

**Village of Brockport  
Planning Board  
Meeting Agenda  
Monday, June 10, 2013 7pm**

**CALL TO ORDER / PLEDGE / ROLL CALL**

**APPROVAL OF MINUTES** of April 8, 2013 and May 13, 2013

**CORRESPONDENCE:**

**OLD BUSINESS APPLICATIONS:**

1. Name: Jose Mendez  
Address: 24 N. Main Street  
Tax Map #: 069.45-1-1  
Zoning: B-Business  
Parcel Size: ~1.7 acres  
Prop. Class: 465  
Purpose: Review site plan for proposed 56' x 100' commercial office building

**NEW BUSINESS APPLICATIONS:**

1. Name: Lindsay O'Reilly  
Address: 51 Clinton Street  
Tax Map #: 068.52-4-3  
Zoning: B-Business  
Parcel Size: 69' wide x 198' deep  
Prop. Class: 483  
Purpose: Change of use – proposing to operate a dog training and grooming facility, and store. Property is currently vacant.
2. Name: James Zisovski  
Address: 60-62 College Street  
Tax Map #: 068.60-6-21  
Zoning: O-Residential  
Parcel Size: 66' wide x 148.5' deep  
Prop. Class: 220 2-family  
Purpose: 22' x 18' paved driveway expansion
3. Name: James Zisovski  
Address: 51 Monroe Avenue  
Tax Map #: 068.60-6-2  
Zoning: O-Residential  
Parcel Size: 40' wide x 135' deep  
Prop. Class: 418 – Rooming house  
Purpose: 20' x 18' paved parking area in the rear yard

4. Name: James Lawson  
Address: 54 Brockway Place  
Tax Map #: 068.76-1-15  
Zoning: O-Residential  
Parcel Size: 54.1' wide x 65.5' deep  
Prop. Class: 210 – Single-family dwelling  
Purpose: 10' x 10.5' driveway expansion

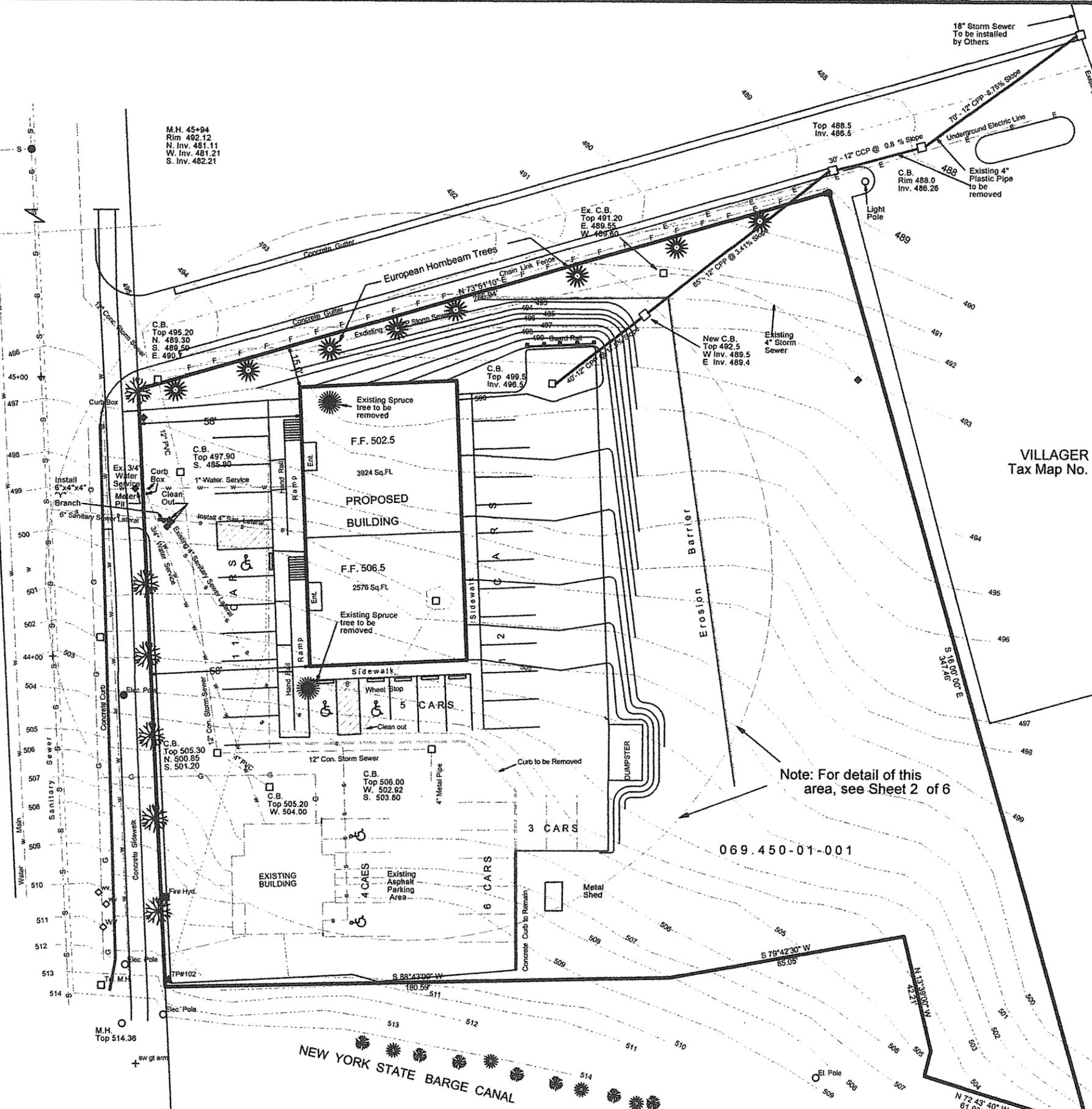
**OTHER BUSINESS:**

--Discuss July meeting date (clerk on vacation week of July 8)

