

GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID

C-06-BAT-10-22

191000000000000000000	Review Date	10/13/2022
Municipality	BATAVIA, C.	
Board Name	ZONING BOARD OF A	APPEALS
Applicant's Name	Bradley Trzecieski	
Referral Type		
Variance(s)	Use Variance	
Description:	Use Variance to use a por	tion of a first floor for residential use.
Location	327 Ellicott St. (NYS I	Rt. 63), Batavia
Zoning District	Central Commercial (C-3) District
PLANNING BOARD F	RECOMMENDS:	

APPROVAL

EXPLANATION:

Given that the use is preexisting and that there is limited use for that portion of the property as a commercial use, the proposed variance should pose no significant county-wide or inter-community impact.

October 13, 2022

Director

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 PLA 3837 West Main Street Road Batavia, NY 14020-9404 Physics (595) 915-7001	NNING		RTMENT USE ONLY: C-06-BAT-10-22
Phone: (585) 815-7901	* GENESEE CO Planning Board		RECEIVED Genesee County Dept. of Planning 10/4/2022
	Required Accordin UNICIPAL LAW ARTICLE (Please answer ALL questions a	12B, SECTION	
1. <u>Referring Board(s) Informa</u>	TION 2. APPLICAN	<u>t Information</u>	
Board(s) Zoning Board of Appeals	Name Bradle	y Trzecieski	
Address One Batavia City Centre	Address 7 Fa	rnsworth Ave.	
City, State, Zip Batavia, NY 14020	City, State, Zip	Oakfield, NY 14	125
Phone (585) 345 - 6345 E	Ext. Phone (716) 481	1646 Ext.	Email bradleyt48@gmail.com
MUNICIPALITY: City	Town Village of Ba	avia	
3. <u>TYPE OF REFERRAL:</u> (Check all app			·
Area Variance Use Variance Special Use Permit Site Plan Review	 Zoning Map Change Zoning Text Amendments Comprehensive Plan/Update Other:	🗌 Pre	ision Proposal liminary al
4. LOCATION OF THE REAL PROPE	RTY PERTAINING TO THIS REI	FERRAL:	
A. Full Address 327 Ellicott St.			
B. Nearest intersecting road Hutch	ins St.		
C. Tax Map Parcel Number 84.06	6-2-9		
D. Total area of the property	Area of pro	perty to be disturbe	d
E. Present zoning district(s)			
5. <u>REFERRAL CASE INFORMATION</u> A. Has this referral been previously		Planning Board?	
🔲 NO 🛛 YES If yes, give d	ate and action taken		
B. Special Use Permit and/or Varia	nces refer to the following section(s) of the present zon	ing ordinance and/or law
BMC 190-14 A.			
C. Please describe the nature of this	request Approval to use a port	on of a first floor f	or residential use in the C-3
			. <u></u>
6. <u>ENCLOSURES</u> – Please enclose copy			
Local application Site plan	 Zoning text/map amendmen Location map or tax maps 	nts 🔄 New o	or updated comprehensive plan s
Subdivision plot plans SEQR forms	Elevation drawings	Other:	Cover letter, floor plan
7. CONTACT INFORMATION of the pe	erson representing the community i	n filling out this for	n (required information)
Name Douglas Randall	Title Code Enf. Officer	Phone (585)) 345 -6327 Ext.

	atavia City Cantra Ratavia	NY 14020 E	drandall@hatavianavyvark.aam
Address, City, State, Zip One Ba	alavia City Centre, Dalavia	I, INT 14020 Ilmai	drandall@batavianewyork.com



City of Batavia Department of Public Works Bureau of Inspections

One Batavia City Center, Batavia, New York 14020

)20 (585)-345-6345

(585)-345-1385 (fax)

То:	Genesee County Planning Planning and Development Committee Zoning Board of Appeals
From:	Doug Randall, Code Enforcement Officer
Date:	10/2/22
Re:	327 Ellicott St.

Tax Parcel No. 84.066-2-9

Zoning Use District: C-3

The applicant, Bradley Trzecieski (owner), has applied for a building permit to gut and renovate an existing building that includes a partial first floor residential use. Approximately 852 sq.ft. of a 1,500 sq.ft. dwelling unit is existing on the first floor rear half of this building. The residential use has been vacant for more than a year and has lost its nonconforming use status.

