



GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID **T-02-BAT-02-26**

Review Date **2/12/2026**

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

BATAVIA, T.

PLANNING BOARD

Jessica Somers (Holiday Inn Candlewood Suites)

Site Plan Review

Site Plan Review for an addition and alterations to an existing 5-story hotel.

Location **8250 Park Rd., Batavia**

Zoning District **Commercial (C) District**

PLANNING BOARD RECOMMENDS:

APPROVAL

EXPLANATION:

The proposed additions and alterations to the hotel should pose no significant county-wide or inter-community impact.

Director

Thursday, February 12, 2026

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-02-BAT-02-26



*** GENESEE COUNTY *
PLANNING BOARD REFERRAL**

RECEIVED

By the Genesee County Dept. of Planning at 1:51 pm, Feb 04, 2026

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) TOB Planning Board
Address 3833 West Main St Rd
City, State, Zip Batavia, NY, 14020
Phone (585) 343-1729 Ext. _____

2. APPLICANT INFORMATION

Name Jessica Somers (Holiday Inn Candlewood Suites)
Address 8250 Park Rd
City, State, Zip Batavia, NY, 14020
Phone (716) 691-0900 Ext. 212 Email jessicas@silvestriarchitects,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 | 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 8250 Park Rd
B. Nearest intersecting road Veterans Memorial Dr
C. Tax Map Parcel Number 8-1-74
D. Total area of the property 8.7 Area of property to be disturbed .4
E. Present zoning district(s) Commercial

5. REFERRAL CASE INFORMATION:

A. Has this referral been previously reviewed by the Genesee County Planning Board?
 NO YES If yes, give date and action taken _____
B. Special Use Permit and/or Variances refer to the following section(s) of the present zoning ordinance and/or law
Zoning schedule A
C. Please describe the nature of this request Additions and alterations to an existing 5 story hotel

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 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) 343-1279 Ext. 208
Address, City, State, Zip 3833 West Main St Rd Email twilliams@townofbatavia.com

Building and Zoning Application Permit No. _____

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

Date 12 / 28 / 25 Zone Commercial Flood Zone No Wellhead Protection No Corner Lot Yes

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. 8.-1-74

Owners Name Jayesh Patel – Rudra Mgmt Phone No. (716) 481-9888

Address 51 Anderson Road #4905 Project Road Width 49.5 ft

Applicants Name Jessica Somers – Silvestri Architects Project Address 8250 Park Rd.

E Mail Address jessicas@silvestriarchitects.com Phone No (716) 691-0900 x212

Description of Project: The project consists of an addition and alterations to an existing 5 story hotel/waterpark/conference center/restaurant. The addition consists of a 1,908 sf per floor 2 story lobby and hotel restaurant with occupied roof. The project also consists of removing an existing canopy and creating a new front entrance with customer drop-off area and ADA parking spaces on the north side of the hotel. Landscaping is being proposed around the facility. Alterations to the water park are not included in this project.

Existing Use Hotel Proposed Use Hotel

Estimated Cost Building \$3,000,000 Plumbing TBD Mechanical TBD 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, Jessica Somers, 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.

Jessica L Somers 01/28/26

Signature of Owner or Authorized Agent

Date

Construction Attachment:

Permit No. _____

Type of Construction

Agriculture Commercial Industrial Residential Miscellaneous

Contractors

General Contractors Name PMJ Construction - Pat Mckillen Address 597 North Star Rd., East Aurora, NY 14052
Phone (716)864-2376 Cell Phone(____)_____ Fax No. (____)_____ E-Mail Pmjconstruction@hotmail.com

Certificate of Workers Compensation: Yes No Expiration Date 04 / 07 / 26

Liability Insurance: Yes No Expiration Date 11 / 14 / 26

APPLICANT SHALL PROVIDE A COPY OF ALL INSURANCE AND WORKERS COMP. WITH THIS APPLICATION

▪ **Masonry** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

▪ **Electrical** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

▪ **Plumbing** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

▪ **Alarms / Sprinklers** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

▪ **HVAC** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

▪ **Landscape / Site** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

▪ **Miscellaneous** TBD _____ Phone (____)_____

Office Phone (____)_____ Cell Phone(____)_____ Fax No. (____)_____ E-Mail _____

Signature of Owner or Authorized Agent X *Jessica L. Bennett* Date 01/28/26

Agricultural Data Statement

Date 1/28/21

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>Jessica Somers - Silvestri Architects</u> Address: <u>1321 Millersport Highway Suite 101</u> <u>Amherst, NY 14221</u>	Name: <u>Jayesh Patel - Rudra Management</u> Address: <u>51 Anderson Road #4905</u> <u>Buffalo, NY 14225</u>
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1. Type of Application: Special Use Permit; Site Plan Approval; Use Variance;
(circle one or more) Subdivision Approval

2. Description of proposed project: Addition and alteration to existing 5 story hotel/waterpark/conference center/ restaurant. Addition consists of 1,908 sf per floor 2 story lobby and hotel restaurant with occupied roof. Removal of existing canopy and new front entrance w/ customer drop-off and ADA parking on north side of hotel. Landscaping being provided around facility. Alterations to water park not included.

3. Location of project: Address: 8250 Park Road, Batavia, NY
Tax Map Number (TMP) 8.-1-74

4. Is this parcel within an Agricultural District? NO YES (Check with your local assessor if

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: _____ 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

Jessica Somers
Signature of Applicant

Signature of Owner (if other than applicant)

Reviewed by: _____
Signature of Municipal Official

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.

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: Addition & Alterations to Existing Hotel		
Project Location (describe, and attach a general location map): 8250 Park Road, Batavia, NY		
Brief Description of Proposed Action (include purpose or need): The project consists of an addition and alterations to an existing 5 story hotel/waterpark/conference center/restaurant. The addition consists of a 1,908 sf per floor 2 story lobby and hotel restaurant with occupied roof. The project also consists of removing an existing canopy and creating a new front entrance with customer drop-off area and ADA parking spaces on the north side of the hotel. Landscaping is being proposed around the facility. Alterations to the water park are not included in this project.		
Name of Applicant/Sponsor: Jayesh Patel - Rudra Mgmt	Telephone: 716.481.9888	E-Mail: jay@rudramgmt.com
Address: 51 Anderson Road #4905		
City/PO: Buffalo	State: NY	Zip Code: 14225
Project Contact (if not same as sponsor; give name and title/role): Silvestri Architects	Telephone: 716-691-0900 x 212	E-Mail: JessicaS@silvestriarchitects.com
Address: 1321 Millersport Highway - Suite 101		
City/PO: Amherst	State: NY	Zip Code: 14221
Property Owner (if not same as sponsor):	Telephone:	E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. (“Funding” includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Counsel, Town Board, <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No or Village Board of Trustees		
b. City, Town or Village Planning Board or Commission <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Town Planning Board - Batavia	
c. City, Town or Village Zoning Board of Appeals <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
d. Other local agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
e. County agencies <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	County 239m Review	
f. Regional agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
i. Coastal Resources. <ul style="list-style-type: none"> i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No iii. Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 		

