street Ro	l. (NYS Rt. 5), Batavia
7 · D: : :	Carrons annial (C) District	

Zoning District

|Commercial (C) District

PLANNING BOARD RECOMMENDS:

APPROVAL WITH MODIFICATION(S)

**EXPLANATION:** 

The required modifications is that the storage and disposal of all new and used waste oils, lubricants, fuels, coolants and other hazardous materials shall be conducted in a manner consistent with all applicable State and Federal laws. With this required modification, the proposed addition to an existing motor vehicle sales and service business should pose no significant county-wide or inter-community impact. It is recommended that the applicant obtain an easement or other legally-binding agreement with the owner of the adjacent property located immediately to the east (tax map parcel number 7.-1-10.111) to ensure future access.

August 14, 2025

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-05-BAT-08-25



# \* GENESEE COUNTY \* PLANNING BOARD REFERRAL

**RECEIVED** 

By Genesee County Department of Planning at 9:15 am, Jul 31, 2025

Required According to:

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

(2 10000 0000	ver mille questions as rany as	r/	
1. REFERRING BOARD(S) INFORMATION	2. APPLICANT INFOR	MATION	
Board(s) TOB Planning Board Name Daryl Martin Architect			
Address 3833 West Main Street Road	Address 3899 West M	ain St Rd	
City, State, Zip Batavia NY 14020	City, State, Zip Batavia	NY 14020	
Phone (585) 343 - 1729 Ext.	Phone (716) 667 - 1436 Ex	Email dmarchtecs@gmail.com	
MUNICIPALITY: City Town	Village of Batavia		
3. TYPE OF REFERRAL: (Check all applicable items)			
Use Variance Zoning	Map Change Text Amendments ehensive Plan/Update	Subdivision Proposal  Preliminary  Final	
4. LOCATION OF THE REAL PROPERTY PERTA	NING TO THIS REFERRAL:		
A. Full Address 3899 West Main Street Road	Batavia NY 14020		
B. Nearest intersecting road Lewiston Rd			
C. Tax Map Parcel Number 71-10.11 71-	.6.11		
D. Total area of the property 4.4 Acres	Area of property to b	e disturbed 3652 Sq Ft	
E. Present zoning district(s) Commercial			
5. REFERRAL CASE INFORMATION:  A. Has this referral been previously reviewed by a long review of the property		oard?	
		recent reging ordinance and for law	
B. Special Use Permit and/or Variances refer to	he following section(s) of the p	resent zoning ordinance and/or law	
C. Please describe the nature of this request 40x	Q1 3 Addition To the rear of	the huilding	
C. Flease describe the nature of this request 40x	51.5 Addition To the real of	the building	
	The second secon		
6. ENCLOSURES – Please enclose copy(s) of all appr	opriate items in regard to this re	eferral	
<ul> <li>Local application</li> <li>Site plan</li> <li>Subdivision plot plans</li> <li>Zoning</li> <li>Location</li> <li>Elevation</li> </ul>	text/map amendments on map or tax maps on drawings tural data statement	New or updated comprehensive plan Photos Other:	
7. <u>CONTACT INFORMATION</u> of the person represer	ating the community in filling or	at this form (required information)	
Name Troy Williams Title C		none (585) 343 - 1729 Ext. 208	
Address City, State, Zip 3833 West Main St Rd B		Email twilliams@townofbatavia.com	

#### **Julie Boasi**

From: Troy Williams <twilliams@townofbatavia.com>

**Sent:** Thursday, July 31, 2025 3:03 PM

To: Julie Boasi

**Subject:** RE: Review 3899 W Main St Rd

Caution! This message was sent from outside your organization.

Allow sender | Block sender | Report



Town of Batavia
Zoning / Code Enforcement
Twilliams@townofbatavia.com
585-343-1729 Ext 208

From: Julie Boasi < Julie. Boasi@geneseeny.gov>

Sent: Thursday, July 31, 2025 11:48 AM

To: Troy Williams < twilliams@townofbatavia.com>

Cc: Felipe Oltramari <Felipe.Oltramari@geneseeny.gov>; Julie Boasi <Julie.Boasi@geneseeny.gov>

Subject: RE: Review 3899 W Main St Rd

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning, Troy,

We have a few questions for you regarding this project:

- 1. Do you require a separate SUP for this addition since the project is located in a Commercial District? No
- 2. Do you require a side yard setback variance since the new addition is only 20.46 feet away from the side lot line? I would consider it preexisting non-conforming because they are not building any closer to the property line.
- 3. Do you know if the applicant has an access agreement with the owner of the adjoining parcel where the "stone drive" is located? If so, could you please forward a copy to us? That I am not sure of.

