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## GENESEE COUNTY PLANNING BOARD REFERRALS NOTICE OF FINAL ACTION

GCDP Referral ID T-01-DAR-3-22 **Review Date** 3/10/2022 DARIEN, T. Municipality **Board Name** ZONING BOARD OF APPEALS **Steven Cummings Applicant's Name Referral Type** Variance(s) Area Variance(s) Description: Area Variance place a 128 sq. ft. (8 x 16 ft.) storage shed for a single-family home. Side Yard Setback Minimum Required: 10 ft. Proposed: 4 ft. 10565 Harper Rd., Darien Location

**Zoning District** 

Commercial (C) District

PLANNING BOARD RECOMMENDS:

### APPROVAL

#### EXPLANATION:

The proposed setback should pose no significant county-wide or intercommunity impact.

Director

March 10, 2022

Date

If the County Planning Board disapproved the proposal, or recommends modifications, the referring agency shall NOT act contrary to the recommendations except by a vote of a majority plus one of all the members and after the adoption of a resolution setting forth the reasons for such contrary action. Within 30 days after the final action the referring agency shall file a report of final action with the County Planning Board. An action taken form is provided for this purpose and may be obtained from the Genesee County Planning Department.

SEND OR DELIVER TO: GENESEE COUNTY DEPARTMENT OF PLA 3837 West Main Street Road Batavia, NY 14020-9404 Dhoney (585) - 944 - 594	NNING Clear Form	<b>DEPARTMENT</b> GCDP Referral # <b>T-01-DAF</b>		
	* GENESEE CO PLANNING BOARD Required Accordin UNICIPAL LAW ARTICLE	REFERRAL g to: 12B, SECTION 239 L,	ee County f Planning 2	
1. <u>Referring Board(s) Informa</u>	(Please answer ALL questions a	s fully as possible) <u>T INFORMATION</u>		
Board(s) Town of Darien ZBA				
Board(s)       Town of Darien ZBA       Name       Steven Cummings         Address       10569 Alleghany Road       Address       10565 Harper Road				
City, State, Zip Darien Center, NY 14		Darien Center, NY 14040		
	Ext. 1026 Phone (585) 813 -			
	<u>·</u>			
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:	Subdivision Prope Preliminary Final	sal	
4. LOCATION OF THE REAL PROPE	RTY PERTAINING TO THIS REI	ERRAL:		
A. Full Address 10565 Harper Ro	oad, Darien Center, NY 14040			
B. Nearest intersecting road <b>Broad</b>	way Rd. (NYS Rt. 20)			
C. Tax Map Parcel Number 121-	9			
D. Total area of the property $0.22$	acres Area of pro	perty to be disturbed $8 \times 16$ fe	et	
E. Present zoning district(s) <b>Comm</b>	ercial (C) District (Property pre	-dates zoning)		
<ul> <li>5. <u>REFERRAL CASE INFORMATION</u>: A. Has this referral been previously</li> <li>NO YES If yes, give d</li> </ul>	reviewed by the Genesee County I	lanning Board?		
B. Special Use Permit and/or Varia	nces refer to the following section(	s) of the present zoning ordinar	nce and/or law	
Schedule A - This use and prop	perty predates town Zoning Lav	v. Residential use.		
C. Please describe the nature of this	request Using the MDR setbac	c of 10 feet which is consist	ent with the current	
non-conforming preexisting use	. The applicant wants to place	an 8 x16 ft. prefab shed ad	jacent to his garage to	
store ice fishing equipment and	· ·			
6. <u>ENCLOSURES</u> – Please enclose copy	(s) of all appropriate items in regard	l to this referral		
<ul> <li>Local application</li> <li>Site plan</li> <li>Subdivision plot plans</li> <li>SEQR forms</li> </ul>	<ul> <li>Zoning text/map amendmen</li> <li>Location map or tax maps</li> <li>Elevation drawings</li> <li>Agricultural data statement</li> </ul>	Photos	omprehensive plan o support the area	
7. <u>CONTACT INFORMATION</u> of the pe	rson representing the community i	n filling out this form (required	information)	
Name Gwen Yoder	Title PBZBA Clerk	Phone (585) 547 - 227	74 Ext. 1026	