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? Yes No

- **If Yes**, complete sections C, F and G.
- **If No**, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? Yes No
 If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? Yes No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) Yes No
 If Yes, identify the plan(s):

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? Yes No
 If Yes, identify the plan(s):

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. Yes No
If Yes, what is the zoning classification(s) including any applicable overlay district?
Commercial

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? Yes No

If Yes,
i. What is the proposed new zoning for the site? _____

C.4. Existing community services.

a. In what school district is the project site located? Batavia City School District

b. What police or other public protection forces serve the project site?
Genesee County Sheriff's Office, New York State Police & Batavia Police Department

c. Which fire protection and emergency medical services serve the project site?
City of Batavia Fire Department and area volunteer fire departments (East Pembroke, Byron & Oakfield)

d. What parks serve the project site?
Austin Park, Kiwanis Park, Farrall Park, Genesee County Park & Forest, Batavia Soccer Park and Batavia Town Park

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 mixed, include all components)? Commercial

b. a. Total acreage of the site of the proposed action? _____ 8.7 acres

b. Total acreage to be physically disturbed? _____ 0.4 acres

c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 8.7 acres

c. Is the proposed action an expansion of an existing project or use? Yes No

i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % 3 Units: 1908-SF

d. Is the proposed action a subdivision, or does it include a subdivision? Yes 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? Yes No

iii. Number of lots proposed? _____

iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will the proposed action be constructed in multiple phases? Yes No

i. If No, anticipated period of construction: _____ 6 months

ii. If Yes:

• Total number of phases anticipated _____

• Anticipated commencement date of phase 1 (including demolition) _____ month _____ year

• Anticipated completion date of final phase _____ month _____ year

• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? Yes No
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)? Yes No
 If Yes,

i. Total number of structures _____
 ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length
 iii. Approximate extent of building space to be heated or cooled: _____ 1,908 square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? Yes No
 If Yes,

i. Purpose of the impoundment: _____
 ii. If a water impoundment, the principal source of the water: Ground water Surface water streams Other specify: _____
 iii. If other than water, identify the type of impounded/contained liquids and their source. _____
 iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres
 v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length
 vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete): _____

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? Yes No
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)
 If Yes:

i. What is the purpose of the excavation or dredging? _____
 ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?
 • Volume (specify tons or cubic yards): _____
 • Over what duration of time? _____
 iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. _____

 iv. Will there be onsite dewatering or processing of excavated materials? Yes No
 If yes, describe. _____

 v. What is the total area to be dredged or excavated? _____ acres
 vi. What is the maximum area to be worked at any one time? _____ acres
 vii. What would be the maximum depth of excavation or dredging? _____ feet
 viii. Will the excavation require blasting? Yes No
 ix. Summarize site reclamation goals and plan: _____

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? Yes No
 If Yes:
 i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will the proposed action cause or result in disturbance to bottom sediments? Yes No

If Yes, describe: _____

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No

If Yes:

- 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: _____

c. Will the proposed action use, or create a new demand for water? Yes No

If Yes: _____

i. Total anticipated water usage/demand per day: _____ gallons/day

ii. Will the proposed action obtain water from an existing public water supply? Yes No

If Yes:

- 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
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No

If Yes:

- 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? Yes No

If, Yes:

- 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/minute.

d. Will the proposed action generate liquid wastes? Yes No

If Yes: _____

i. Total anticipated liquid waste generation per day: _____ gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No

If Yes:

- Name of wastewater treatment plant to be used: _____
- Name of district: _____
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

- Do existing sewer lines serve the project site? Yes No
- Will a line extension within an existing district be necessary to serve the project? 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: _____
- Date application submitted or anticipated: _____
- What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):

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 (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 properties, groundwater, on-site surface water or off-site surface waters)?

- If to surface waters, identify receiving water bodies or wetlands: _____

- Will stormwater runoff flow to adjacent properties? Yes No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

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? Yes No

If Yes, identify:

i. Mobile sources during project operations (e.g., heavy equipment, fleet or 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)

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No

If Yes:

i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No

ii. In addition to emissions as calculated in the application, the project will generate:

- _____ Tons/year (short tons) of Carbon Dioxide (CO₂)
- _____ Tons/year (short tons) of Nitrous Oxide (N₂O)
- _____ Tons/year (short tons) of Perfluorocarbons (PFCs)
- _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
- _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (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)? Yes No

If Yes:

i. Estimate methane generation in tons/year (metric): _____

ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? Yes No

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 new demand for transportation facilities or services? Yes No

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 trucks): _____

iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____

iv. Does the proposed action include any shared use parking? Yes No

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 or other alternative fueled vehicles? Yes No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? Yes No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? Yes No

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/local utility, or other):
Local Utility

iii. Will the proposed action require a new, or an upgrade, to an existing substation? Yes No

l. Hours of operation. Answer all items which apply.

i. During Construction:

- Monday - Friday: _____ 7AM-5PM _____
- Saturday: _____
- Sunday: _____
- Holidays: _____

ii. During Operations:

- Monday - Friday: _____ Hotel - Open 7 days a week & _____
- Saturday: _____ 24 Hours per day _____
- Sunday: _____
- Holidays: _____

m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? Yes No

If yes:

i. Provide details including sources, time of day and duration:

ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? Yes No

Describe: _____

n. Will the proposed action have outdoor lighting? Yes No

If yes:

i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:

Utilize existing outdoor lighting and new lighting on building expansion.

ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? Yes No

Describe: _____

o. Does the proposed action have the potential to produce odors for more than one hour per day? Yes No

If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures:

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? Yes No

If Yes:

i. Product(s) to be stored _____

ii. Volume(s) _____ per unit time _____ (e.g., month, year)

iii. Generally, describe the proposed storage facilities: _____

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? Yes No

If Yes:

i. Describe proposed treatment(s):

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)? Yes No

If Yes:

i. Describe any solid waste(s) to be generated during construction or operation of the facility:

- Construction: _____ tons per _____ (unit of time)
- Operation : _____ tons per _____ (unit of time)

ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:

- Construction: _____
- Operation: _____

iii. Proposed disposal methods/facilities for solid waste generated on-site:

- Construction: _____
- Operation: _____

s. Does the proposed action include construction or modification of a solid waste management 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 other disposal activities): _____

ii. Anticipated rate of disposal/processing:

- _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
- _____ Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? Yes No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

iii. Specify amount to be handled or generated _____ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? Yes No

If Yes: provide name and location of facility: _____

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: _____

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 Residential (suburban) Rural (non-farm)

Forest Agriculture Aquatic Other (specify): _____

ii. If mix of uses, generally describe: _____

b. Land uses and covertypes on the project site.

