

Zoning Board of Appeals

January 3rd, 2023 @ 7:00 P.M.

Appeal 176SUP-22

Amos Stauffer – SUP- Heavy Equipment Repair Shop

Area Variance – Build Commercial Repair Shop in front of the house.

Appeal 181SUP-22:

Rail Riders – 24x40 Storage Shed – Holding Tank for Porta Potties

Appeal 183SUP-22

Martin's Equipment – 3840 Sq Ft Addition to Shop

Appeal 184SUP-22:

D & L Rental & Supply – 2432 Sq Ft Addition to Main Building

TOWN OF BENTON

PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION

Application No. 17650P-22 Date 11-29-22 Fee 150

Name: Amos Steuffer phone 315-694-7790

Address: 1306 Louisa Rd email _____

Applicant is applying for the following:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Interpretation |
| <input type="checkbox"/> Use Variance | <input type="checkbox"/> Subdivision |
| <input checked="" type="checkbox"/> Special Use Permit | <input type="checkbox"/> Site Plan Review |

Other _____

Location of Property 1483 14A

Tax Map No. 37.02-1-7.11 Zoning District AR-1

Describe Action requested:

AREA Var - Build Comm. Repair Shop in front of
The House

SUP - Repair Shop 40x60, Heavy Equipment Repair

Area Variance Information:

	Required	Actual	Variance Request
Frontage:	_____	_____	_____
Front Setback:	_____	_____	_____
Side Setback:	_____	_____	_____
Rear Setback:	_____	_____	_____
Lot Size:	_____	_____	_____

Attached to this application is the following documentation:

Site Plan Construction Plans SEQR Other _____

Property Owner Amos Steuffer Telephone _____
Address _____

Signature x Amos H Steuffer Date 11-29-22

TOWN OF BENTON
BUILDING AND ZONING APPLICATION

1000 SR 14A, PENN YAN, NY 14527
Cell (315) 719-3232 Office 315-536-9600
FAX 315-536-7715
E-MAIL: zoning@townofbenton.us

Name of Applicant Ann S. Stueffer Date: 11-29-22
Address 1360 Cour Joy Phone: 315-694-7790
Property Owner (if not same) _____
Address _____ Phone: _____

APPLICATION IS BEING MADE FOR:

Building Permit Variance/Special Use ** Septic System Permit**
 Site Plan ** Subdivision** Other (** Add'l Forms)

On Land Located at 1483 SR 14A (Same) or _____

Zoning District AR-1 Tax Map # 37.02-1-7.11

Present Use of Property Vac Land

Description of Proposed Improvements and/or Use: Build House Repair Shop, open a Repair Shop inside of a 40x60 Shop out front of House

Size of Improvement _____ Sq. Ft. Estimated Cost: _____

Type of Construction: Wood _____, Metal _____, Masonry _____, Other _____

Height: In Stories _____, In Feet _____

Yard Setback: Front _____, Rear _____

Side (Widest) _____, Side (Narrowest) _____

Signature: _____, Date: _____

Approved _____ Not Approved _____ Variance Requested _____

Variance Granted: Yes _____ No _____ Date: _____

Permit # 17650P-22 Fee \$ 150

Code Enforcement Officer: [Signature] Date: 11-29-22

Contractor Name: _____ Phone: _____

Address: _____ E-Mail address: _____

Insurance: Workman's Comp. Liability Exemption Form

Contractor/Owner agrees to comply with all New York State and Local Codes and Laws.

Contractor/Owner agrees to call for all inspections as required.

TOWN OF BENTON

PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION

Application No. 180SUB-22 Date 12/01/22 Fee \$100

Name: John & Jacqueline Nacca phone 585.453.7730

Address: 30 West Broad Street, Suite 406, Rochester, NY 14614 email _____

Applicant is applying for the following:

- | | |
|---|--|
| <input type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Interpretation |
| <input type="checkbox"/> Use Variance | <input checked="" type="checkbox"/> Subdivision |
| <input type="checkbox"/> Special Use Permit | <input checked="" type="checkbox"/> Site Plan Review |

Other _____

Location of Property 940 Angus Point Rd.

Tax Map No. 19.42-1-1, 19.34-1-11 & 19.42-1-3 Zoning District Ar-1 & LR

Describe Action requested:

This project involves the lot line adjustment of 3 parcels that are currently oriented in a way that does not optimize the lake front for all parties involved in the project. The new configuration will allow both land owners to have proper access and ownership of lakefront property. The new lot line adjustment will allow for two lots to have lake views and lake access, with the remaining portion to remain wooded. This application will also have a proposed new single family residence on the new lot farthest to the north.