**ADJOURNMENT:**

**UPCOMING REGULAR MEETINGS/DEADLINES (only upon application):**

LAKE ROAD



VILLAGER APARTMENTS  
Tax Map No. 069-450-01-002

Planning Board Chairman	Date
Village Engineer	Date
Building Inspector	Date
Highway Superintendent	Date
Town Attorney	Date
Village Clerk	Date
Fire Marshal	Date
Monroe County Water Authority	Date

Note: For detail of this area, see Sheet 2 of 6

069.450-01-001

SITE PLAN FOR  
**24 NORTH MAIN STREET**

VILLAGE OF BROCKPORT  
MONROE COUNTY NEW YORK STATE  
DATE: MARCH 28, 2013 SCALE: 1" = 40'

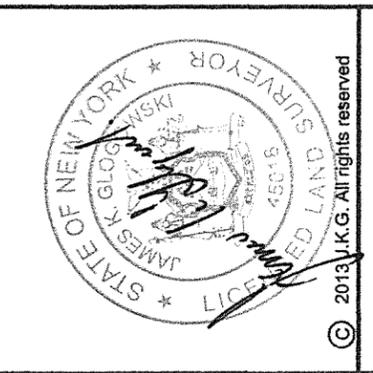
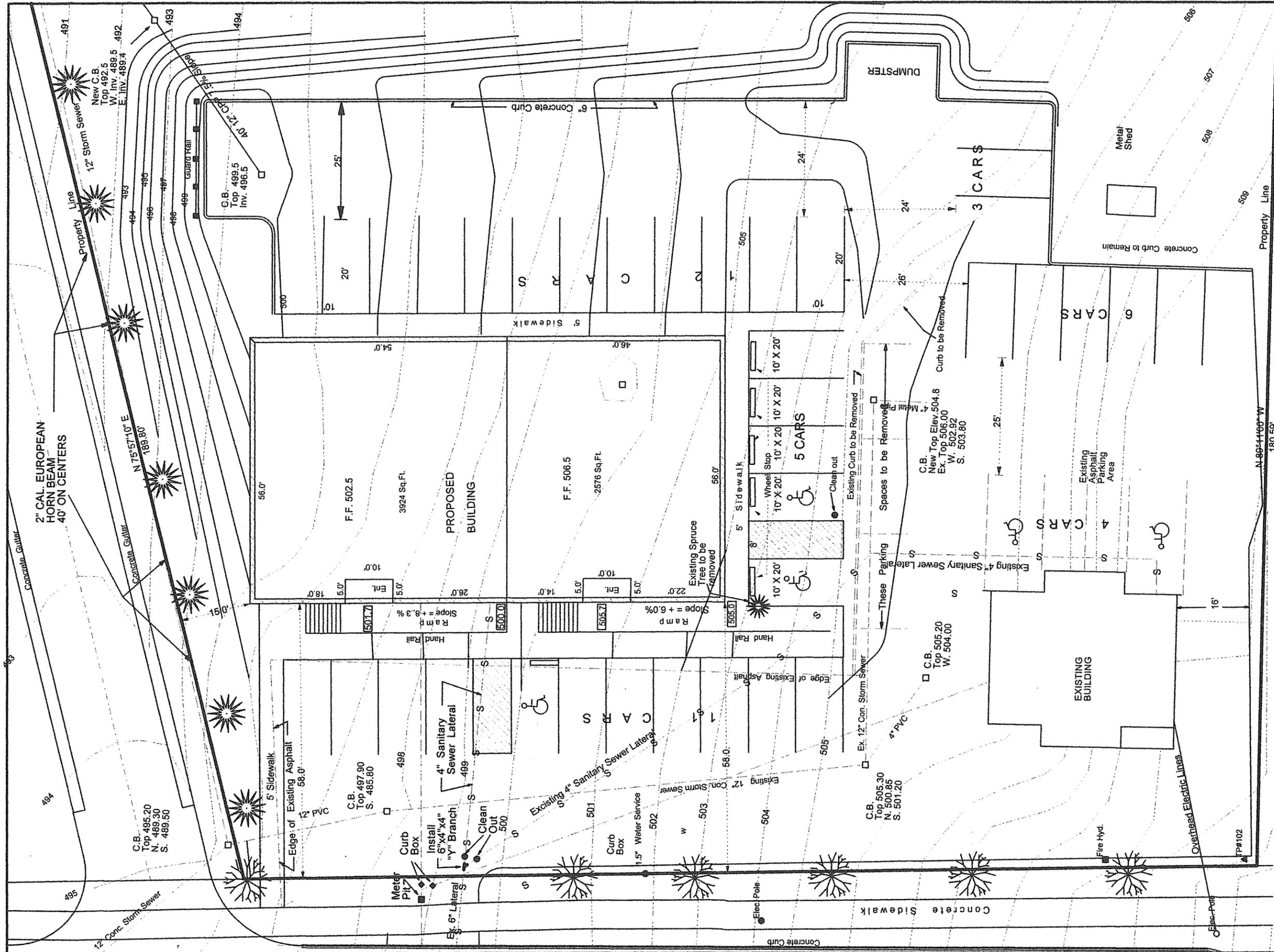
REVISIONS		
4/26/13	PARKING SPACES	J. G.
4/29/13	Sewer	J. G.
5/13/13	Water Service	J. G.

JAMES K. GLOGOWSKI, P.L.S  
9580 Ridge Road  
Brockport, New York 14420  
Tel: 585-426-1640  
Fax: 585-426-4244  
email: jkgski@frontiernet.net



Signed and sealed pursuant to Section 7208, Paragraph "n".

© 2013 J.K.G. All rights reserved



© 2013 J.K.G. All rights reserved

Signed and sealed pursuant to Section 7208, Paragraph "n".