Land use or Covertype	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	0.38	0.4	0.023
• Forested	0.0	0.0	0.0
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)	0.0	0.0	0.0
• Agricultural (includes active orchards, field, greenhouse etc.)	0.0	0.0	0.0
• Surface water features (lakes, ponds, streams, rivers, etc.)	0.0	0.0	0.0
• Wetlands (freshwater or tidal)	0.0	0.0	0.0
• Non-vegetated (bare rock, earth or fill)	0.0	0.0	0.0
• Other Describe: _____			

c. Is the project site presently used by members of the community for public recreation? Yes No
i. If Yes: explain: _____

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? Yes No
If Yes,
i. Identify Facilities:
VA Hospital

e. Does the project site contain an existing dam? Yes 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, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? Yes No
If Yes:
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? Yes No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred: _____

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes No
If Yes:
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
ii. If site has been subject of RCRA corrective activities, describe control measures: _____
iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Yes No
If yes, provide DEC ID number(s): _____
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s): _____

v. Is the project site subject to an institutional control limiting property uses? Yes No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? Yes No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ 6-6.75 feet

b. Are there bedrock outcroppings on the project site? Yes No
 If Yes, what proportion of the site is comprised of bedrock outcroppings? _____ %

c. Predominant soil type(s) present on project site:

LmA-Lima silt loam(0-3% slope) B/D	46.7 %
CaA - (0-2% slopes) - C/D	27.3 %
OnB- Ontario Loam (3-8%) B	26.0 %

d. What is the average depth to the water table on the project site? Average: _____ 6-6.75 feet

e. Drainage status of project site soils: Well Drained: _____ % of site
 Moderately Well Drained: _____ 26 % of site
 Poorly Drained _____ 74 % of site

f. Approximate proportion of proposed action site with slopes: 0-10%: _____ 100 % of site
 10-15%: _____ % of site
 15% or greater: _____ % of site

g. Are there any unique geologic features on the project site? Yes No
 If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? Yes 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 _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name PF01E Freshwater Forested / Shrub Wetland Approximate Size 10.49 acres
- Wetland No. (if regulated by DEC) Informational Map Only (NYSDEC) _____

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 No

j. Is the project site in the 100-year Floodplain? Yes No

k. Is the project site in the 500-year Floodplain? Yes No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? Yes No
 If Yes:
 i. Name of aquifer: _____

m. Identify the predominant wildlife species that occupy or use the project site: _____
 Existing Hotel / Parking - NONE _____

n. Does the project site contain a designated significant natural community? Yes No
 If Yes:
 i. Describe the habitat/community (composition, function, and basis for designation): _____

 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

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 species? Yes No
 If Yes:
 i. Species and listing (endangered or threatened): _____

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? Yes No
 If yes, give a brief description of how the proposed action may affect that use: _____

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? Yes No
 If Yes, provide county plus district name/number: _____

b. Are agricultural lands consisting of highly productive soils present? Yes No
 i. If Yes: acreage(s) on project site? _____
 ii. Source(s) of soil rating(s): _____

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? Yes No
 If Yes:
 i. Nature of the natural landmark: Biological Community Geological Feature
 ii. Provide brief description of landmark, including values behind designation and approximate size/extent: _____

d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? Yes No
 If Yes:
 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 Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? Yes No

If Yes:

i. Nature of historic/archaeological resource: Archaeological Site Historic Building or District

ii. Name: BATAVIA VETERANS ADMINISTRATION HOSPITAL

iii. Brief description of attributes on which listing is based:
Listed buildings in VA complex

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 No

g. Have additional archaeological or historic site(s) or resources been identified on the project site? Yes No

If Yes:

i. Describe possible resource(s): _____

ii. Basis for identification: _____

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? Yes No

If Yes:

i. Identify resource: _____

ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____

iii. Distance between project and resource: _____ miles.

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? Yes No

If Yes:

i. Identify the name of the river and its designation: _____

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 those impacts plus any measures which you propose to avoid or minimize them.

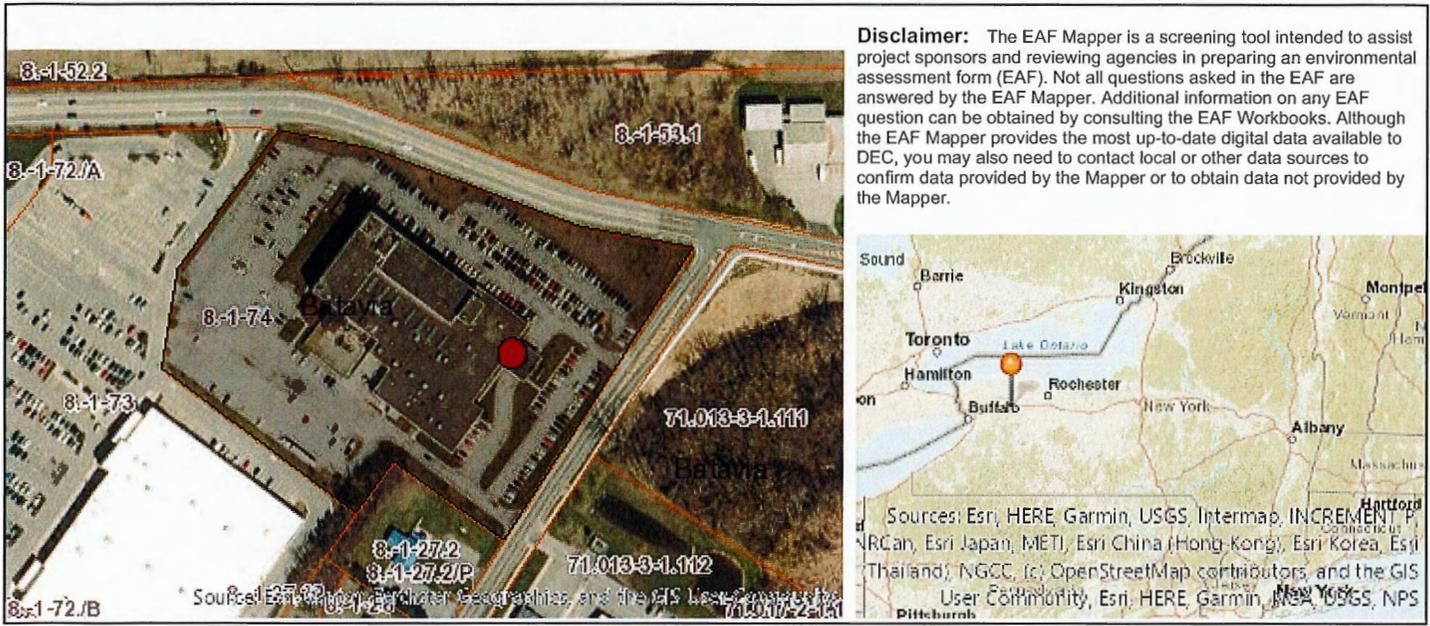
G. Verification

I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name Michael Lasell Date 12/28/2025