Review and Approval Procedures:

County Planning Board- Pursuant to General Municipal Law 239 m, referral to the County Planning Board is required since the property is within 500 feet of the right of way of a state road or highway.

City Planning and Development Committee- Pursuant to section 190-49 C, Any application that includes a non-permitted use shall be referred to the PDC for their recommendation prior to submittal to the ZBA.

Zoning Board of Appeals- Pursuant to BMC Sec. 190-49 of the zoning ordinance, the ZBA shall review and act on required variances.

Required variances- Use

1) BMC 190-14 A Residential dwelling units are not permitted principal uses within the C-3 Central Commercial district.

Note: BMC 190-36 Whenever a non-conforming use has been discontinued for a period of one year, such structure shall not be reused without an appropriate variance.

The Zoning Board of Appeals will be the lead agency to conduct SEQR.

CITY OF BATAVIA APPLICATION TO THE ZONING BOARD OF APPEALS Application No.: Hearing Date/Time: APPLICANT: RAN RZECIESKI nail com Name E-Mail Address AVE -ARNSWORTH 716-481-1646 Street Address Phone Fax OAKFIE N 1412 Cin State Zip X_{Owner} STATUS: Agent for Owner Contractor OWNER: RADI IFSKT egmail ocom Name E-Mail Address 116-481-6460 Street Address Phone Fax NL 4124 City State Zip LOCATION OF PROPERTY: ICOT 14020 AUIA AM 993 DETAILED DESCRIPTION OF REQUEST: OOR TOFN P Owm FRCTAL 14 Applicant must be present at the hearing date. Failure to do so will result in the application being discarded. It is the responsibility of the applicant to present evidence sufficient to satisfy the Zoning Board of Appeals that the benefit of the applicant does not outweigh the health, safety, morals, aesthetics and general welfare of the community or neighborhood. ignatur Date Applicant **Owner's Signature** To be Filled out by Zoning Officer TAX PARCEL: 84,066-2-0 FLOOD PLAIN: AH. ZONING DISTRICT: C-3 **TYPE OF APPEAL:** Area Variance FEE: \$50 (One or Two Family Use) Use Variance 100 (All other Uses) _ Interpretation Decision of Planning Committee Provision(s) of the Zoning Ordinance Appealed: BMC 190 Units are not punited principal

Use Variance Application Statement of Unnecessary Hardship

In order for the Zoning Board of Appeals to grant a use variance, an applicant must show documentation in the record that the restrictions of the Zoning Ordinance has caused unnecessary hardship. In order to prove such unnecessary hardship the applicant shall demonstrate to the Zoning Board of Appeals that for each and every permitted use under the Zoning Ordinance for the particular district where the property is located, that all four (4) requirements as per §81-b of the General City Law have been proven. Additional documentation may be included. If any one of these requirements have not been proven, the Zoning Board of Appeals must deny the variance, as per §81-b of the General City Law.

Explain how the request conforms to EACH of the following requirements (additional pages may be attached):

1. Reasonable Return. The subject property is not capable of yielding a reasonable rate of return if used for its present use or developed, redeveloped or used for any other use permitted in the district in which such property is located. There is no means other than the granting of the variance by which the property can yield a reasonable return. Such inability to yield a reasonable return must be shown by specific fact (dollars and cents) from an expert or authority in economic deprivation, not the unsupported opinion of the owner or those appearing for the owner.

"The applicant cannot realize a reasonable return, provided that lack of return is substantial as demonstrated by competent financial evidence"

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FLOOR AND THE REAR OF FIRST FLOOR AS
ONE RESEDENTEAL UNIT THE RETURN ON
INDESTIMENT WILL YEELD THE PROPER RETURN
FOR A SULTASINABLE JUNESTIMENT.

(Please provide / attach competent financial evidence)

2. <u>Unique Hardship.</u> The inability to yield a reasonable return results from a unique circumstance peculiar to the subject property which does not apply to or affect other properties in the immediate vicinity that are subject to the same regulations. The personal situation of the owner shall not be considered unique.