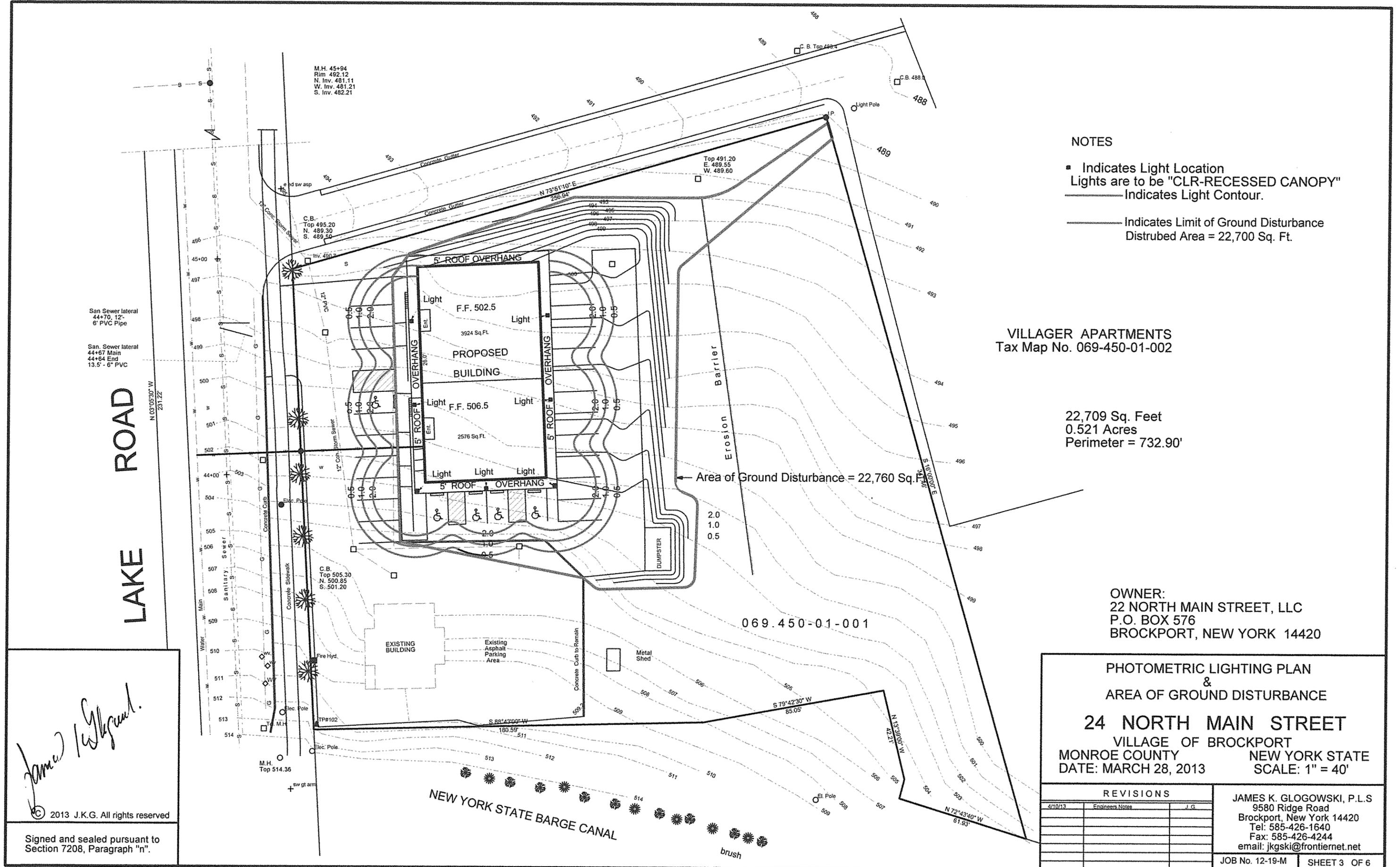
ENLARGED SITE PLAN FOR  
**24 NORTH MAIN STREET**  
 VILLAGE OF BROCKPORT  
 MONROE COUNTY  
 DATE MARCH 28, 2013  
 NEW YORK STATE  
 SCALE: 1"= 20'

REVISIONS	
DATE	DESCRIPTION
4/26/13	PARKING SPACES
5/10/13	Sewer Data

**JAMES K. GLOGOWSKI, P.L.S.**  
 9580 Ridge Road  
 Brockport, New York 14420  
 Tel: 585-426-1640  
 Fax: 585-426-4244  
 email: jkgski@frontiernet.net

**OWNER**  
 22 NORTH MAIN STREET  
 P.O. BOX 576  
 BROCKPORT, NEW YORK 14420

Job No. 2-19-M Sheet 2 of 6



**NOTES**

- Indicates Light Location  
Lights are to be "CLR-RECESSED CANOPY"
- Indicates Light Contour.
- Indicates Limit of Ground Disturbance  
Disturbed Area = 22,700 Sq. Ft.

**VILLAGER APARTMENTS**  
Tax Map No. 069-450-01-002

22,709 Sq. Feet  
0.521 Acres  
Perimeter = 732.90'

Area of Ground Disturbance = 22,760 Sq. Ft.

**OWNER:**  
22 NORTH MAIN STREET, LLC  
P.O. BOX 576  
BROCKPORT, NEW YORK 14420

**PHOTOMETRIC LIGHTING PLAN  
&  
AREA OF GROUND DISTURBANCE**  
**24 NORTH MAIN STREET**  
VILLAGE OF BROCKPORT  
MONROE COUNTY NEW YORK STATE  
DATE: MARCH 28, 2013 SCALE: 1" = 40'

REVISIONS		
4/10/13	Engineers Notes	J.G.