Signature  Title Engineer

PRINT FORM

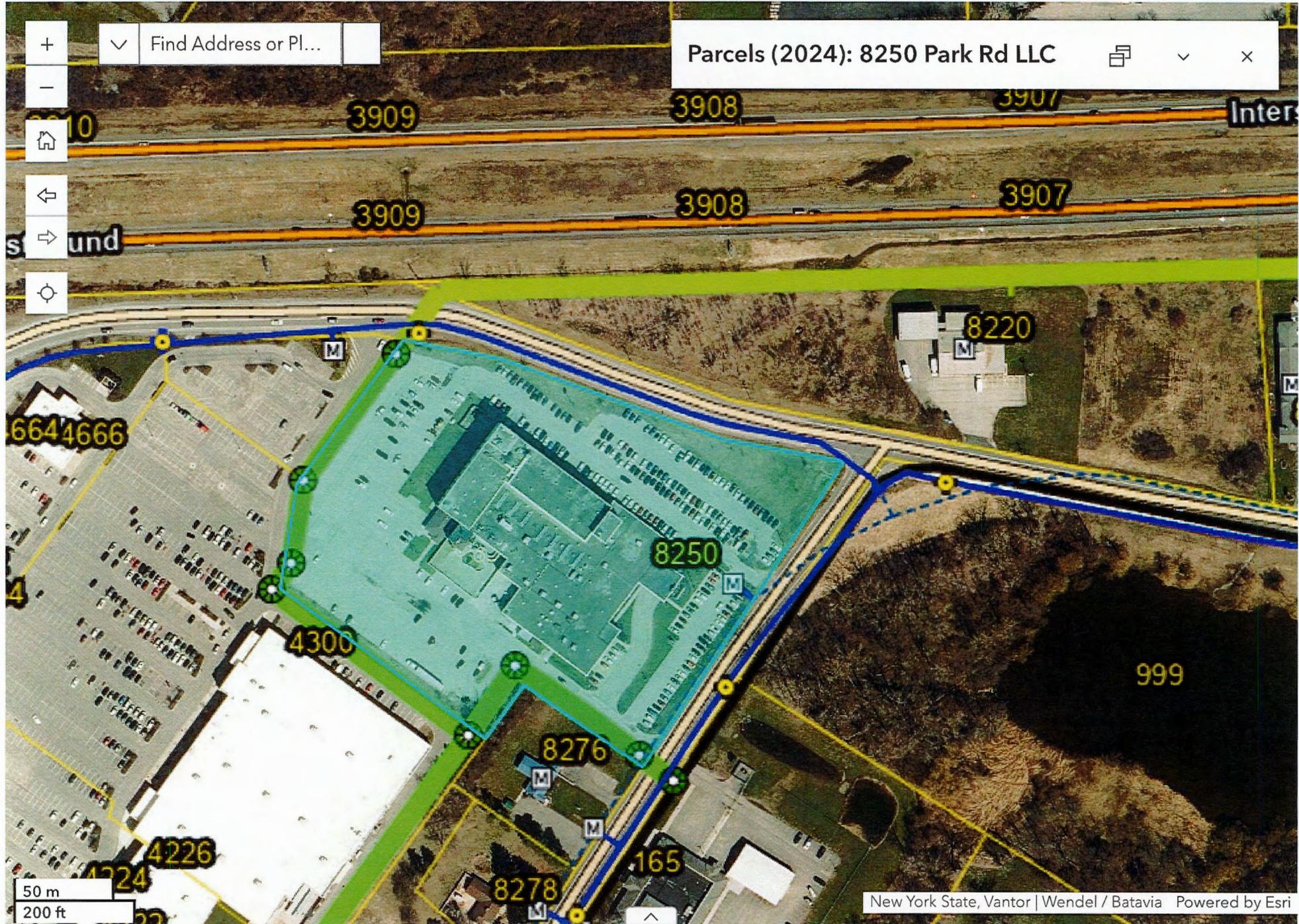


B.i.i [Coastal or Waterfront Area]	No
B.i.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	No
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.h.ii [Surface Water Features]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
E.2.h.iii [Surface Water Features]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.j. [100 Year Floodplain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.k. [500 Year Floodplain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.

E.2.i. [Aquifers]	No
E.2.n. [Natural Communities]	No
E.2.o. [Endangered or Threatened Species]	No
E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National or State Register of Historic Places or State Eligible Sites]	Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook.
E.3.e.ii [National or State Register of Historic Places or State Eligible Sites - Name]	BATAVIA VETERANS ADMINISTRATION HOSPITAL
E.3.f. [Archeological Sites]	No
E.3.i. [Designated River Corridor]	No

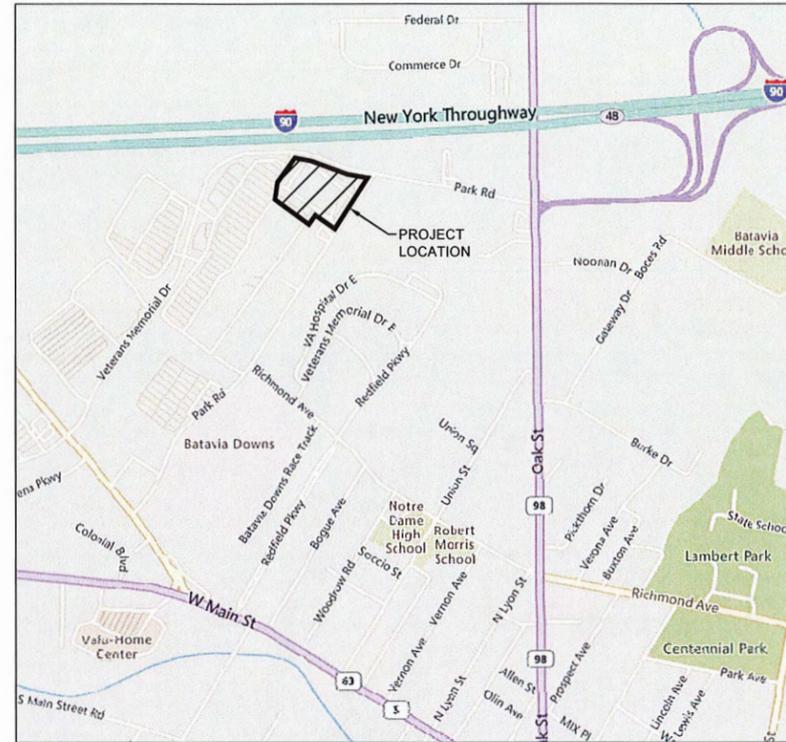
+ Find Address or Pl...
-
Home
Previous
Next
Location

