Zoning Board of Appeals Agenda April 1st, 2025 @ 7:00 PM

Appeal #19SUP-25:

SBA Communications – Cell Tower Addition – 2544 Havens Corners Road

<u>Appeal # 32AV-25:</u>

Alvin Shirk – 1727 Bellona Station Road – Build a house behind existing barn.

<u>Appeal # 38AV-25:</u>

Smokin Petes Adventures – Route 14 Between 91 Emerson & 93 Locust Grove Would like to place a 14x40 Pre Made shed on a 33 foot wide lake lot.

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 Rick L	1000 /SBA COMOHNICAT	10% Date: 2/24/2	5
Address 134 FLANDER	RO Westburg, MA 01591	Phone: 508-61	4-0389
Property Owner (if not same)	1		
Address		Phone:	
1.14 1.05	APPLICATION IS BEING	MADE FOR:	
AXI/Building Permit _	APPLICATION IS BEING Variance Special Use **	Septic Syste	m Permit**
Site Plan **	Subdivision**	Other	(** Add'l Forms)
On Land Located at	(Same) or <u>Z</u>	544 HAVENS CON	ENERS RD PENN TAN. NT
Zoning District $AR-1$ Ta	x Map# <u>27.61-1-5.11</u>		
Present Use of Property	Tone		
Description of Proposed Improv			
equipment on ex	isting cell tower "	- Change To	SUP
Size of Improvement	Sq. Ft. Estimated Co	ost: <u>\$ 35,000</u>	
Type of Construction: Wood	, Metal, Masonry	, Other <u>X Call</u>	Tover
Height: In Stories	, In Feet		
Yard Setback: Front	, Rear		
Side (Widest)	, Side (Narrov	vest)	
Signature: Dun	, Date: _2/	24/05	
ApprovedNot	Approved Varia	ınce Requested	
Variance Granted: Yes	No Date:		
Permit # 19500-25	7	Fee \$ 150 -	
Code Enforcement Officer	I bun a flexell	Date: 2-28-2	5
Contractor Name:	Phor	1 e :	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Address:		Mail address:	
What a state of the state of th		Samuel Marie (Samuel Marie)	
Insurance: Workman		Exemption	
Contractor/Owner garees	to comply with all New York Ctate a	and I neal Codes and I am	d

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

PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION Application No. 1950P-25 Date 2-28-25 Fee 150. Name: Rick Woods. email Address: Applicant is applying for the following: () Zoning Interpretation () Area Variance () Subdivision () Use Variance (Special Use Permit () Site Plan Review Other Location of Property 2344 Hovens Cr Ad Zoning District AR-Describe Action requested: Area Variance Information: Variance Request Actual Required 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 Date Signature

ELIGIBLE FACILITIES REQUEST (EFR) APPLICATION FORM

Date of Submittal: 2/24/2025

Submitted by:

Name: Rick Woods

Title: Senior Manager, Site Development Services

Contact Information: (508) 614-0389

rwoods@sbasite.com

Name of Jurisdiction: Town of Benton

Address of Jurisdiction: 1000 Route 14A Penn Yan, NY 14527

Contact Name for Jurisdiction: Tom Fulkrod

Name of Local Government Permit Application: Town of Benton Zoning and Code Enforcement

Local Government File #: TBD

Street Address of Site: 2544 Havens Corners Road Penn Yan, NY 14527

Tax Parcel # of Site: 27.01-1-5.11

Latitude/Longitude of Site: LAT: 42.7191 LONG: -77.0769

List Each Piece of Transmission Equipment that will be Collocated or Added:

- (4) Ericsson 840590966 antennas
- (3) 6x24 hybrid cables
- (4) Ericsson 4460 B25+B66 RRUs (ground based)
- (4) Ericsson 4480 B71+B85 RRUs (ground based)

List Cabinets that will be Collocated or Added at the Site:

- (1) Ericsson 6160 Equipment Cabinet
- (1) Ericsson B160 Battery Cabinet
- (1) Slackbox Hoffman
- (1) Generac Diesel Generator

SITE PLAN, please draw site plan showing all roads, setbacks from right of ways and lot lines, driveways, existing and proposed structures and features (houses, garages, barns Sheds, septics, wells, streams, lakes) and north arrow.