Also, the tax map parcel number for this location is 7.-1-16.11, not 7.-1-10.11 as indicated by the applicant. I updated the number on our copy of the application. Thank you

Thank you, Julie

\_\_\_\_\_

Julie L. Boasi, MPA
Senior Planner
Genesee County Planning Department
3837 West Main Street Road

TOWN VILLAGE	CITY OF <u>ROTAVIA</u>	
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# Agricultural Data Statement

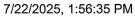
Date <u>7/23/25</u>

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.

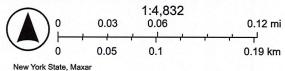
Applicant	Owner if Different from Applicant			
Name: Daryl Martin Architect Address: 3899 West Main Street Road Batavia NY 14020	Name:Address:			
<ol> <li>Type of Application: ☐Special Use Permit; ✓ Site (circle one or more) ☐ Subdivision Approval</li> <li>Description of proposed project: New 40ft X91.3 ft real</li> </ol>				
3. Location of project: Address: 3899 West Main Street Road  Tax Map Number (TMP) 71-10.111  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 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: Legancy Lands LLC Address: P/O Box 189 Byron NY 14422 Is this parcel actively farmed? NO YES  Name: Address:	Name: Address: Is this parcel actively farmed?			
Is this parcel actively farmed?	Is this parcel actively farmed?  NO YES			
Signature of Applicant  Reviewed by:  Signature of Municipal Official	Signature of Owner (if other than applicant)  7/22/35  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.				

# Town of Batavia Web Map









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

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

Date 6 / 30 / 2016 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 ❷ Other □ Specify:
Tax Map No
CONTACT: FRANK BURK  Owners Name UPSTATE AUTOMOTIVE PROPERTIES LLC Phone No. (416) 870-3504
Address 36 WEST MAIN ST (NYS 27. 5) Project Road Width 99 ft
Applicants Name DARYL MARTIN ARCHITECT Project Address 3899 W. MAIN ST. (NYS 127.5)
E Mail Address dinarchtecs Qamail. com Phone No (716) 667-1436
Description of Project: 40' × 913' (3652 SF) REAR ADDITION (METAL BULDING)
Existing Use AUTOMOTIVE SALES & REPAIR
Estimated Cost Building \$ 600 K Plumbing Mechanical Miscellaneous
Individual of the state of the
Transmis Weenanical Wiscenanical
SEQR CLASSIFICATION Type 1  Type 2  Unlisted SEQR Type 2 #9
SEQR CLASSIFICATION Type 1  Type 2 B Unlisted SEQR Type 2 #9
SEQR CLASSIFICATION Type 1  Type 2  Unlisted SEQR Type 2 #9  Review completed by Planning Board Zoning Board of Appeals
SEQR CLASSIFICATION Type 1  Type 2  Unlisted SEQR Type 2 #9  Review completed by Planning Board  Zoning Board of Appeals  Application Date/
SEQR CLASSIFICATION Type 1 Type 2  Unlisted SEQR Type 2 #9  Review completed by Planning Board Sequence Sequenc
SEQR CLASSIFICATION Type 1  Type 2  Unlisted SEQR Type 2 #9  Review completed by Planning Board   Zoning Board of Appeals
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SEQR CLASSIFICATION Type 1 Type 2  Unlisted SEQR Type 2 #9  Review completed by Planning Board Sequence Sequenc