Area Variance Information:

	Required	Actual	Variance Request
Frontage:	_____	_____	_____
Front Setback:	_____	_____	_____
Side Setback:	_____	_____	_____
Rear Setback:	_____	_____	_____
Lot Size:	_____	_____	_____

Attached to this application is the following documentation:

Site Plan Construction Plans SEQR Other _____

Property Owner _____ Telephone _____
Address _____

Signature John Nacca Date 12/01/22

TOWN OF BENTON
BUILDING AND ZONING APPLICATION

1000 SR 14A, PENN YAN, NY 14527
585-329-6904 315-536-9600
FAX 315-536-7715
E-MAIL: zoning@townofbenton.us

Name of Applicant John & Jacqueline Nacca Date: 11/17/22
Address 30 West Broad Street, Suite 406, Rochester, NY 14614 Phone: 585.453.7730
Property Owner (if not same) _____
Address _____ Phone: _____

APPLICATION IS BEING MADE FOR:

Building Permit Variance/Special Use ** Septic System Permit**
 Site Plan ** Subdivision** Other (** Add'l Forms)
Annexation

On Land Located at 940 Angus Point Rd. (Same) or _____

Zoning District LA-AR-1 Tax Map # 19.42-1-1 & 19.42-1-3 ; 19.34-1-11

Present Use of Property Vacant Land

Description of Proposed Improvements and/or Use: This project consists of a lot line adjustment and the construction of a new single-family residence. Site improvements include grading, drainage, and utilities

Size of Improvement 3,120 Sq. Ft. Estimated Cost: \$100,000

Type of Construction: Wood , Metal _____, Masonry _____, Other _____

Height: In Stories 1-story, In Feet 25'

Yard Setback: Front 79.4', Rear 308.5'

Side (Widest) 50', Side (Narrowest) _____

Signature: John Nacca Date: 11/21/2022
DocuSigned by: 9228BC2229164FA...

Approved _____ Not Approved _____ Variance Requested _____

Variance Granted: Yes No Date: _____

Permit # 180 SUB-22 Fee \$ \$100

Code Enforcement Officer [Signature] Date: 12-1-22

Contractor Name: _____ Phone: _____

Address: _____ E-Mail address: _____

Insurance: Workman's Comp. Liability Exemption Form

Contractor/Owner agrees to comply with all New York State and Local Codes and Laws.

Contractor/Owner agrees to call for all inspections as required.

TOWN OF BENTON

PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION

Application No. 18/SOP-22 Date 12-1-22 Fee 150

Name: Kathy Ferron phone 585-330-5949

Address: 2769 East Valley Ext email _____

Applicant is applying for the following:

- Area Variance
- Zoning Interpretation
- Use Variance
- Subdivision
- Special Use Permit
- Site Plan Review

Other Change to Sup

Location of Property 2039 Havens Cr

Tax Map No. 28.01-1-19 Zoning District AR-1

Describe Action requested:

24x40 Storage Shed for the Road Bikes
Holding tank for porta potties

Area Variance Information:

	Required	Actual	Variance Request
Frontage:	_____	_____	_____
Front Setback:	_____	_____	_____
Side Setback:	_____	_____	_____
Rear Setback:	_____	_____	_____
Lot Size:	_____	_____	_____

Attached to this application is the following documentation:

Site Plan Construction Plans SEQR Other _____

Property Owner [Signature] Telephone 585-330-5949
Address _____

Signature [Signature] Date 1-DEC-2022

TOWN OF BENTON
BUILDING AND ZONING APPLICATION

1000 SR 14A, PENN YAN, NY 14527
Cell (315) 719-3232 Office 315-536-9600
FAX 315-536-7715
E-MAIL: zoning@townofbenton.us

Name of Applicant Kathy Ferron Date: 12-1-22
Address 2769 East Valley Rd Phone: 585-330-5949
Property Owner (if not same) _____
Address _____ Phone: _____

APPLICATION IS BEING MADE FOR:

Building Permit Variance/Special Use ** Septic System Permit**
 Site Plan ** Subdivision** Other (** Add'l Forms)

On Land Located at 2039 Havens Cr (Same) or _____

Zoning District R2-1 Tax Map # 28.01-119

Present Use of Property Rail Riders

Description of Proposed Improvements and/or Use: 24x40 Storage Shed, Holding tank for the porta potties

Size of Improvement _____ Sq. Ft. Estimated Cost: _____

Type of Construction: Wood _____, Metal _____, Masonry _____, Other _____

Height: In Stories _____, In Feet _____

Yard Setback: Front _____, Rear _____

Side (Widest) _____, Side (Narrowest) _____

Signature: _____, Date: _____

Approved _____ Not Approved _____ Variance Requested _____

Variance Granted: Yes _____ No _____ Date: _____

Permit # 181500-22 Fee \$ 150.

Code Enforcement Officer [Signature] Date: 12-1-22

Contractor Name: _____ Phone: _____

Address: _____ E-Mail address: _____

Insurance: Workman's Comp. Liability Exemption Form

Contractor/Owner agrees to comply with all New York State and Local Codes and Laws.

Contractor/Owner agrees to call for all inspections as required.

TOWN OF BENTON

PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION

Application No. 18350P-22 Date 12-5-22 Fee 150

Name: Martin's Equipment phone 315-536-7096

Address: 900 14A email _____

Applicant is applying for the following:

- | | |
|--|--|
| <input type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Interpretation |
| <input type="checkbox"/> Use Variance | <input type="checkbox"/> Subdivision |
| <input checked="" type="checkbox"/> Special Use Permit | <input type="checkbox"/> Site Plan Review |

Other Change

Location of Property 900 14A

Tax Map No. 27.25-1-5.1 Zoning District H.C.