**JAMES K. GLOGOWSKI, P.L.S**  
9580 Ridge Road  
Brockport, New York 14420  
Tel: 585-426-1640  
Fax: 585-426-4244  
email: jkgski@frontiernet.net

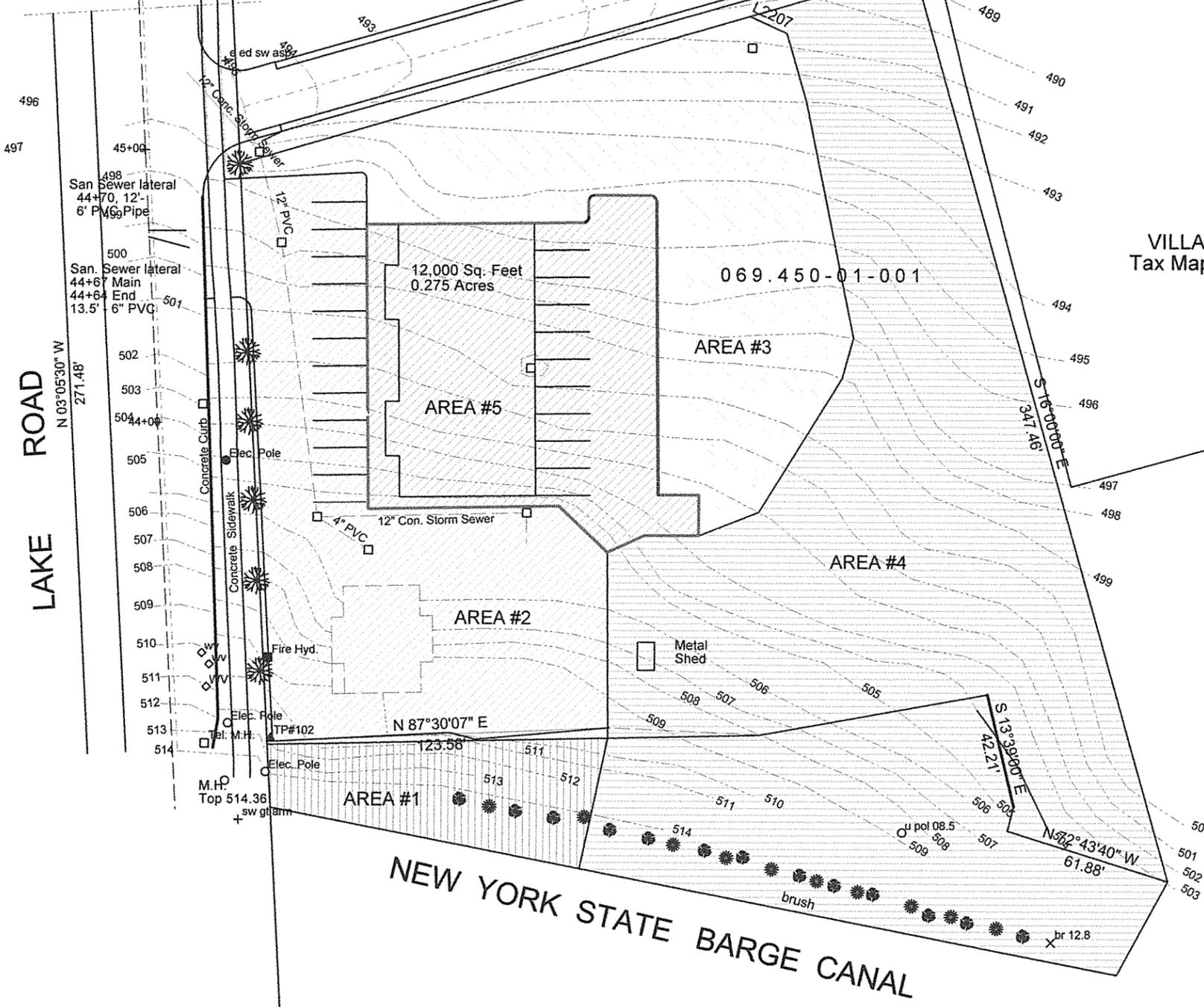
*James K. Glogowski*

© 2013 J.K.G. All rights reserved

Signed and sealed pursuant to  
Section 7208, Paragraph "n".

CLARK STREET

M.H. 45+94  
Rim 492.12  
N. Inv. 481.11  
W. Inv. 481.21  
S. Inv. 482.21



New Building & Parking  
12,000 Sq. Feet  
0.275 Acres

AREA #5

Green Area Sheet Runoff  
to C.B. in Adjoinder's Land  
40,936 Sq. Feet  
0.939 Acres

AREA #4

Green Area to Sewer  
16,093 Sq. Feet  
0.369 Acres

AREA #3

Existing Building & Parking  
16,052 Sq. Feet  
0.368 Acres

AREA #2

Sheet Runoff onto Site  
4,262 Sq. Feet  
0.098 Acres

AREA #1

VILLAGER APARTMENTS  
Tax Map No. 069-450-01-002

RUNOFF  
Grass Area of Building & Parking Lot  
10 Year Storm Runoff 0.38 cfs  
25 Year Storm Runoff 0.52 cfs

Proposed Building & Parking Lot Runoff  
10 Year Storm 1.11 cfs  
25 Year Storm 1.27 cfs

LAKE ROAD

N 03°05'30" W  
271.48'

San. Sewer lateral  
44+70, 12"  
6" PVC Pipe

San. Sewer lateral  
44+67 Main  
44+64 End  
13.5'  
6" PVC

Concrete Curb

Concrete Sidewalk

12" PVC

4" PVC

12" Con. Storm Sewer

Fire Hyd.