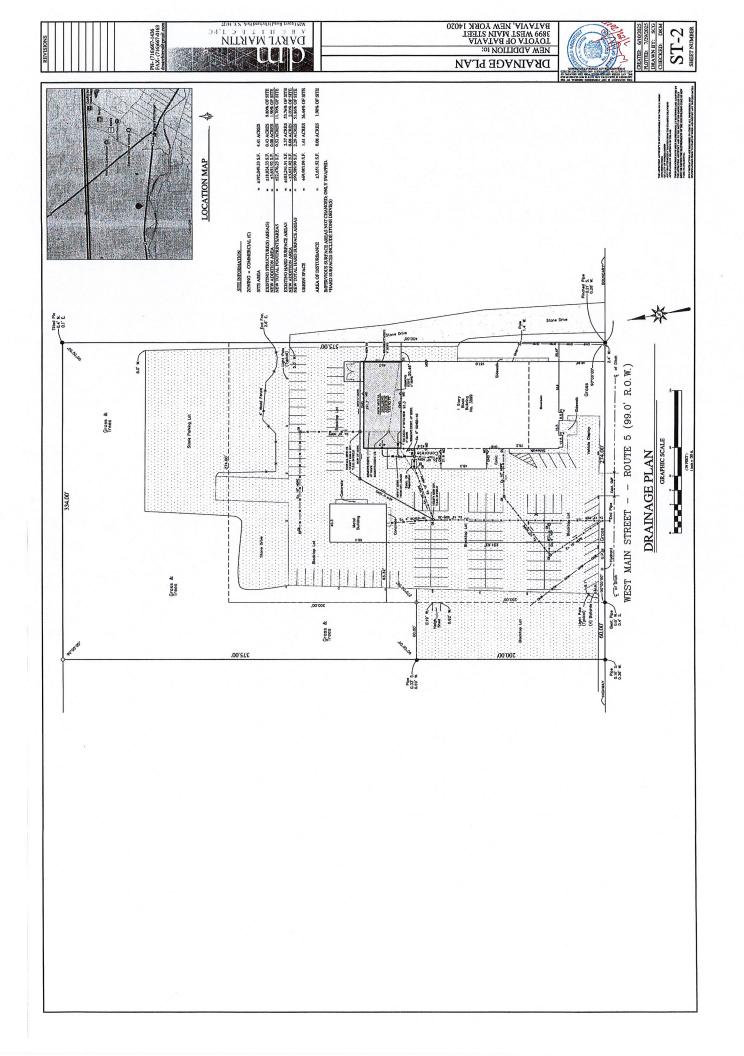


REVISIONS 8/17/2022 SCG

SITE PLAN
NEW ADDITION
TOYOTA OF BA
3899 WEST MAI

CREATED: 6/10/2025
PLOTTED: 7/02/2025
DRAWN BY: SCG
CHECKED: DKM

ST-1



### Full Environmental Assessment Form Part 1 - Project and Setting

### **Instructions for Completing Part 1**

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

### A. Project and Applicant/Sponsor Information.

Name of Action or Project:		
Rear addition to Toyota of Batavia		
Project Location (describe, and attach a general location map):		
3899 West Main Street (NYS Rt. 5)		
Brief Description of Proposed Action (include purpose or need):		
New 40 ft X 91.3 ft rear addition (pre-fab. metal building).		
Name of Applicant/Sponsor:	Telephone: 716-667-1436	
Daryl Martin Architect  E-Mail: dmarchtecs@gmail.com		1
Address: 3625 Eggert Road, Suite 201		
City/PO: Orchard Park	State: New York	Zip Code: 14127
Project Contact (if not same as sponsor; give name and title/role):	Telephone: 716-667-1436	
Daryl Martin or Steve Geltz	E-Mail: dmarchtecs@gmail.com	
Address:		
3625 Eggert Road, Suite 201		
City/PO:	State:	Zip Code:
Orchard Park	New York	14127
Property Owner (if not same as sponsor):	Telephone: 716-870-3504	
Upstate Automotive Properties LLC. Contact: Frank Bork	E-Mail:	
Address:		
36 West Main Street (NYS Rt. 5)		
City/PO: Attica	State: New York	Zip Code: 14011

### **B.** Government Approvals

B. Government Approvals assistance.)	s, Funding, or Spo	nsorship. ("Funding" includes grants, loans, ta	x relief, and any oth	er forms of financial
Government Entity		If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)	
a. City Council, Town Boar or Village Board of Trust				
b. City, Town or Village Planning Board or Comm	☑Yes□No hission	Town of Batavia Planning Board		
c. City, Town or Village Zoning Board of	☑Yes□No Appeals	Town of Batavia ZBA		
d. Other local agencies	∐Yes <b>⊠</b> No			
e. County agencies	<b>☑</b> Yes □No	Genesee County Planning		
f. Regional agencies	□Yes ☑No			
g. State agencies	<b>Z</b> Yes□No	New York State DOT		
h. Federal agencies  i. Coastal Resources.	□Yes <b>☑</b> No			
	in a Coastal Area, o	r the waterfront area of a Designated Inland Wa	iterway?	□Yes <b>☑</b> No
ii. Is the project site locat iii. Is the project site within	ed in a community n a Coastal Erosion	with an approved Local Waterfront Revitalizati Hazard Area?	on Program?	☐ Yes☑No ☐ Yes☑No
C. Planning and Zoning				
C.1. Planning and zoning a				
<ul><li>only approval(s) which must</li><li>If Yes, complete sec</li></ul>	t be granted to enabetions C, F and G.	nendment of a plan, local law, ordinance, rule of le the proposed action to proceed? uplete all remaining sections and questions in Pa	-	<b>☑</b> Yes□No
C.2. Adopted land use plan	s.			- 10.
where the proposed action	would be located?	age or county) comprehensive land use plan(s)		☑Yes□No
would be located?		cific recommendations for the site where the pr	-	<b>∠</b> Yes□No
b. Is the site of the proposed a Brownfield Opportunity A or other?) If Yes, identify the plan(s):	action within any lo rea (BOA); designa	ocal or regional special planning district (for ex sted State or Federal heritage area; watershed m	ample: Greenway; anagement plan;	∐Yes <b>⊠</b> No
c. Is the proposed action loca or an adopted municipal fa If Yes, identify the plan(s):	ated wholly or particular mland protection	ally within an area listed in an adopted municip plan?	al open space plan,	∐Yes <b>∑</b> No
territoria del constitución de la constitución de l				