"The alleged hardship relating to the property in question is unique, and does not apply to a substantial portion of the district or neighborhood"



<u>Essential Character of the Neighborhood.</u> The granting of the variance will not be materially detrimental to the public health, safety, and welfare or injurious to the enjoyment, use or development of neighboring properties or the community. Applicant must demonstrate that the proposed use will not change the essential character of the neighborhood with regard to such physical and environmental elements such as parking, traffic, signage, landscape, architectural and structural features, location and dimensions of buildings, any by-products of proposed use such as noise or smoke, and any other impacts upon adjacent or neighboring lands.

"The requested use variance, if granted, will not alter the essential character of the neighborhood"

THE REQUESTED USE HAR TAURE WITH WW
MTEL ME USE UPPE ADNUE WELL POT
THE REQUESTED USE UPP JANCE WILL NOT MITER THE CHARACTER OF THE NEIGHBORHOOD
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AND SUSTAWN ABLE OF TEVENELGHBOPHEN
The NECOHISOLAND

Not Self-Created. The inability to yield a reasonable return is not the result of any action by the owner or predecessors in title. The applicant must show that when the property was purchased the zoning restrictions from which a use variance is now sought were not in existence or that some other change or factor has occurred that has resulted in an inability to yield a reasonable return. Otherwise, the hardship is self-created.

"The alleged hardship has not been self-created"

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Applicant's Signature Date Provider of Financial Evidence Date

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3.

USE VARIANCE

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Statement of Income and Expense All Entries Must be Completed and Documented for at Least Two (2) Calendar Years or From the Date of Purchase Whichever is Less

PRO	PERTY	TY ADDRESS: 327 ELLICOTT ST. BATAULA NY 140	90
А.	PRO	OPERTY DATA	
	1. 2.	Date property was purchased by current owner $Old - 19 \cdot 3018$ Was a Certificate of Occupancy issued?NIA ALKEA07Date of Issuance? $Old \cdot 19 \cdot 3018$ If so, for what use(s)? $Old \cdot 19 \cdot 3018$ If not, why?	
	3.	Cost of Purchase 50,000	
	<u>4</u> .	a) Amount of Mortgage 50,000 Interest Rate 67. Mortgage Holder Torne Kabe Duration 1548 Address BATAULA NY 14020	
		b) Amount of Mortgage Interest Rate Mortgage Holder Duration Address	
		c) Amount of Mortgage Interest Rate Mortgage Holder Duration	
	5.	Is the property for sale? NO If so, for how long asking price for what use(s) Have any offers been received If so, for what amount(s)	
		Summarize any attempts to sell the property	
	6.	Present value of property 58,000 Source(s) <u>CETT OF GATAURA ASSECTIVENT</u> TOWPKENS	

USE INCOME -RUNT 12000 OMMER CHAL 1. RESIDENTAL 006 2. 3. 4. 5. 6. 7. 8. 9. 10. TOTAL RENTAL INCOME LESS VACANCY FACTOR (Attach explanation if greater than 8%) TOTAL GROSS INCOME **ANNUAL EXPENSES** 1. Annual Fixed Charges 2342 C+74+ SCHOOL Real Estate Taxes (City & County) Insurance..... Average Annual Interest (over next 5 years) ______

B. GROSS ANNUAL INCOME [BASED ON PERMITTED USE(S)]

C.

2.	Operating Expenses Electric	1200	
	Fuel	12:00	
	Water	1200	
	Advertising	500	
	Miscellaneous (attach explanation)		
3.	Maintenance Expenses (attach list)		
	Repairs	6001	
	General Building Maintenance	1000	
	Yard and Ground Care	400	

Miscellaneous.....

1250 TOTAL ANNUAL EXPENSES Profit or Loss

400

Ð. TOTAL INVESTMENT

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- 1.
- Down payment..... Capital Improvements (attach list) 2.
- Principal Paid to date (original mortgage less 3. current principal balance).....