Elec. Pole

M.H. TP#102

Elec. Pole

M.H. Top 514.36

069.450-01-001

AREA #3

AREA #5

AREA #4

AREA #2

AREA #1

Metal Shed

NEW YORK STATE BARGE CANAL

DRAINAGE PATTERNS FOR  
24 NORTH MAIN STREET

VILLAGE OF BROCKPORT  
MONROE COUNTY  
DATE: MARCH 28, 2013

NEW YORK STATE  
SCALE: 1" = 50'

REVISIONS	

JAMES K. GLOGOWSKI, P.L.S.  
9580 Ridge Road  
Brockport, New York 14420  
Tel: 585-426-1640  
Fax: 585-426-4244  
email: jkgski@frontiernet.net

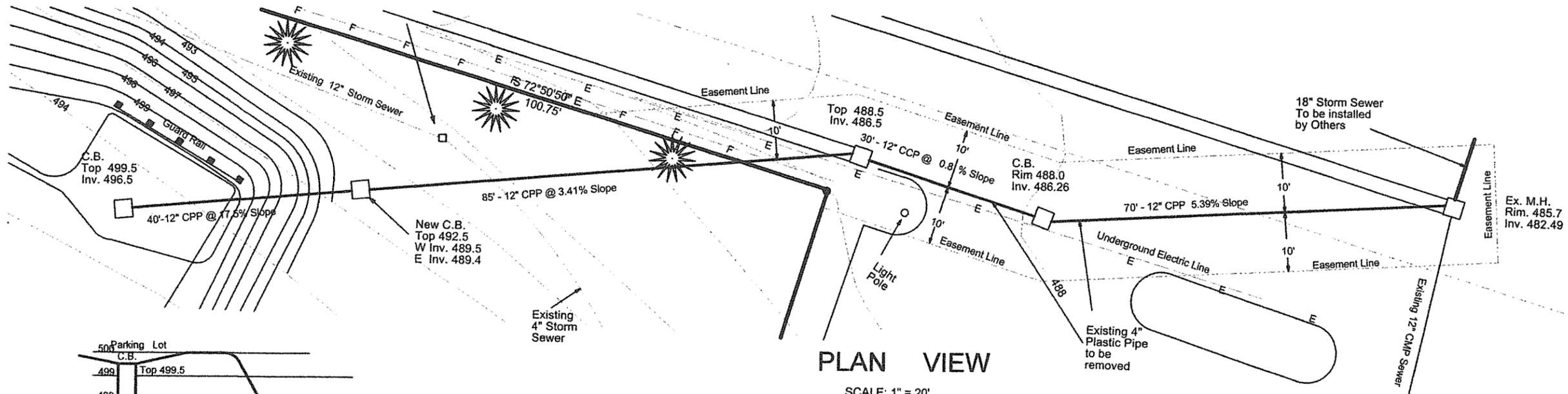
OWNER  
22 NORTH MAIN STREET, LLC  
P.O. BOX 576  
BROCKPORT, NEW YORK 14420

*[Signature]*

© J.K.G. All Rights Reserved

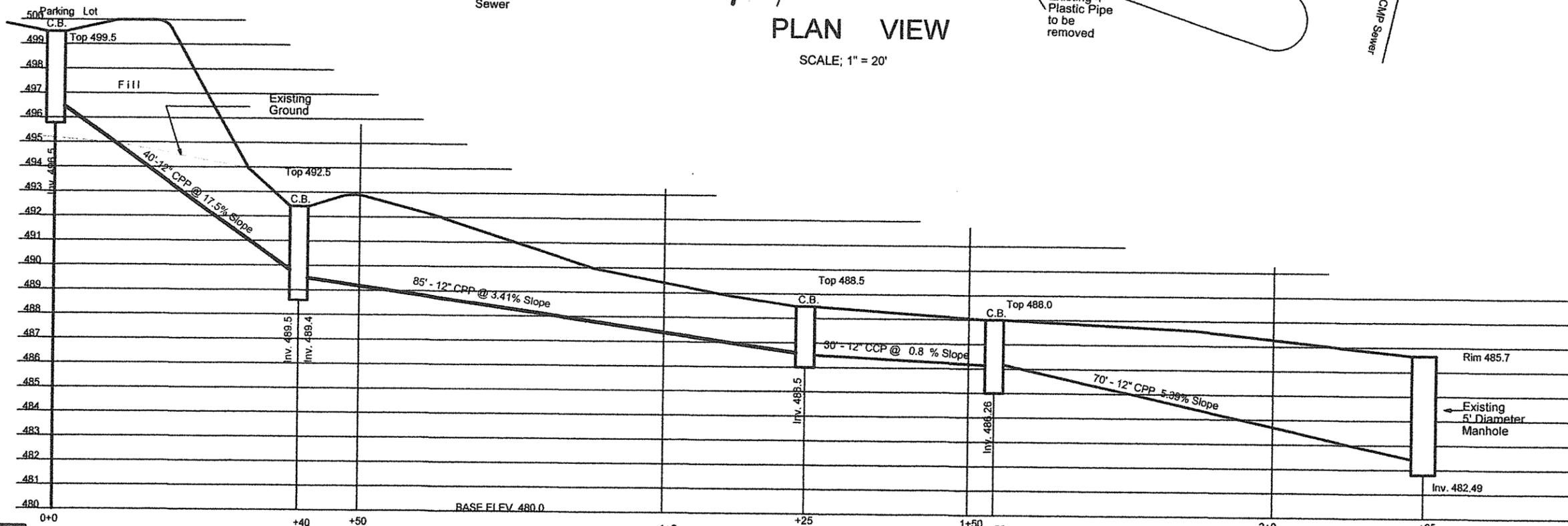
Signed and sealed pursuant to  
Section 7208, Paragraph "n".