C.3. Zoning	· · · · · · · · · · · · · · · · · · ·
a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance.     If Yes, what is the zoning classification(s) including any applicable overlay district?      Zoned 'C' (Commercial)	☑Yes□No
b. Is the use permitted or allowed by a special or conditional use permit?	☑Yes No
c. Is a zoning change requested as part of the proposed action?  If Yes,  i. What is the proposed new zoning for the site?	□ Yes <b>☑</b> No
C.4. Existing community services.	
a. In what school district is the project site located? 180200 - Batavia City School	
b. What police or other public protection forces serve the project site?	
Town of Batavia Police, Genesee County Sheriff and NY State Police	
c. Which fire protection and emergency medical services serve the project site?  _Batavia Town #1	
d. What parks serve the project site?  None	
D. Project Details	
D.1. Proposed and Potential Development	
a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mix components)? Commercial	ed, include all
b. 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?  4.41 acres  6.41 acres	
c. Is the proposed action an expansion of an existing project or use?  i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, mile square feet)? % 16.25 Units: 3,651.92 Sq. Ft.	✓ Yes No es, housing units,
d. Is the proposed action a subdivision, or does it include a subdivision?	□Yes <b>☑</b> No
If Yes,  i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)	
ii. Is a cluster/conservation layout proposed? iii. Number of lots proposed? iv. Minimum and maximum proposed lot sizes? Minimum  Maximum	□Yes □No
iv. Minimum and maximum proposed lot sizes? Minimum Maximum e. Will the proposed action be constructed in multiple phases?	☐ Yes <b>Z</b> No
i. If No, anticipated period of construction: months ii. If Yes:	
<ul> <li>Total number of phases anticipated</li> <li>Anticipated commencement date of phase 1 (including demolition) month year</li> <li>Anticipated completion date of final phase month year</li> <li>Generally describe connections or relationships among phases, including any contingencies where progression timing or duration of future phases:</li> </ul>	ress of one phase may

f. Does the project include	do nous rooi.	dontial mana?			
If Yes, show numbers of					□Yes <b>☑</b> No
	amily	Two Family	Three Family	Multiple Family (four or more)	
	<u> </u>	1 110 1 uniniy	Timee Taimiy	Munipic I anni y (10th of more)	
Initial Phase					
At completion					
of all phases	<del></del>				
g. Does the proposed act If Yes, i. Total number of structure.	ctures	1	·		<b>☑</b> Yes□No
ii. Dimensions (in feet) iii. Approximate extent of	of largest p of building	roposed structure: space to be heated	height; or cooled:	91.3 Ft. width; and40 Ft. length 	
h. Does the proposed actiliquids, such as creation If Yes, i. Purpose of the impourii. If a water impoundment	on of a wate	r supply, reservoir,	pond, lake, waste l	Il result in the impoundment of any agoon or other storage?	□Yes ☑No
11. 11 a water impoundme	nt, the prin	cipal source of the	water:	☐ Ground water ☐ Surface water stream	msIOther specify:
iii. If other than water, id	entify the ty	ype of impounded/o	contained liquids an	d their source.	
iv. Approximate size of	he propose	d impoundment.	Volume:	million gallons; surface area:	acres
ν. Dimensions of the pro	oposed dam	or impounding str	ucture:	height; length	
vi. Construction method/	materials f	for the proposed da	m or impounding st	ructure (e.g., earth fill, rock, wood, con-	crete):
D.2. Project Operations	S				
<ul> <li>a. Does the proposed acti</li> <li>(Not including general materials will remain o</li> </ul>	site prepara	any excavation, mintion, grading or ins	ning, or dredging, d stallation of utilities	uring construction, operations, or both? or foundations where all excavated	✓Yes No
If Yes:	iisite)				
i. What is the purpose of	f the excava	tion or dredging?	New foundation		
				o be removed from the site?	
		oic yards): +/- 20 cu			
<ul> <li>Over what durat</li> </ul>					
iii. Describe nature and cl	haracteristic	s of materials to be	e excavated or dredg	ged, and plans to use, manage or dispos	e of them.
Existing pavement an	id soil to be t	rucked off site.			
iv. Will there be onsite d	lewatering o	or processing of exc	cavated materials?		∐Yes <b>⊘</b> No
ν. What is the total area				0.08 acres	
vi. What is the maximum				0.08 acres	
vii. What would be the ma			r dredging?	4.0 feet	
viii. Will the excavation r					∐Yes <b>⊘</b> No
ia. Summarize she reciam	anon Roals	and bran:			
····		******			
h Would the proposed on	tion onne :	er ragult in alteration	n of incurses on de-	crease in size of, or encroachment	- IVoo Zibra
into any existing wetla					∐Yes <b>Z</b> No
If Yes:	r waterhad	which would be a	ffected (by name -	unter index number waterd man	ar or gos annuli:
				vater index number, wetland map numb	er or geographic