SETBACKS TAKEN FROM CENTER OF ROAD: TOWN (25'), COUNTY (33' OR MORE) AND STATE (33' OR MORE) ZONING DISTRICTS HAVE DIFFERENT FRONT, SIDE AND REAR SETBACKS. CONSULT WITH CODE ENFORCEMENT BEFORE START OF ANY WORK OR PLAN.

The undersigned agrees that to the best of their knowledge and belief the statements contained in this application, together with any plans and specifications submitted herein, are a true and complete statement of all proposed work or use to be done on the described premises. All provisions of the NYS Fire Prevention and Building Code, the Town of Benton Zoning Law, and all other laws, rules and regulations pertaining to the proposed work or use shall be complied with, whether specified or not, and that such work or use is authorized by the owner. The undersigned understands that the granting of any permit shall not be construed as adoption by the Town of Benton of any plans, specifications or construction methods of permittee and the granting of any permit shall create no liability on the part of the Town. The undersigned hereby grants permission for the Code Enforcement Officer to enter the property and structure, as he deems necessary to inspect the same for compliance with applicable Codes and Laws.

OWNER SIGNATURE	DATE Z/Z	4/25
CODE ENFORCEMENT OFFICER	DATE	



ELIGIBLE FACILITIES REQUEST CERTIFICATION FOR NON-SUBSTANTIAL CHANGES TO AN EXISTING BASE STATION

Site Address: 2544 Havens Corners Road Penn Yan, NY 14527

Existing Facilities
Identify the FCC licensed or authorized wireless equipment that is already located on the existing Base Station at the time this Eligible Facilities Request is filed. (For example, an existing T-Mobile cell site located on rooftop or Verizon antennas side mounted on building exterior, etc.)
Existing monopole cell site.
Height of Base Station
Height above ground level of the tallest point on the existing base station: 249' (feet)
Height above ground level of the tallest point of the existing base station after the installation of the <i>proposed</i> equipment: 249' (feet)
 Does the height above ground level of the proposed equipment exceed the height of the tallest point on the existing base station by more than 10 percent (10%) or ten (10) feet, whichever is greater? ☐ Yes ☒ No
Width of Base Station
2) Will any of the proposed equipment protrude from the edge of the support structure by more than six (6) feet ☐ Yes ☒ No

Equipment Cabinets

☐ Yes ☒ No

Excavation or Equipment Placement

4)	Will the proposed modification in Transmission Equipment involve installation of	of more than the standard
	number of new equipment cabinets for the technology involved, but not to exc	
	☐ Yes ☒ No	

3) Will the proposed changes in Transmission Equipment involve excavation or placement of new equipment outside the existing Base Station site or outside any access or utility easements currently related to the site?

Concealed or Stealth-Designed Wireless Facilities

5)	a) Is the existing wireless facility concealed or stealth-designed
	□ Yes ⊠ No



	b) If the answer to 5a) is "Yes," will the proposed modification in Transmission Equipment defeat the existing concealed or stealth-design?
	☐ Yes ☐ No
Compli	ance with Preexisting Conditions of Approval for the Base Station
6)	a) Were there any conditions of approval stated in the original government approval of the Base Station? ☑ Yes □ No
	b) Will the proposed modification in Transmission Equipment comply with conditions of approval imposed on the Base Station prior to February 22, 2012? ☑ Yes □ No
	c) If the answer to 6b) is "No," is the non-compliance due solely to any of the conditions addressed in Questions 1-5 above? Yes No
This ce	ctification is dated this <u>24th</u> day of February, 20 <u>25</u>
Signatu	re
Rick V	Voods, Senior Manager, Site Development Services
Name 8	≩ Title
license	Station" means the equipment and non-tower supporting structure at a fixed location that allow Commission- d or authorized wireless communications between user equipment and a communications network. The term base includes any equipment associated with wireless communications services, including but not limited to, radio

term existing base station also includes a structure that currently houses or supports an antenna, transceiver or other associated equipment that constitutes part of a base station at the time the application is filed, even if the structure

transceivers, antennas, coaxial or fiber-optic cables, regular or back-up power supply, and comparable equipment. The