Describe Action requested:

3840 sq foot Addition to Shop

Area Variance Information:

	Required	Actual	Variance Request
Frontage:	_____	_____	_____
Front Setback:	_____	_____	_____
Side Setback:	_____	_____	_____
Rear Setback:	_____	_____	_____
Lot Size:	_____	_____	_____

Attached to this application is the following documentation:

Site Plan Construction Plans SEQR Other _____

Property Owner _____ Telephone _____

Address _____

Signature Donald H. [Signature] Date 12-5-22

TOWN OF BENTON
BUILDING AND ZONING APPLICATION

1000 SR 14A, PENN YAN, NY 14527
Cell (315) 719-3232 Office 315-536-9600
FAX 315-536-7715
E-MAIL: zoning@townofbenton.us

Name of Applicant Martins Equipment Date: 12-5-22
Address 900 14A Phone: 315-536-7058
Property Owner (if not same) _____
Address _____ Phone: _____

APPLICATION IS BEING MADE FOR:

Building Permit Variance/Special Use ** Septic System Permit**
 Site Plan ** Subdivision** Other (** Add'l Forms)

On Land Located at 900 14A (Same) or _____

Zoning District HC Tax Map # 27.25-1-5.1

Present Use of Property Hardware Store

Description of Proposed Improvements and/or Use: 3840 sq ADD on

Size of Improvement 3840 Sq. Ft. Estimated Cost: _____

Type of Construction: Wood _____, Metal _____, Masonry _____, Other _____

Height: In Stories _____, In Feet _____

Yard Setback: Front _____, Rear _____

Side (Widest) _____, Side (Narrowest) _____

Signature: _____, Date: _____

Approved _____ Not Approved _____ Variance Requested _____

Variance Granted: Yes _____ No _____ Date: _____

Permit # 183 BP-22 Fee \$ 150

Code Enforcement Officer: [Signature] Date: 12-5-22

Contractor Name: _____ Phone: _____

Address: _____ E-Mail address: _____

Insurance: Workman's Comp. Liability Exemption Form

Contractor/Owner agrees to comply with all New York State and Local Codes and Laws.

Contractor/Owner agrees to call for all inspections as required.

TOWN OF BENTON

PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION

Application No. 184SUP-22 Date 12-5-22 Fee 150 -

Name: D. L. Rental and Supply phone _____

Address: 283 SR 14A email _____

Applicant is applying for the following:

- | | |
|--|--|
| <input type="checkbox"/> Area Variance | <input type="checkbox"/> Zoning Interpretation |
| <input type="checkbox"/> Use Variance | <input type="checkbox"/> Subdivision |
| <input checked="" type="checkbox"/> Special Use Permit | <input type="checkbox"/> Site Plan Review |

Other Change

Location of Property 283 SR 14A

Tax Map No. 7.04-1-8.12 Zoning District AR-1

Describe Action requested:

2432 Sq Foot Addition to main Building

Area Variance Information:

	Required	Actual	Variance Request
Frontage:	_____	_____	_____
Front Setback:	_____	_____	_____
Side Setback:	_____	_____	_____
Rear Setback:	_____	_____	_____
Lot Size:	_____	_____	_____

Attached to this application is the following documentation:

Site Plan Construction Plans SEQR Other _____

Property Owner _____ Telephone _____
Address _____

Signature M. J. A. [Signature] Date _____

TOWN OF BENTON
BUILDING AND ZONING APPLICATION

1000 SR 14A, PENN YAN, NY 14527
Cell (315) 719-3232 Office 315-536-9600
FAX 315-536-7715
E-MAIL: zoning@townofbenton.us

Name of Applicant DL Rental Date: 12-5-22
Address 283 SR 14A Phone: _____
Property Owner (if not same) _____
Address _____ Phone: _____

APPLICATION IS BEING MADE FOR:

_____ Building Permit Variance/Special Use ** _____ Septic System Permit**
_____ Site Plan ** _____ Subdivision** _____ Other (** Add'l Forms)

On Land Located at 283 SR 14A (Same) or _____

Zoning District A-1 Tax Map # 7.04-1-8.12

Present Use of Property _____

Description of Proposed Improvements and/or Use: 2432 Sq ADD for Main Building

Size of Improvement _____ Sq. Ft. Estimated Cost: _____

Type of Construction: Wood _____, Metal _____, Masonry _____, Other _____

Height: In Stories _____, In Feet _____

Yard Setback: Front _____, Rear _____

Side (Widest) _____, Side (Narrowest) _____

Signature: _____, Date: _____

Approved _____ Not Approved _____ Variance Requested _____

Variance Granted: Yes _____ No _____ Date: _____

Permit # 18450P-22 Fee \$ 150

Code Enforcement Officer [Signature] Date: 12-5-22

Contractor Name: _____ Phone: _____

Address: _____ E-Mail address: _____

Insurance: Workman's Comp. Liability Exemption Form

*Contractor/Owner agrees to comply with all New York State and Local Codes and Laws.
Contractor/Owner agrees to call for all inspections as required.*