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of salteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square fee	structures, or et or acres:
iii. Will the proposed action cause or result in disturbance to bottom sediments?  If Yes, describe:	∐Yes∐No
iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation?  If Yes:	☐ Yes ☐ No
acres of aquatic vegetation proposed to be removed:	
expected acreage of aquatic vegetation remaining after project completion:	
purpose of proposed removal (e.g. beach clearing, invasive species control, boat access):	
proposed method of plant removal:	
if chemical/herbicide treatment will be used, specify product(s):	
v. Describe any proposed reclamation/mitigation following disturbance:	
- YZ''	
c. Will the proposed action use, or create a new demand for water?  If Yes:	☐Yes <b>Z</b> No
i. Total anticipated water usage/demand per day: gallons/day	
ii. Will the proposed action obtain water from an existing public water supply?  If Yes:	□Yes □No
Name of district or service area:	
Does the existing public water supply have capacity to serve the proposal?	☐ Yes ☐ No
• Is the project site in the existing district?	☐ Yes ☐ No
<ul> <li>Is expansion of the district needed?</li> </ul>	☐ Yes ☐ No
<ul> <li>Do existing lines serve the project site?</li> </ul>	☐ Yes ☐ No
iii. Will line extension within an existing district be necessary to supply the project?  If Yes:	□Yes □No
Describe extensions or capacity expansions proposed to serve this project:	
Source(s) of supply for the district:	
iv. Is a new water supply district or service area proposed to be formed to serve the project site? If, Yes:	☐ Yes☐No
Applicant/sponsor for new district:	
Date application submitted or anticipated:	
Proposed source(s) of supply for new district:	
v. If a public water supply will not be used, describe plans to provide water supply for the project:	
vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: gallons	
d. Will the proposed action generate liquid wastes?	☐ Yes <b>Z</b> No
If Yes:	
<ul> <li>i. Total anticipated liquid waste generation per day: gallons/day</li> <li>ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all compounds)</li> </ul>	
approximate volumes or proportions of each):	ments and
iii. Will the proposed action use any existing public wastewater treatment facilities?  If Yes:	□Yes □No
Name of wastewater treatment plant to be used:	
Name of district:	
<ul> <li>Does the existing wastewater treatment plant have capacity to serve the project?</li> </ul>	☐Yes ☐No
• Is the project site in the existing district?	□Yes □No
• Is expansion of the district needed?	□Yes□No

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Do existing sewer lines serve the project site?	□Yes□No
<ul> <li>Will a line extension within an existing district be necessary to serve the project?</li> </ul>	□Yes□No
If Yes:	
Describe extensions or capacity expansions proposed to serve this project:	
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?	□Yes□No
If Yes:	
Applicant/sponsor for new district:	
<ul> <li>Date application submitted or anticipated:</li> </ul>	
<ul> <li>What is the receiving water for the wastewater discharge?</li> </ul>	
v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including spectreceiving water (name and classification if surface discharge or describe subsurface disposal plans):	cifying proposed
vi. Describe any plans or designs to capture, recycle or reuse liquid waste:	
e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction?	□Yes ☑No
If Yes:  i. How much impervious surface will the project create in relation to total size of project parcel?	
Square feet or acres (impervious surface)	
Square feet or acres (impervious surface) Square feet or acres (parcel size)	
ii. Describe types of new point sources.	
iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent p groundwater, on-site surface water or off-site surface waters)?	roperties,
If to surface waters, identify receiving water bodies or wetlands:	
Will do work of the state of th	
Will stormwater runoff flow to adjacent properties?  iv Does the proposed plan minimize impossions surfaces are provided and the control of the proposed plan minimize impossions are forced.	□Yes□No
iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?	
f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?	<b>Z</b> Yes □No
If Yes, identify:	
i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)	
Construction and delivery vehicles	
ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)	
iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) None	
g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit,	☐Yes <b>Z</b> No
or Federal Clean Air Act Title IV or Title V Permit?	
If Yes:	
i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet	□Yes□No
ambient air quality standards for all or some parts of the year)	
ii. In addition to emissions as calculated in the application, the project will generate:	
Tons/year (short tons) of Carbon Dioxide (CO <sub>2</sub> )	
Tons/year (short tons) of Nitrous Oxide (N <sub>2</sub> O)	
Tons/year (short tons) of Perfluorocarbons (PFCs)	
Tons/year (short tons) of Sulfur Hexafluoride (SF <sub>6</sub> )	
Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs)	
Tons/year (short-tons) of Hazardous Air Pollutants (HAPs)	