**PLAN VIEW**

SCALE: 1" = 20'



SCALE: VERT. 1" = 5'  
HOR. 1" = 20'

**STORM WATER SEWER PROFILE**

**STORM WATER SEWER PROFILE**

**24 NORTH MAIN STREET**

VILLAGE OF BROCKPORT  
MONROE COUNTY  
DATE: MAY 24, 2013  
NEW YORK STATE  
SCALE: AS NOTED

REVISIONS

NO.	DATE	DESCRIPTION

JAMES K. GLOGOWSKI, P.L.S.  
9580 Ridge Road  
Brockport, New York 14420  
Tel: 585-426-1640  
Fax: 585-426-4244  
email: jkgski@frontiernet.net



2013 J.K.G. All rights reserved

Signed and sealed pursuant to  
Section 7208, Paragraph "n".

vac

VILLAGE OF BROCKPORT  
PAID  
MAY 28 2013  
CL# 1057  
5/27/13 \$45.00  
PAID

# VILLAGE OF BROCKPORT

49 State Street, Brockport, New York 14420  
Telephone: (585)-637-5300 Fax: (585)-637-1045  
Website: [www.brockportny.org](http://www.brockportny.org)

## PLANNING BOARD APPLICATION

**DEADLINE: MONDAY Noon, 2 weeks prior to meeting**

MON. JUNE 10  
**Meeting Date: 5/13/13 at 7:00pm**

Application Fee: \$45.00

Date Submitted: ~~4/29/13~~ 5/28/13

Plans Submitted (10 copies): \_\_\_\_\_

Environmental Assessment Form Submitted: Short EAF  
5/28/13

Change of Use: ✓ Addition: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Site Plan: \_\_\_\_\_  
Other: \_\_\_\_\_

Please note:

- Applicant must attend meeting(s).
- Failure to show, withdrawal of application, or denial will result in forfeiture of fee.
- Applicant may be billed for Village Engineer fees related to the review of application.
- The Planning Board will determine the need for a public hearing. If so, a separate fee will be billed.

**PROPERTY ADDRESS:** 51 Clinton Street

Tax Map Parcel #(s): 068.52-4-3 Parcel size: 69' width 198.0' depth 13662 sq

Property Zoning District: B-Business Use Property Class: 483

Present Use of Property: vacant Proposed Use of Property: Dog training and store

Description of Proposal: We will be running a dog training facility, grooming will also be offered.

Dogs will come in with owners, will always be supervised and never left on premise also some educational programs also offered.

Value of Construction: \$ \_\_\_\_\_ Building Permit required after Planning Board approval:  yes  no

### Certification of Statements:

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application.

I/We hereby certify that I/We are title owner(s) of the property property identified in the above application and that the applicant(s) named is/are authorized to make the application described herein.

Lindsay O'Reilly  
Applicant Signature

\_\_\_\_\_  
Owner Signature

Lindsay O'Reilly  
Applicant Name Printed/Typed

\_\_\_\_\_  
Owner Name Printed/Typed

133 Sherwood Dr Hilton NY  
14468  
Mailing Address

\_\_\_\_\_  
Mailing Address

D  
E

Phone # / Fax # / E-mail

ard

Attorney \_\_\_\_\_ Village Engineer \_\_\_\_\_ DPW Spt.

PROJECT I.D. NUMBER

617.20

SEQR

Appendix C

State Environmental Quality Review

**SHORT ENVIRONMENTAL ASSESSMENT FORM**

For UNLISTED ACTIONS Only

**PART I—PROJECT INFORMATION (To be completed by Applicant or Project sponsor)**

1. APPLICANT /SPONSOR <i>Lindsay O'Reilly</i>		2. PROJECT NAME <i>DOG HAVEN</i>	
3. PROJECT LOCATION: Municipality <i>BROCKPORT</i> County <i>MONROE</i>			
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) <i>51 CLINTON STREET, BROCKPORT, NY 14420</i>			
5. IS PROPOSED ACTION: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration <i>No modifications/expansions</i>			
6. DESCRIBE PROJECT BRIEFLY: <i>WE WILL BE RUNNING A DOG TRAINING FACILITY, GROOMING WILL ALSO BE OFFERED. DOGS WILL COME IN WITH THEIR OWNERS, WILL ALWAYS BE SUPERVISED AND NEVER LEFT ON THE PREMISES ALONE. EDUCATION PROGRAMS WILL ALSO BE ALLOWED ON THE PREMISES.</i> <span style="float: right;"><i>ARM</i></span>			
7. AMOUNT OF LAND AFFECTED: Initially <i>0.31</i> acres    Ultimately <i>0.31</i> acres			
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    If No, describe briefly			
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open space <input type="checkbox"/> Other Describe:			
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If yes, list agency(s) and permit/approvals			
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If yes, list agency name and permit/approval			
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: *LINDSAY O'REILLY*

Date: *5/28/2013*

Signature: \_\_\_\_\_

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

# Floor plan for 51 Clinton St

CLINTON STREET

PARKING LOT

front desk

DRIVEWAY

front desk

gate

RESTROOM

x

x = grooming tub

garage door

CHAIN LINK FENCE (EXISTING)

PARKING LOT



# **BUSINESS PLAN**

## **Dog Haven**

**Lindsay O'Reilly, Owner**

Created on May 28, 2013

## **1. EXECUTIVE SUMMARY**

### **1.1 Product**

We will provide dog training services including obedience classes, private/individualized training sessions and behavior management. We will offer a selection of activities for dogs and dog owners to participate in as a team such as obedience trials, agility, CGC certification, therapy dog certification. As we grow we would like to offer a wide variety of activities to include Treibball, earthdog trials and many more.

We would serve as a source of good information about positive reinforcement training and animal health, nutrition, and welfare in order to promote a community of responsible dog owners. We work with responsible breeders and reputable rescue groups to match dogs in need of homes to homes seeking pets.

We will also be providing educational experiences for youth interested in dogs, animal behavior, or training.

In addition we will offer a selection of quality products to support our clients needs. We will focus on behavior management tools, busy toys, and quality treats and foods.