Address, City, State, Zip 10569 Alleghany Road, Darien Center, NY 14040 Email pbzba@townofdarienny.com

# TOWN OF DARIEN

**APPLICATION TO THE ZONING BOARD OF APPEALS** 

APPEAL NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_

APPLIC	CANT: NAME:	Steven Cummings		
	ADDRESS:	10565 Harper Rd.		
	<u>  </u>	Darien, NY 14040		
	TELEPHONE #: <u></u>	585-813-1380		
1.	Request to the Board of Ap	peals to overturn the Zoning E	Inforcement Officer's decision	
	to DENY () GRAN	NT ( ) an application for a Ze	oning Permit	
	number	Dated		
2.	APPLICATION FOR:	Use Variance (	Intermetation (	
Ζ.	AFFLICATION FOR:	Use Variance ([) Area Variance ([v])	Interpretation (	
		Notice of Appeal (	Other (	
		Notice of Appear ()	Please Specify	
			······································	
3.	Address of Project Site: Same			
4.	Provisions of Zoning Law b	eing Appealed:		
	Article Schedule A See	ction Subsection	Paragraph	
5.	Has a previous Appeal been	n filed pertaining to this parcel	$?  NO(\checkmark)  YES(\square)$	
	If Yes, list Appeal No.	Date	Purpose of Request:	
6.	Justification for request (Ge	neral Explanation): <u>Placement</u>	of the shed is adjacent to the garage	

and does not pose an encroachment on septic system. The building still allows for access to backyard and does not alter the character of the neighborhood.

\*A more SPECIFIC RESPONSE should accompany this application on separate sheet(s) of paper.

The applicant shall submit with this Appeal, appropriate supporting materials including, but not limited to, site plans, elevations, traffic circulation diagrams and any other material that will assist the Zoning Board in making a determination regarding this request.

CERTIFICATION: I hereby certify that I have read and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use will be complied with whether specified herein or not. The granting of an Appeal does not presume to give authority to violate or cancel the provisions of any other state or local ordinance or law regulating construction or performance of construction and/or use.

Applica	nts Signature	Reviewed by Zoning Enforcement Officer
OFFICIAL USE ONLY	FEE COLLECTED         Public Hearing Fee \$         PAID: Cash \$	c # Town Clerk Signature/Date

## Town of Darien Criteria to Support Area Variance

In making its determination, the Zoning Board of Appeals shall take into consideration the benefit to the applicant if the variance is granted, as weighed against the detriment to the health, safety, moral, aesthetics and welfare of the neighborhood or community. The Zoning Board of Appeals shall consider the following test, as per §267-b of the NYS Town Law when making its determination:

Explain **how** the proposal conforms to EACH of the following requirements:

1. **Undesirable Change in neighborhood Character.** The granting of the variance will not produce an undesirable change in the neighborhood or a detriment to nearby properties. No - Sheds and outbuilding are common and acceptable uses in this neighborhood.

2. Alternative Cure Sought. There are no other means feasible for the applicant to pursue that would result in the difficulty being avoided or remedied, other than the granting of the area variance.

True - Placement of the shed on the South side of the garage would encroach on the septic system.

3. **Substantiality.** The requested area variance is not substantial.

Area variance is 60% of the requirement of 10' under Zoning Law. Property predates Zoning Law and is considered MDR for

purposes of the variance request.

4, **Adverse Effect or Impact.** The requested variance will not have an adverse effect or impact on the physical or environmental condition in the neighborhood or community.

5. **Not Self-Created.** The alleged difficulty existed at the time of the enactment of the provision or was created by natural force or governmental action, and was not the result of any action by the owner or the predecessors in title.



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