Was not built solely or primarily to provide such support. "Base Station" includes the relevant equipment in any technological configuration, including small cells and DAS. Remember "Base Station" has two separate meanings: (1) the supporting structure that houses FCC licensed or authorized wireless equipment; and (2) the wireless equipment itself. Keep this distinction in mind when calculating a substantial change in physical dimensions.



"Transmission Equipment" means any equipment that facilitates transmission for any FCC licensed or authorized wireless communication service, including but not limited to, radio transceivers, antennas and other relevant equipment associated with and necessary to their operation, including coaxial or fiber-optic cable, and regular and back-up power supply. This definition includes equipment used in any technological configuration associated with any Commission-authorized wireless transmission, licensed or unlicensed, terrestrial or satellite, including commercial mobile, private mobile, broadcast and public safety services, as well as fixed wireless services such as microwave backhaul or fixed broadband.

"Collocation" means the addition, removal or replacement of Transmission Equipment to an existing tower or base station. This means that the existing support structure, be it a tower or a building or some other structure, must presently support FCC licensed or authorized wireless facilities. The FCC further requires that the site (tower, building, or other structure) was previously approved by the appropriate agency of government to house wireless facilities. Illegal wireless installations cannot be the basis for an Eligible Facilities Request. However, if a communication Tower was erected at a time when it was exempt from zoning, the Tower can be modified through the Eligible Facilities Request process even if the Tower is no longer exempt from zoning.

PLANNING BOARL) = ZONING	BOARD O	FAITEAL.	SALARIA CHARACH
Application No 32 AV	-25 Dat	e 3-17-2	S Fee	150,-
Name: Alvin 85				
Address: 1727 Be				
Applicant is applying for the				
Area Variance () Use Variance () Special Use Permit	. ():	Zoning Interp Subdivision Site Plan Rev		
Other	تىنىسى <u>دىنى</u>	· ·		
Location of Property 17	77 Belk	ina St		
Tax Map No. 8,04-		,		2-1
Describe Action requested:				
Build House &	ehind e	VISTING D	Barn_	
	-		.	<u> </u>
23		<u> </u>		
Area Variance Information:				***
Constitution.	Required	Α¢	etual	Variance Request
Frontage: Front Setback:	Strange for an Personal Physiological Strange Control of Strange	•		
Side Setback:	-			
Rear Setback:				
Lot Size:	***************************************			
Attached to this application is				
Property Owner Same. Address		Tele	phone	
Signature		Dat	ie	