•	
h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?  If Yes:	∏Yes <b>☑</b> No
<ul> <li>i. Estimate methane generation in tons/year (metric):</li> <li>ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to g</li> </ul>	enerate heat or
electricity, flaring):	cherate neat of
electricity, naring).	1111
	[]r. []r.
i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as	□Yes <b>☑</b> No
quarry or landfill operations?	
If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust):	
j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial	☐Yes ✓ No
new demand for transportation facilities or services?	<del>-</del> -
If Yes:	
i. When is the peak traffic expected (Check all that apply): Morning Evening Weekend	
Randomly between hours of to  ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump truck	
ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump truck	s):
iii. Parking spaces: Existing Proposed Net increase/decrease	
• • • • • • • • • • • • • • • • • • • •	□Yes□No
iv. Does the proposed action include any shared use parking?	
v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing	access, describe:
vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site?	Yes No
vii Will the proposed action include access to public transportation or accommodations for use of hybrid, electric	☐Yes☐No
or other alternative fueled vehicles?	
viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing	☐Yes☐No
pedestrian or bicycle routes?	
p • • • • • • • • • • • • • • • • • • •	
	~
k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand	<b>☑</b> Yes□No
for energy?	
If Yes:	
i. Estimate annual electricity demand during operation of the proposed action:	
ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/l	ocal utility or
other):	ocal active, of
Extended from existing power supply	
iii. Will the proposed action require a new, or an upgrade, to an existing substation?	☐Yes <b>☑</b> No
The first the proposed determined a new, or an application, to an extension	
I. Hours of operation. Answer all items which apply.	
i. During Construction:  ii. During Operations:	
• Monday - Friday: 8am-5pm • Monday - Friday: 9-8 (M, Tu & Th), 9-6 (W)	& 9-5 (F)
Saturday: TBD	<u> </u>
• Sunday: None • Sunday: Closed	
Holidays: None	
	<del></del>

<ul> <li>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?</li> <li>If yes:</li> <li>i. Provide details including sources, time of day and duration:</li> </ul>	□ Yes ☑No
ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen?  Describe:	□Yes□No
n. Will the proposed action have outdoor lighting?	☐ Yes <b>Z</b> No
If yes:  i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:	200 1210
ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen?  Describe:	☐ Yes ☐ No
o. Does the proposed action have the potential to produce odors for more than one hour per day?  If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures:	□ Yes <b>Z</b> No
<ul> <li>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage?</li> <li>If Yes: <ul> <li>i. Product(s) to be stored</li> <li>ii. Volume(s) per unit time (e.g., month, year)</li> </ul> </li> </ul>	□ Yes <b>☑</b> No
iii. Generally, describe the proposed storage facilities:	
<ul> <li>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?</li> <li>If Yes:  i. Describe proposed treatment(s):</li> </ul>	□ Yes <b>☑</b> No
	100
ii. Will the proposed action use Integrated Pest Management Practices?	□ Yes □No
r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)?  If Yes:	
i. Describe any solid waste(s) to be generated during construction or operation of the facility:	
• Construction: tons per (unit of time)	
<ul> <li>Operation: tons per (unit of time)</li> <li>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste</li> <li>Construction:</li> </ul>	<b>:</b> :
Operation:	
<ul> <li>iii. Proposed disposal methods/facilities for solid waste generated on-site:</li> <li>Construction:</li> </ul>	
• Operation:	