### **1.2 Customers**

Our target customers are dog owners, dog lovers, people who are looking to add a dog to their family and youth. We have services that appeal to long-time dog owners as well as families who have just added a dog or will be adding a dog to their families. We target owners who need a well behaved house dog or who are looking to expand their relationship with their pet by participating in want to do a fun cooperative activity. According to the Humane Society of the United States 39% of US households have at least one dog. We target not just these dog owners but also a portion of the 23.5 million Americans looking to adopt a dog each year. In addition we target youth who may not have a dog at home but are interested in learning about and interacting with dogs.

### **1.3 What Drives Us**

Our society is rapidly evolving and as it does the role of pets in our society changes too. New science in dog behavior is revealing that dogs learn better using force-free methods and positive reinforcement. I hope to provide a variety of services and information to promote a community of responsible dog owners in our area. As we grow I would like to continue to offer an ever increasing variety of services that evolves to meet the increasing needs of pet owners; including holistic care, massage therapy, nutrition services, and of course a variety of obedience, sports, and games.

---

## **2. COMPANY DESCRIPTION**

### **2.1 Mission Statement**

We will provide high quality information, training, services and guidance for all dog owners in order to build a cohesive community of responsible dog owners.

### **2.2 Principal Members**

Lindsay O'Reilly- owner, trainer, youth programs development

Stacey Szczpaniak-groomer, small business experience

### **2.3 Legal Structure**

Dog Haven is a sole proprietorship.

## **3. MARKET RESEARCH**

### **3.1 Industry**

Even in hard economic times the pet industry has continued to grow exponentially. In 2013 pet owners spent over 20 billion dollars on pet food alone. An additional 12.65 billion was spent on other supplies. These numbers are just the corner of an ever growing industry. There are an ever increasing number of people seeking new services for their family pets all the time. Some of these include massage and holistic care, daycare services, and a vastly increasing number of competitive and just for fun sports and activities for pets and owners to enjoy together.

### **3.2 Customers**

We appeal to a varied audience. People from all walks of life are dog owners, and dog owners can be virtually any age. We hope to offer a range of training services and products that make training available to all ages, activity levels, and income ranges.

### **3.3 Competitors**

Our competitors are other small local trainers, including Animal Behavior Specialists of Rochester and Ebb and Tide Kennels and Stables, as well as the larger chain suppliers such as Tractor Supply and Country Max.

### **3.4 Competitive Advantage**

We are motivated to make a difference in our community.

We are focused on individual service and design a training program for each individual dog even in our group classes. We have a selection of tools and products available right through our store or online that can be sent right to our customers door.

We offer flexible hours for a busy clientele as well as a variety of modular training schedules that allow flexibility and attendance for those who work unusual or rotating hours.

### **3.5 Regulations**

We will have to abide by all tax policies. Tax must be collected on all Dog Training classes and services. We will file a DTF-17 to collect taxes on these services as well as products. We will also have a resale certificate

## **4. PRODUCT/SERVICE LINE**

### **4.1 Product or Service**

Dog Training Classes to include basic obedience, advanced obedience, small dog basic obedience, anxious dog classes, puppy socialization, and group socialization.

Products that will be offered will be focused on training aids, crates, and local healthy treats, chews, and products.

### **4.2 Pricing Structure**

Basic obedience \$75/dog, 6 dogs/class

Advanced obedience \$85/dog, 6 dogs/class

Small dog basic obedience \$85/dog, 4 dogs/class

Anxious dog class \$50/dog, 3 dogs/class

Individual sessions are \$25/hr

### **4.3 Product/Service Life Cycle**

Our training program is continuing to develop, however our basic and advanced classes as well as our fearful dog class have been run for several years, as well as an agility class. We will continue to develop classes based on the experience as well as the support of the Association of Pet Dog Trainers of which I am a member.

Our youth programs have also been tested through a program in collaboration with Hog Heaven Large animal rescue.

## **5. MARKETING & SALES**

### **5.1 Growth Strategy**

We will grow using social media, google adwords, advertising services such as "get my perks" program. We also will place local listings in newspapers, and Petpalooza magazine. We hope to build both an established clientele who continue to use our services and a revolving clientele who only participate in an occasional class.

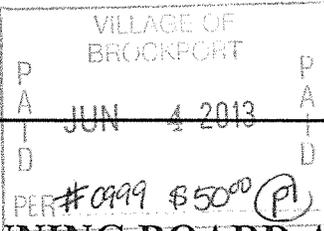
### **5.2 Communication**

We will maintain an active facebook page, an email address (with a response time under 12 hours), as well as our website and phone number.

### **5.3 Prospects**

We will introduce an email marketing campaign as well as recommendations to customers who are receiving training. We will have ads placed in local newspapers and attend local dog related events.

AC



# VILLAGE OF BROCKPORT

49 State Street, Brockport, New York 14420  
Telephone: (585)-637-5300 Fax: (585)-637-1045  
Website: [www.brockportny.org](http://www.brockportny.org)

## PLANNING BOARD APPLICATION

**DEADLINE: MONDAY Noon, 2 weeks prior to meeting**

Meeting Date: 6/10/13 at 7:00pm

Application Fee: \$ 50.00

Date Submitted: 5-28-13

Plans Submitted (10 copies): 1

Environmental Assessment Form Submitted: 1

Change of Use: \_\_\_\_\_ Addition: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Site Plan: \_\_\_\_\_

Other: Parking area

**Please note:**

- Applicant must attend meeting(s).
- Failure to show, withdrawal of application, or denial will result in forfeiture of fee.
- Applicant may be billed for Village Engineer fees related to the review of application.
- The Planning Board will determine the need for a public hearing. If so, a separate fee will be billed.

PROPERTY ADDRESS: 60 - 62 College Street

Tax Map Parcel #(s): 062, 60-6-21 Parcel size: 66 width 148.5 depth

Property Zoning District: O-Res Property Class: 220 2 Family

Present Use of Property: 2 Family Proposed Use of Property: Same

Flood Zone:  Yes  No Map # \_\_\_\_\_ Map Date \_\_\_\_\_

Description of Proposal: 22' by 18' off-street paved parking area expansion

Value of Construction: \$ \_\_\_\_\_ Building Permit required after Planning Board approval: \_\_\_ yes  no

### Certification of Statements:

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application.