Parcels (2024): 8250 Park Rd LLC



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CONTRACT DRAWINGS



LOCATION PLAN
NOT TO SCALE



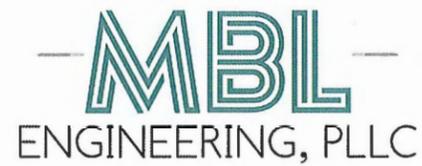
INDEX TO DRAWINGS

- COVER SHEET
- C-101 OVERALL SITE PLAN
- C-102 ENLARGED SITE DEMOLITION PLAN
- C-103 ENLARGED SITE PLAN
- C-501 MISCELLANEOUS DETAILS

HOLIDAY INN CANDLEWOOD SUITES

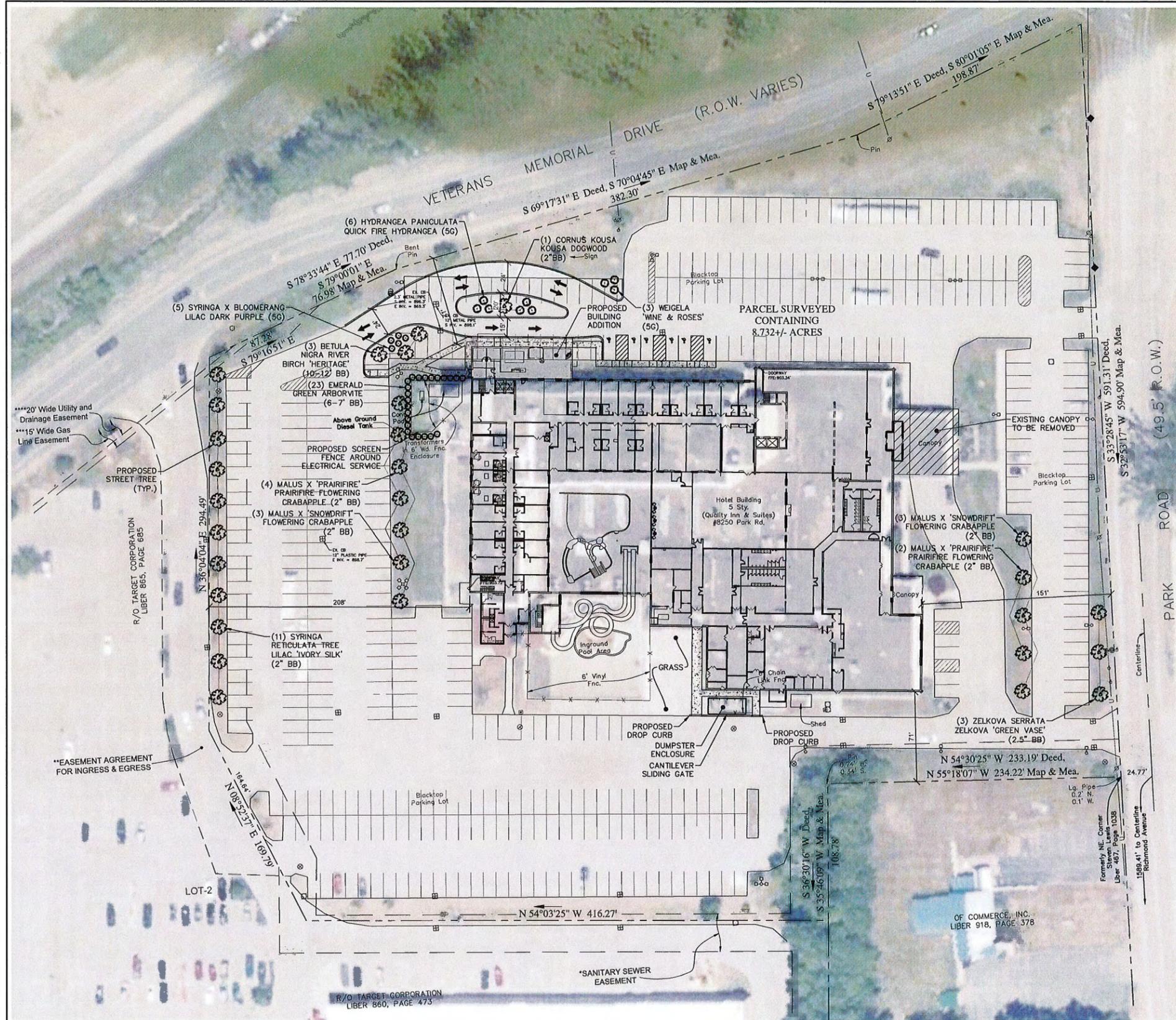
8250 PARK ROAD
TOWN OF BATAVIA
GENESEE COUNTY

MARCH 2023
REVISED MAY 2, 2023



MBL ENGINEERING, PLLC
16510 BALCH PLACE
MANNSVILLE, NY 13661

TOWN OF BATAVIA:	
PLANNING BOARD CHAIR	DATE
TOWN ENGINEER	DATE



NO.	DATE	ISSUED FOR TOWN APPROVAL	REVISOR	COMMENTS
A	3/30/23			
B	5/2/23			

OVERALL
SITE PLAN



HOLIDAY INN
8250 PARK ROAD
TOWN OF BATAVIA
GENESEE COUNTY

BULK REGULATIONS - COMMERCIAL - C
(±8.732 ACRES)