TOTAL INVESTMENT (Sum of D1, D2, & D3)

E. **RATE OF RETURN = Profit or Loss**

TOTAL INVESTMENT

Signature of Pre arer

Date

Profession of Preparer

Short Environmental Assessment Form Part 1 - Project Information

Instructions for Completing

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Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

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

Part 1 – Project and Sponsor Information	
BRADLEY J. TPZECJESKI	
Name of Action or Project:	0
REMOREL AND REVITALIZE A MARN STREET	PROPERTY
Project Location (describe, and attach a location map):	and a second
327 ELLICOTT ST. BATAVEA NY 14020	
Brief Description of Proposed Action:	angal namu ka manga daan taa pisa 160 angan ya dinan taa pinisa ta 2 yaa kayaa
TO KEEP ORAGANAL FIRST FLOOD FOOT PRANT WE	71, 122,00
HUDH UP IT WHER > PLOPEDTY RESTARTED	
SPACE WHITCH TO LOONAD POLITICAL	D'AZVZYG
SPACE WHITCH IS LOCATED BENJAR THE FIRS	T FLOOR
COMP STREET FRONT COMMERCIAL SPACE.	
Name of Applicant or Sponsor:	
Telephone: TILE-YOL	-1646
BRADLEY). PLECIESKI B-Mail: Dradleyt	18 equail. q
Address:	in the function of
FARDSWORTH HUR	
City/PQ: State: Zip	Code:
OAKFIELD NY	14925
 Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? 	NO YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that	
may be affected in the municipality and proceed to Part 2. If no, continue to question 2.	
2. Does the proposed action require a permit, approval or funding from any other government Agency?	NO YES
If Yes, list agency(s) name and permit or approval:	
3. a. Total acreage of the site of the proposed action?	
b. Total acreage to be physically disturbed?	
c. Total acreage (project site and any contiguous properties) owned	
or controlled by the applicant or project sponsor?	
4. Check all land uses that occur on, are adjoining or near the proposed action:	
Urban Rural (non-agriculture) Industrial Commercial Residential (suburban)	
Forest Agriculture Aquatic Other(Specify):	
Parkland	

5.	Ist	the proposed action,	NO	YES	N/A
1	a.	A permitted use under the zoning regulations?			
	b.	Consistent with the adopted comprehensive plan?		Ø	
6.	Ts f	the proposed action consistent with the predominant character of the existing built or natural landscape?		NO	YES
	10				[X]
7.	Is	the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES
TEY	'es,	identify:		M	
8.	ย,	Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES
	Ь.	Are public transportation services available at or near the site of the proposed action?			X
	¢.	Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?			X
9.	Do	es the proposed action meet or exceed the state energy code requirements?		NO	YES
If th	1e p	roposed action will exceed requirements, describe design features and technologies:		Ø	
10.	W	II the proposed action connect to an existing public/private water supply?		NO	YES
	s	If No, describe method for providing potable water:			Ø
π.	W	ill the proposed action connect to existing wastewater utilities?		NO	YES
		If No, describe method for providing wastewater treatment:			X
		Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or distric s listed on the National or State Register of Historic Places, or that has been determined by the	et	NO	YES
Cot	nmi	issioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the egister of Historic Places?	•	X	
arc	b. 1aec	Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for plogical sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?		Ø	
13.		Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain tlands or other waterbodies regulated by a federal, state or local agency?		NO	YES
	b.	Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		X	
lf Y	′es,	identify the wetland or waterbody and extent of alterations in square feet or acres:			

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14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
Shoreline Forest Agricultural/grasslands Early mid-successional		
Wetland Urban Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	لما	
16. Is the project site located in the 100-year flood plan?	NO	YES
		X
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
a. Will storm water discharges flow to adjacent properties?	M	
 b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: 	Ø	
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?	NO	YES
If Yes, describe:	Þ	
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
If Yes, describe:	X	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE B MY KNOWLEDGE	EST OF	I <u></u>
Applicant/sponsor/name: DRADLEY J. FZECTESEL Date: 09-1	0-2	600
Signature: Bladley Myneski Title: OWNER	rat 10** Is qdasag . 19-, - 10	

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CITYOF BATAVIA GENESEE COUNTY NEW YORK





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GENESEE COUNTY NEW YORK



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