BUILDING AND ZONING APPLICATION

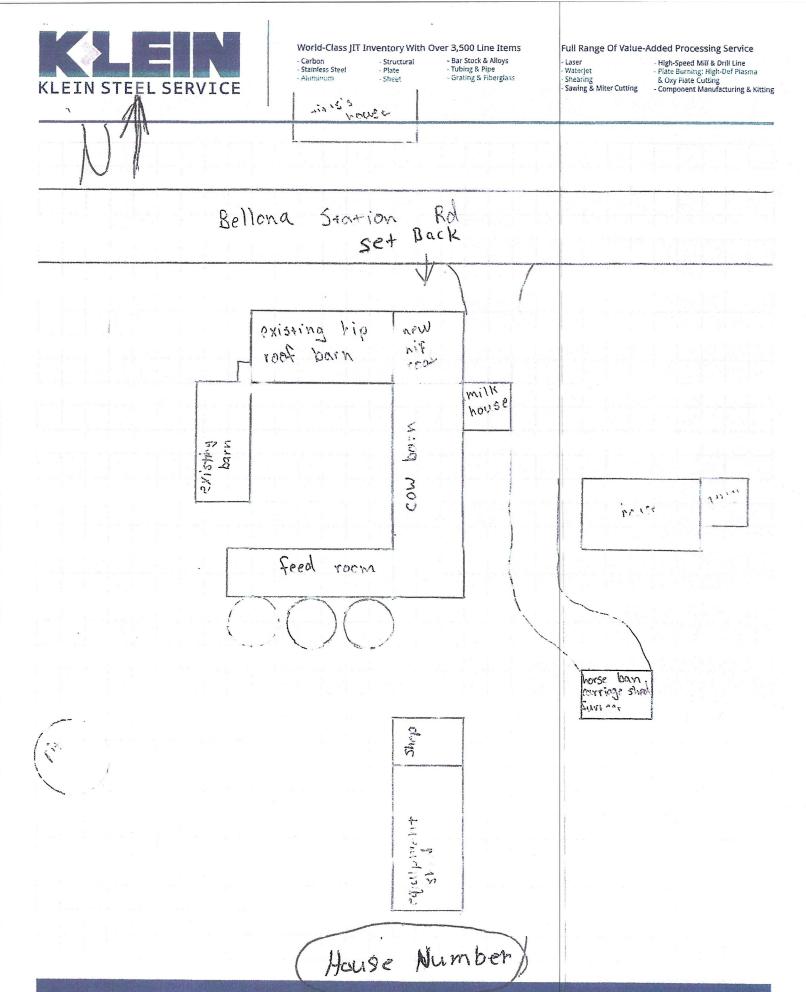
1000 SR 14A, PENN YAN, NY 14527 Cell (315) 719-3232 Office 315-536-9600 FAX 315-536-7715

E-MAIL: zoning@townofbenton.us

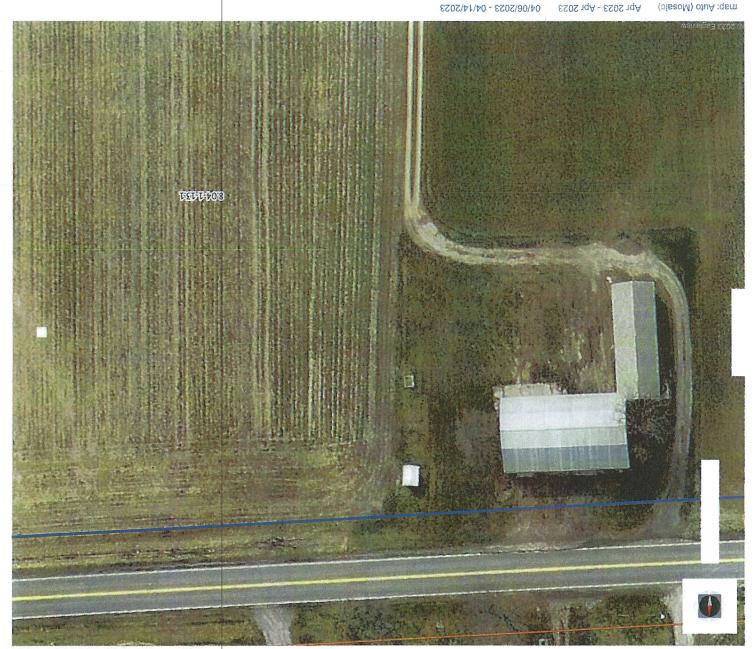
Name of Applicant Alvin B Shirk	Date: 3-17-25
Address	Phone:
Property Owner (if not same)	
Address Property Owner (if not same) Address	Phone:
APPLICATION IS BE	
	*Septic System Permit**
Site Plan **Subdivision**	Other (** Add'l Forms)
On Land Located at 1727 Bellone 54 (Same) of	or
Zoning District AD-/ Tax Map # 8.04-/-/3	
Present Use of Property Farm Land	
Description of Proposed Improvements and/or Use: Beil	Id a New House
Size of Improvement Sq. Ft. Estimate	ed Cost:
Type of Construction: Wood, Metal, Masonry	7, Other
Height: In Stories, In Feet _	
Yard Setback: Front, Rear	
Side (Widest), Side (Na	arrowest)
Signature:, Date: _	
ApprovedNot ApprovedV Variance Granted:YesNo Date:	Variance Requested
Permit # 32 AV-25 Code Enforcement Officer Jennington	Fee \$ 150 Date: 3-17-25
	Phone:
Address:	E-Mail address:
Insurance: Workman's Comp. Liabi Contractor/Owner agrees to comply with all New York S	