	EXISTING	PROPOSED	REQUIRED
FRONT YARD	99.6'	71'	50'
PARKING	440	409	HOTEL: 172 EVENT SPACE: 274 TOTAL: 446

APPROVAL SIGNATURE:
STEVEN J. MOUNTAIN, P.E.
TOWN OF BATAVIA - TOWN ENGINEER

DATE

PROJECT #
23-073

DATE:
MARCH 2023

SHEET #
C-101

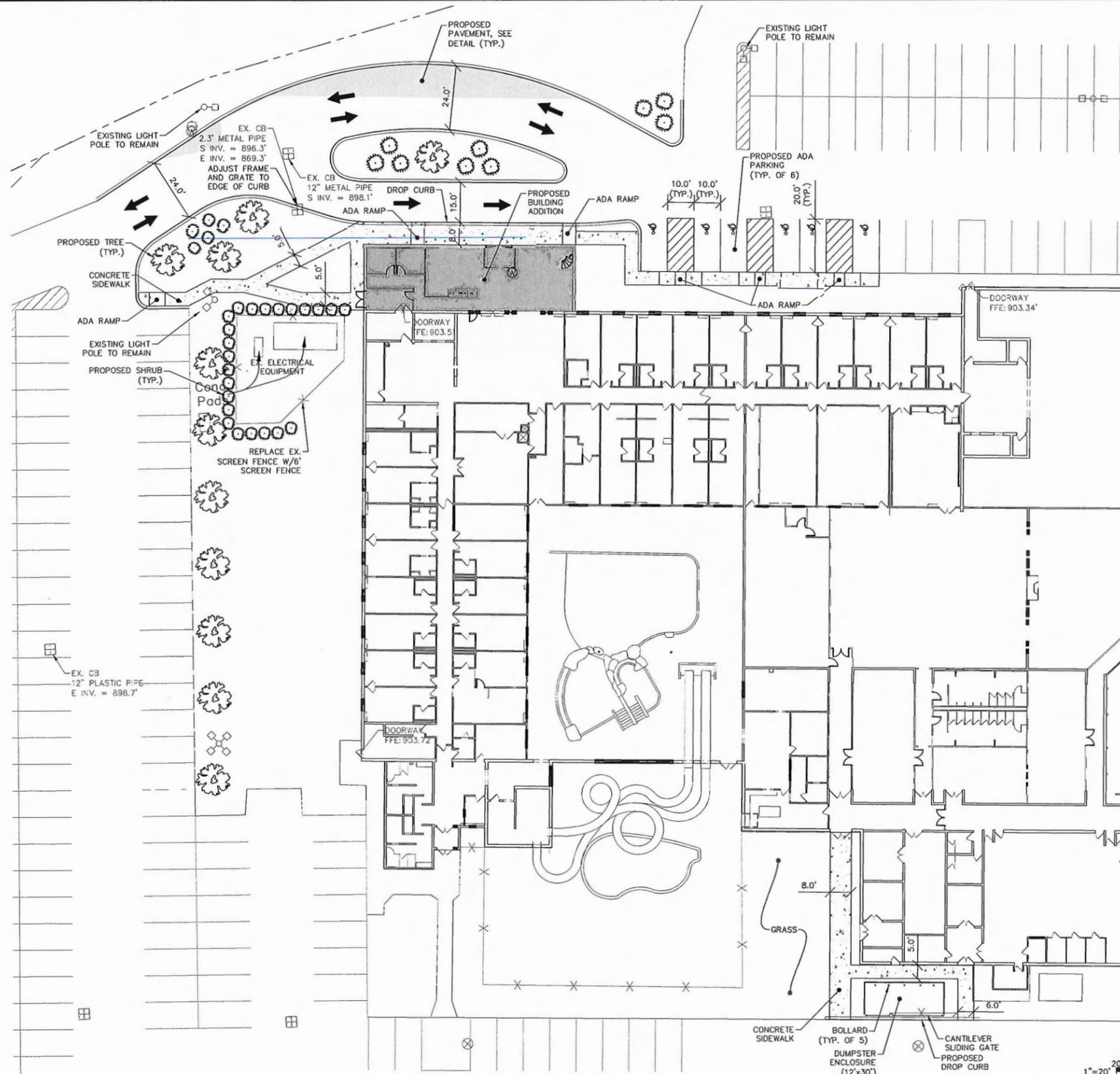


PLAN
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APPROVAL SIGNATURE: _____ DATE: _____
STEVEN J. MOUNTAIN, P.E.
TOWN OF BATAVIA - TOWN ENGINEER



NO.	DATE	ISSUED FOR TOWN APPROVAL	DRAWING RELEASE
B	5/2/23	REVISED PER TOWN COMMENTS	
A	3/30/23		

ENLARGED
SITE PLAN



HOLIDAY INN
8250 PARK ROAD
TOWN OF BATAVIA
GENESEE COUNTY

PROJECT #
23-073

DATE:
MARCH 2023

SHEET #
C-103

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Addition & Alterations:
**Holiday Inn
 Candlewood
 Suites**
 8250 Park Road,
 Batavia, NY 14020

ISSUE:
 ISSUED FOR PERMIT 11-07-25

SA PROJECT TEAM: PRINCIPAL: P. Silvestri
 PROJ. ARCH: JOB CAPT. J. Scorsone
 INTERIORS: DRAFTER L. Zacc

SEAL:

TITLE:

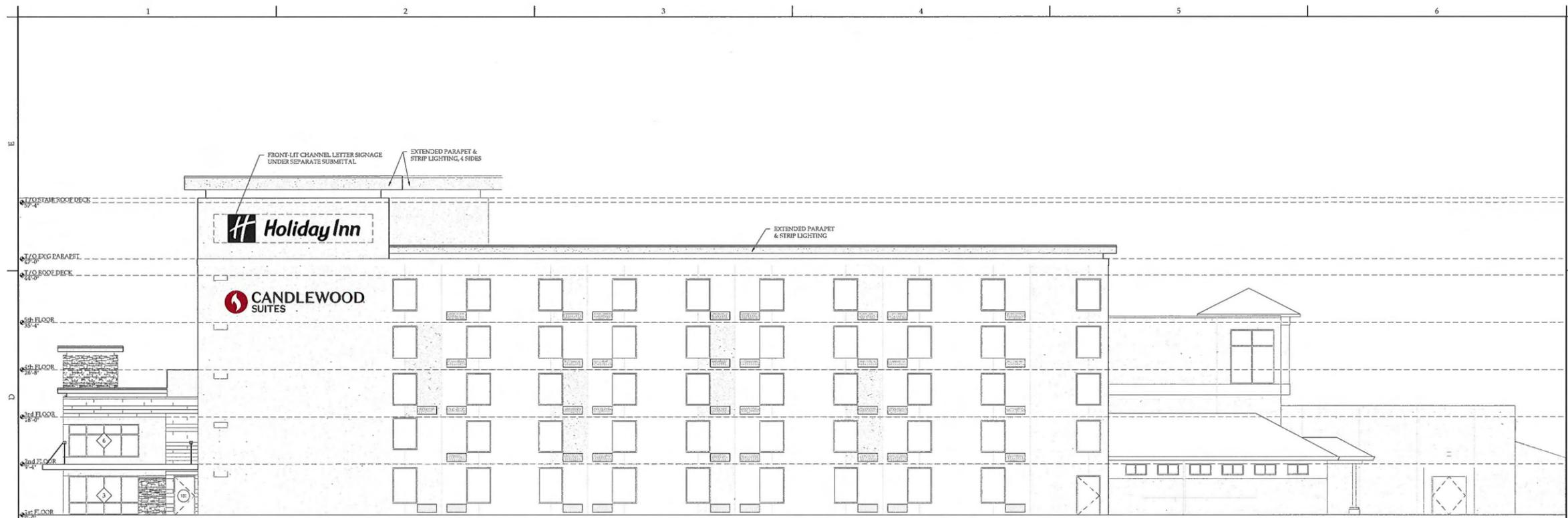
**EXTERIOR
 ELEVATIONS**



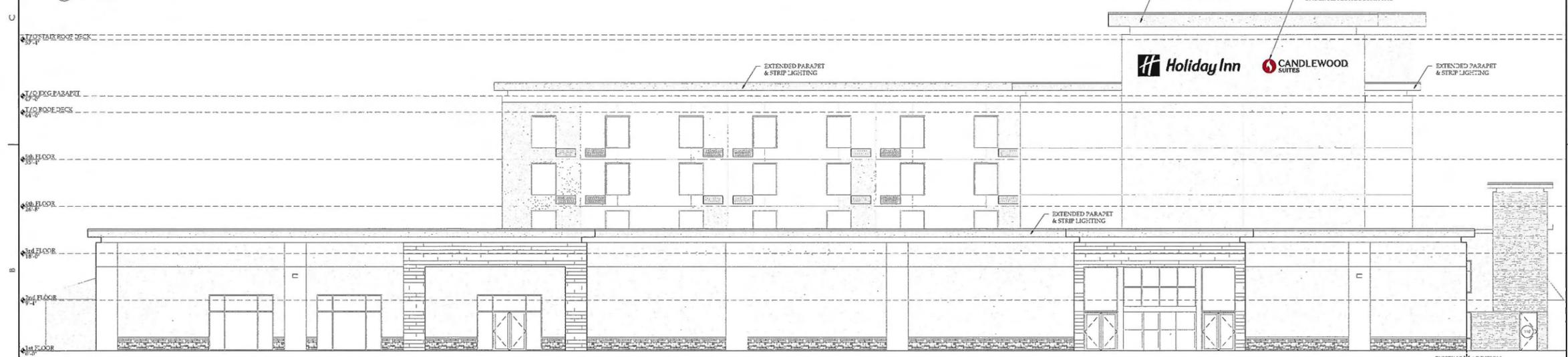
**SILVESTRI
 ARCHITECTS • PC**
 1321 MILLESPORT HWY PH. 716 951 9830
 AMHERST, NY 14221 FAX 716 951 4778

SA JOB #: 22040.01 DATE: 11-07-25

DRAWING #: A-201

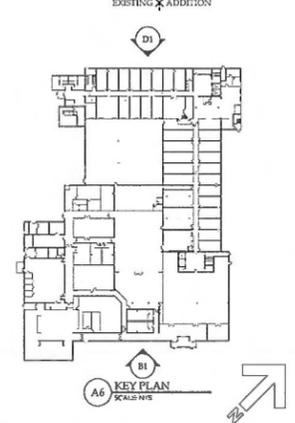


D1 NORTHWEST ELEVATION
 SCALE 1/8" = 1'-0"



B1 SOUTHEAST ELEVATION
 SCALE 1/8" = 1'-0"

- EXTERIOR FINISH LEGEND**
- WOOD-LOOK ALUMINUM SIDING
 - CULTURED STONE
 - EPS/PAINT COLOR 1
 - EPS/PAINT COLOR 2
 - EPS/PAINT COLOR 3
- EXTERIOR FINISH NOTES**
- CLEAN AND PAINT ALL EXISTING TO REMAIN EPS IN COLORS AS INDICATED. REPLACE ANY FAILING SEALANT JOINTS TO PREVENT WATER INFILTRATION.



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Addition & Alterations:
**Holiday Inn
 Candlewood
 Suites**

8250 Park Road,
 Batavia, NY 14020

ISSUE:
 ISSUED FOR PERMIT 11-07-25

SA PROJECT TEAM: PRINCIPAL: *E. Silvestri*
 PROJ. ARCH: JOB CAPT: *L. Scarpa*
 INTERIORS: DEAFTER: *L. Zano*

TITLE:

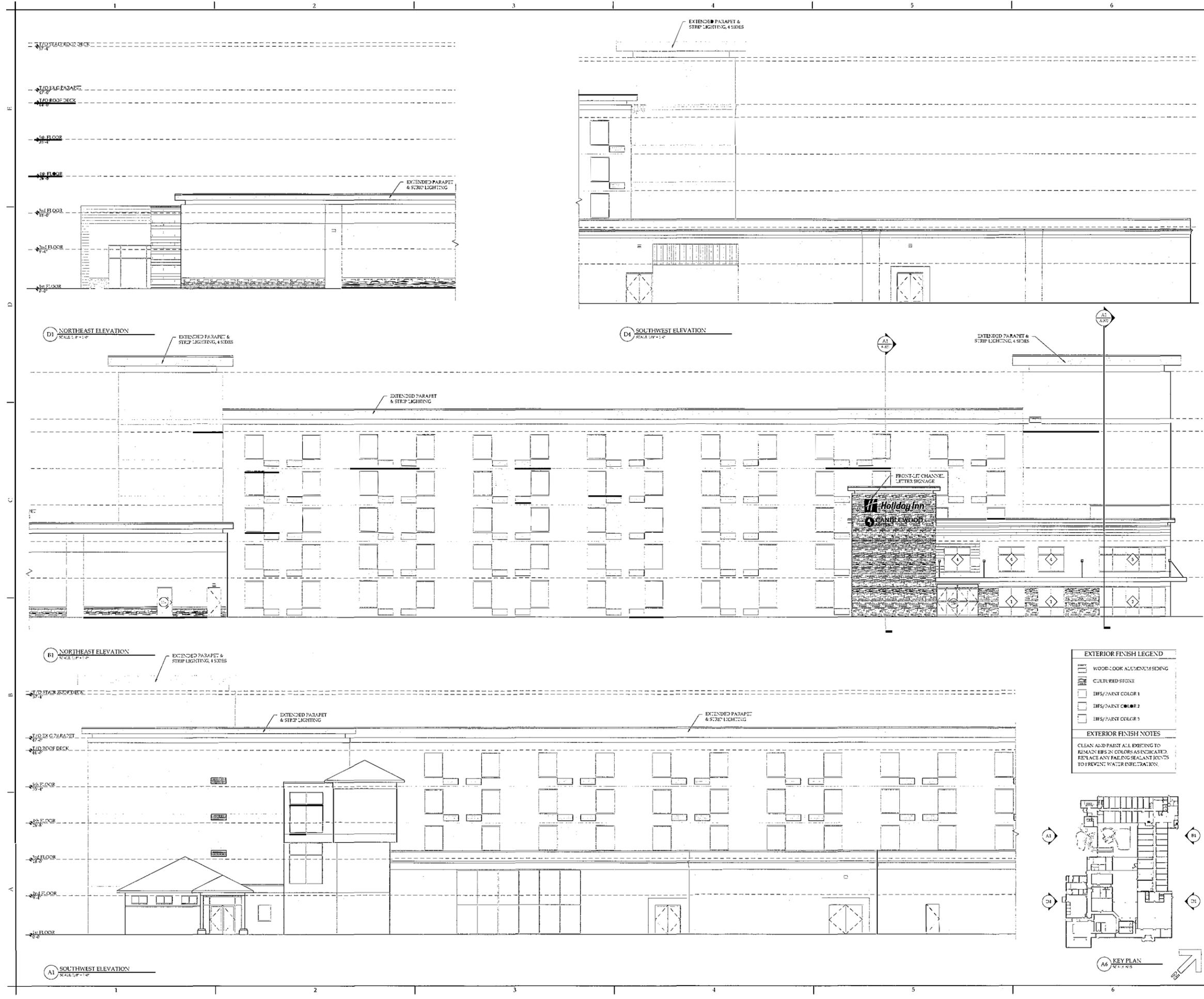
**EXTERIOR
 ELEVATIONS**



**SILVESTRI
 ARCHITECTS • PC**
 1321 MILLERSPORT HWY PH: 716-681-0900
 AMHERST, NY 14201 FAX: 716-681-0773

SA JOB #: 22040.01 DATE: 11-07-25

DRAWING #: **A-202**



EXTERIOR FINISH LEGEND

	WOOD-LOOK ALUMINUM SIDING
	CULTURED STONE
	EBS/PAIN T COLOR 1
	EBS/PAIN T COLOR 2
	EBS/PAIN T COLOR 3

EXTERIOR FINISH NOTES

CLEAN AND PAINT ALL EXISTING TO REMAIN EBS IN COLORS AS INDICATED. REPLACE ANY FAILING SEALANT JOINTS TO PREVENT WATER INFILTRATION.



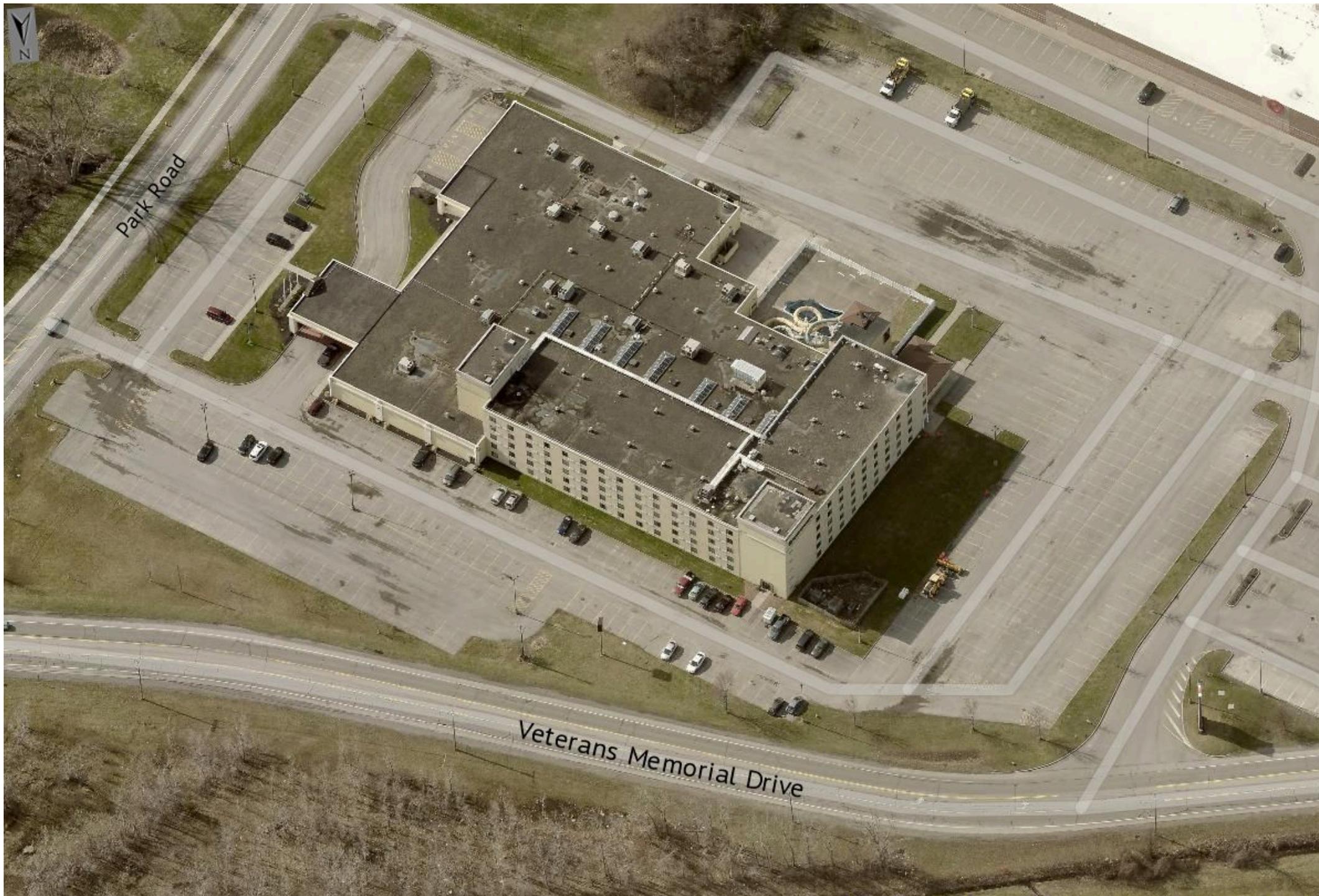
B1 NORTH ELEVATION
SCALE: 3/32" = 1'-0"

T-02-BAT-02-26



04/04/2025

T-02-BAT-02-26



04/04/2025

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