s. Does the proposed action include construction or mod	lification of a solid waste man	agement facility?	☐ Yes 🗸 No
If Yes:  i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or			o landfill an
other disposal activities):	i for the site (e.g., recycling of	transfer station, composur	ig, iandini, or
ii. Anticipated rate of disposal/processing:			
Tons/month, if transfer or other non-	-combustion/thermal treatmen	t, or	
Tons/hour, if combustion or thermal			
iii. If landfill, anticipated site life:	years		
t. Will the proposed action at the site involve the comme	ercial generation, treatment, st	orage, or disposal of hazard	lous Yes No
waste?			
If Yes:	. 1 1 11 1	1 . 0 . 11.	
i. Name(s) of all hazardous wastes or constituents to be	e generated, nandled or manag	ged at facility:	
ii. Generally describe processes or activities involving	hazardous wastes or constituer	nts:	
<ul><li>iii. Specify amount to be handled or generatedt</li><li>iv. Describe any proposals for on-site minimization, rec</li></ul>	ons/month	anatituanta:	
iv. Describe any proposais for on-site minimization, led	cycling of feuse of hazardous of	onstituents:	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·	
v. Will any hazardous wastes be disposed at an existing	g offsite hazardous waste facil	ity?	☐Yes ☐No
If Yes: provide name and location of facility:			
If No: describe proposed management of any hazardous	wastan which will and be sent	40 - 1	
if No. describe proposed management of any nazardous	wastes which will not be sent	to a nazardous waste facili	.y:
E. Site and Setting of Proposed Action			
E.1. Land uses on and surrounding the project site			
a. Existing land uses.			
i. Check all uses that occur on, adjoining and near the	project site.		
☐ Urban ☐ Industrial ☐ Commercial ☑ Resid	lential (suburban) 🔲 Rural	(non-farm)	
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other	r (specify):		
<ul> <li>ii. If mix of uses, generally describe:</li> <li>Suburban area with light commercial and some agricultural far</li> </ul>	rm land slane NVC Dt 5: ivet Feet	-file City of Detects	
Suburban area with light commercial and some agricultural fail	im land along NYS Rt 5; just cast	or the City of Batavia.	
). T			
b. Land uses and covertypes on the project site.			
Land use or Covertype	Current	Acreage After	Change
Roads, buildings, and other paved or impervious	Acreage	Project Completion	(Acres +/-)
surfaces	2.8	2.8	0
Forested	0	0	0
Meadows, grasslands or brushlands (non-	0	V	U
agricultural, including abandoned agricultural)	0	0	0
Agricultural			
(includes active orchards, field, greenhouse etc.)	0	0	0
Surface water features	^		_
(lakes, ponds, streams, rivers, etc.)	0	0	0
Wetlands (freshwater or tidal)	0	0	0
Non-vegetated (bare rock, earth or fill)	0	0	0
Other			
Describe: Grass, trees and landscaping areas	1.61	1.61	0
	1101	1.01	ÿ

c. Is the project site presently used by members of the community for public recreation?  i. If Yes: explain:	□Yes☑No
d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site?  If Yes,	☐Yes <b>Z</b> No
i. Identify Facilities:	
e. Does the project site contain an existing dam?	☐Yes <b>☑</b> No
If Yes:  i. Dimensions of the dam and impoundment:	
Dam height:  feet	
Dam length:  feet	
Surface area:     acres	
Volume impounded: gallons OR acre-feet	
ii. Dam's existing hazard classification:	
iii. Provide date and summarize results of last inspection:	
f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility,	☐ Yes <b>Z</b> No
or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility if Yes:	ty?
i. Has the facility been formally closed?	☐ Yes☐ No
• If yes, cite sources/documentation:	
ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:	
iii. Describe any development constraints due to the prior solid waste activities:	
g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? f Yes:	☐Yes <b>Z</b> No
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred	d:
a. Potential contamination history. Has there been a reported spill at the proposed project site, or have any	☐Yes☑ No
remedial actions been conducted at or adjacent to the proposed site?  f Yes:	TI resign 140
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply:	□Yes□No
☐ Yes - Spills Incidents database       Provide DEC ID number(s):         ☐ Yes - Environmental Site Remediation database       Provide DEC ID number(s):         ☐ Neither database       Provide DEC ID number(s):	
i. If site has been subject of RCRA corrective activities, describe control measures:	
	TVocTNo.
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? f yes, provide DEC ID number(s):	□Yes□No