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.



CONNECTEXPLORER



PLANNING BOARD - ZONING BOARD OF APPEALS APPLICATION Application No 38 AV-25 Date 3-17-25 Fee Name: Smokin Petes Adventures phone 1-585-955-3/7/ Address: SR 14 email Applicant is applying for the following: Area Variance () Zoning Interpretation () Subdivision () Use Variance () Special Use Permit () Site Plan Review Other. Location of Property SR 14 Beteuren 91 Emerson- 93 Locust Tax Map No. 9.4/1-/-7 Zoning District LP Describe Action requested: Would Like to place a 14X40 Pre Made Shiel Area Variance Information: Variance Request Required Actual 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 Date

CONNECTEXPLORER"



https://explorer.eagleview.com/index.php#

BUILDING AND ZONING APPLICATION

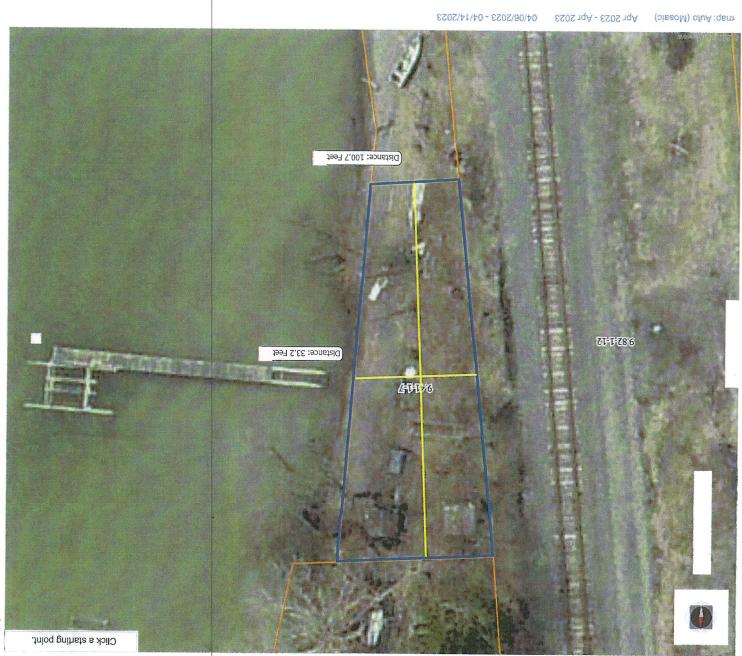
1000 SR 14A, PENN YAN, NY 14527 Cell (315) 719-3232 Office 315-536-9600 FAX 315-536-7715

E-MAIL: zoning@townsthenton us

Name of Applicant Smokin Petes Adventures Date: 3-17-23 Address_5R14 Phone: Property Owner (if not same)
Property Owner (if not same)
Address
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 <u>5R14</u> (Same) or
Zoning District LR Tax Map # 9.41-1-7
Present Use of Property Vacant Lot
Description of Proposed Improvements and/or Use: Wants to Build a 14x40 Building
Size of ImprovementSq. 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 # 38 /4 / -25 Code Enforcement Officer Toma Williams Date: 3-17-25
Contractor Name: Phone: E-Mail address:
Insurance: Workman's Comp. Liability Exemption Form Contractor/Owner agrees to comply with all New York State and Local Codes

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.



CONNECTEXPLORER"