ν. Is the project site subject to an institutional control limiting property uses?	□Yes□No
<ul> <li>If yes, DEC site ID number:</li> <li>Describe the type of institutional control (e.g., deed restriction or easement):</li> </ul>	
Describe any use limitations:	
Describe any engineering controls:	
Will the project affect the institutional or engineering controls in place?  Explain:	□Yes□No
Explain:	
E.2. Natural Resources On or Near Project Site	
a. What is the average depth to bedrock on the project site?  Unknown feet	
b. Are there bedrock outcroppings on the project site?	☐ Yes <b>Z</b> No
If Yes, what proportion of the site is comprised of bedrock outcroppings?%	
c. Predominant soil type(s) present on project site: ArC (Arkport) 44.6 %	
Oa (Oatka) 26.8 %	
GnA (Galen) 20.4 %	)
d. What is the average depth to the water table on the project site? Average:>6.56 feet	
e. Drainage status of project site soils: Well Drained: % of site	
✓ Moderately Well Drained: 73.2 % of site ✓ Poorly Drained 26.8 % of site	
f. Approximate proportion of proposed action site with slopes: $\boxed{0}$ 0-10%: 98 % of site $\boxed{1}$ 10-15%: 2 % of site	
15% or greater: % of site	
g. Are there any unique geologic features on the project site?  If Yes, describe:	☐ Yes <b>Z</b> No
h. Surface water features.	
i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)?	□Yes <b>☑</b> No
ii. Do any wetlands or other waterbodies adjoin the project site?	□Yes☑No
If Yes to either i or ii, continue. If No, skip to E.2.i.	
iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency?	□Yes□No
iv. For each identified regulated wetland and waterbody on the project site, provide the following information:	
• Streams: Name Classification	
<ul> <li>Wetlands: Name Approximate Size</li> <li>Wetland No. (if regulated by DEC)</li> </ul>	
v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?	□Yes□No
If yes, name of impaired water body/bodies and basis for listing as impaired:	
i. Is the project site in a designated Floodway?	□Yes <b>☑</b> No
j. Is the project site in the 100-year Floodplain?	□Yes <b>☑</b> No
k. Is the project site in the 500-year Floodplain?	<b>Z</b> Yes □No
l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?  If Yes:	□Yes <b>Z</b> No
i. Name of aquifer:	

3.	
m. Identify the predominant wildlife species that occupy or use the project site:  None - N/A	
n. Does the project site contain a designated significant natural community?  If Yes:  i. Describe the habitat/community (composition, function, and basis for designation):	∐Yes <b>Z</b> No
ii. Source(s) of description or evaluation:	
iii. Extent of community/habitat:	
• Currently: acres	
Following completion of project as proposed: acres	
• Gain or loss (indicate + or -): acres	
<ul> <li>o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened spec If Yes: <ol> <li>Species and listing (endangered or threatened):</li> </ol> </li> </ul>	☐ Yes ☑ No ies?
p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern?	□Yes☑No
If Yes:	
i. Species and listing:	
q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing?  If yes, give a brief description of how the proposed action may affect that use:	□Yes ☑No
E.3. Designated Public Resources On or Near Project Site	
a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304?  If Yes, provide county plus district name/number:	□Yes ☑No
b. Are agricultural lands consisting of highly productive soils present?  i. If Yes: acreage(s) on project site?  ii. Source(s) of soil rating(s):	□Yes <b>☑</b> No
c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National	☐Yes <b>Z</b> No
Natural Landmark?	······································
If Yes:	
i. Nature of the natural landmark:	
d. Is the project site located in or does it adjoin a state listed Critical Environmental Area?	☐Yes <b>Z</b> No
If Yes:	T 1 C2 M 140
i. CEA name:	
ii. Basis for designation:	
iii. Designating agency and date:	

e. 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 Com Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic If Yes:  i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District  ii. Name:  iii. Brief description of attributes on which listing is based:	nmissioner of the NYS
f. 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?	☐Yes <b>Z</b> No
g. Have additional archaeological or historic site(s) or resources been identified on the project site?  If Yes:  i. Describe possible resource(s):  ii. Basis for identification:	□Yes <b>☑</b> No
h. Is the project site within fives miles of any officially designated and publicly accessible federal, state, or lo scenic or aesthetic resource?  If Yes:  i. Identify resource:  ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic to story):	
etc.): miles.	
<ul> <li>i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational River Program 6 NYCRR 666?</li> <li>If Yes: <ul> <li>i. Identify the name of the river and its designation:</li> </ul> </li> </ul>	rs
ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?	□Yes □No
F. Additional Information Attach any additional information which may be needed to clarify your project.  If you have identified any adverse impacts which could be associated with your proposal, please describe the measures which you propose to avoid or minimize them.	ose impacts plus any
G. Verification I certify that the information provided is true to the best of my knowledge.	
Applicant/Sponsor Name Daryl Martin Date 6/30/2025	
Signature Title Architect	

# T-05-BAT-08-25