I/We hereby certify that I/We are title owner(s) of the property property identified in the above application and that the applicant(s) named is/are authorized to make the application described herein.

Applicant Signature \_\_\_\_\_

Applicant Name Printed/Typed James Zisowski

Mailing Address 53 main st Bkpt

Phone # / / Fax # / / E-mail \_\_\_\_\_

Owner Signature \_\_\_\_\_

Owner Name Printed/Typed \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone # / / Fax # / / E-mail \_\_\_\_\_

Copies to: \_\_\_ Planning Board \_\_\_ B/Z Officer \_\_\_ Village Attorney \_\_\_ Village Engineer \_\_\_ DPW Spt.

## Appendix C

## State Environmental Quality Review

**SHORT ENVIRONMENTAL ASSESSMENT FORM**

For UNLISTED ACTIONS Only

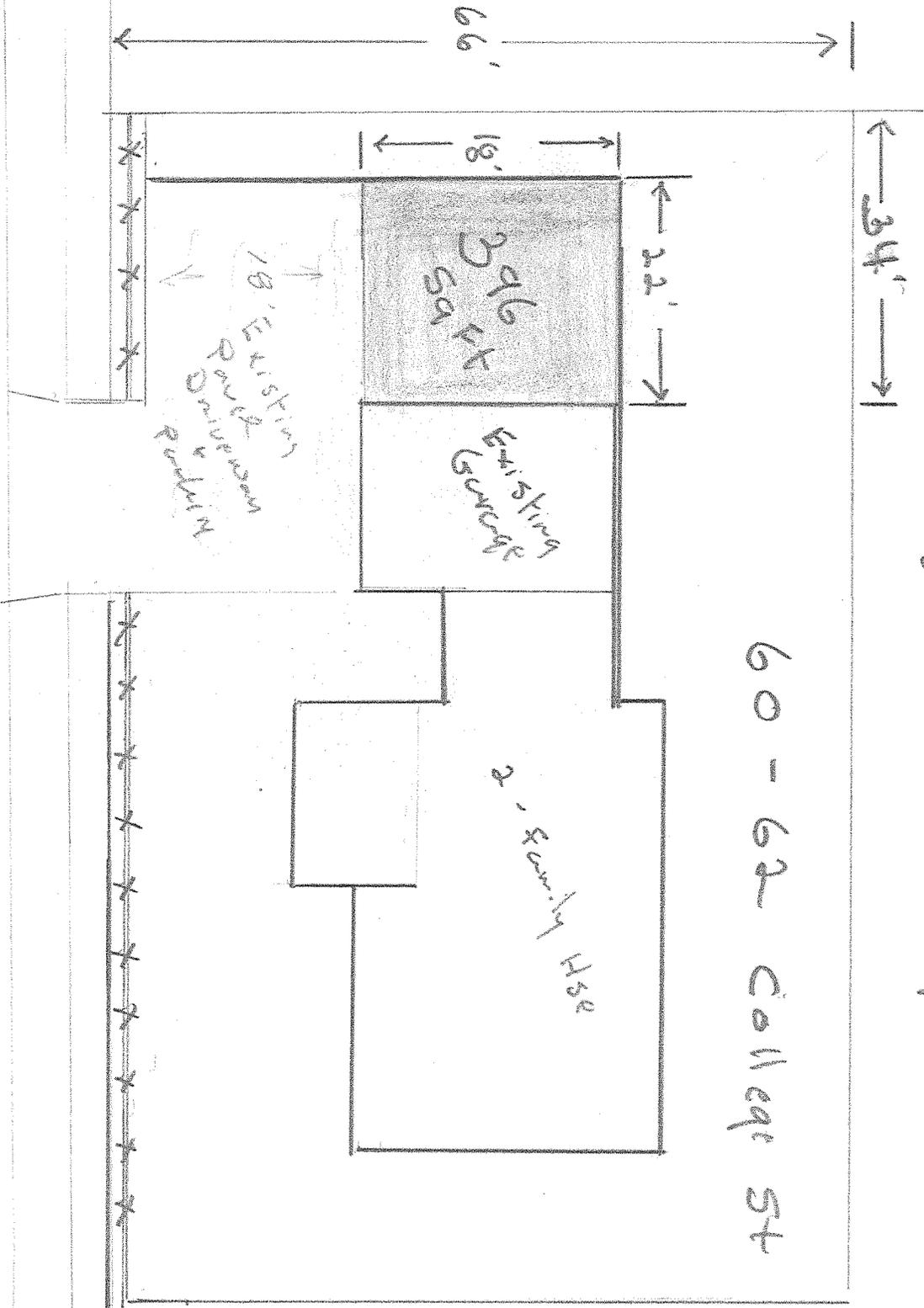
**PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)**

1. APPLICANT/SPONSOR <u>James Zisovski</u>	2. PROJECT NAME <u>Parking</u>
3. PROJECT LOCATION: <u>60-62 Monroe Ave</u> Municipality <u>Village of Bkpt</u> County <u>Monroe</u>	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) <u>Corner of College St &amp; Utica Streets</u>	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: <u>Add a 22' by 18' sq ft paved parking area to existing paved off-street parking area</u>	
7. AMOUNT OF LAND AFFECTED: Initially <u>396</u> acres Ultimately <u>396</u> acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input checked="" type="checkbox"/> Other Describe: <u>College of Brockport</u>	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	
Applicant/sponsor name: _____	Date: <u>5/29/12</u>
Signature: _____	

**If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment**

New yard 1632 sq ft  
 Proposed 396 sq ft  
 25% = 406 sq ft

60 - 62 College St



Utica St

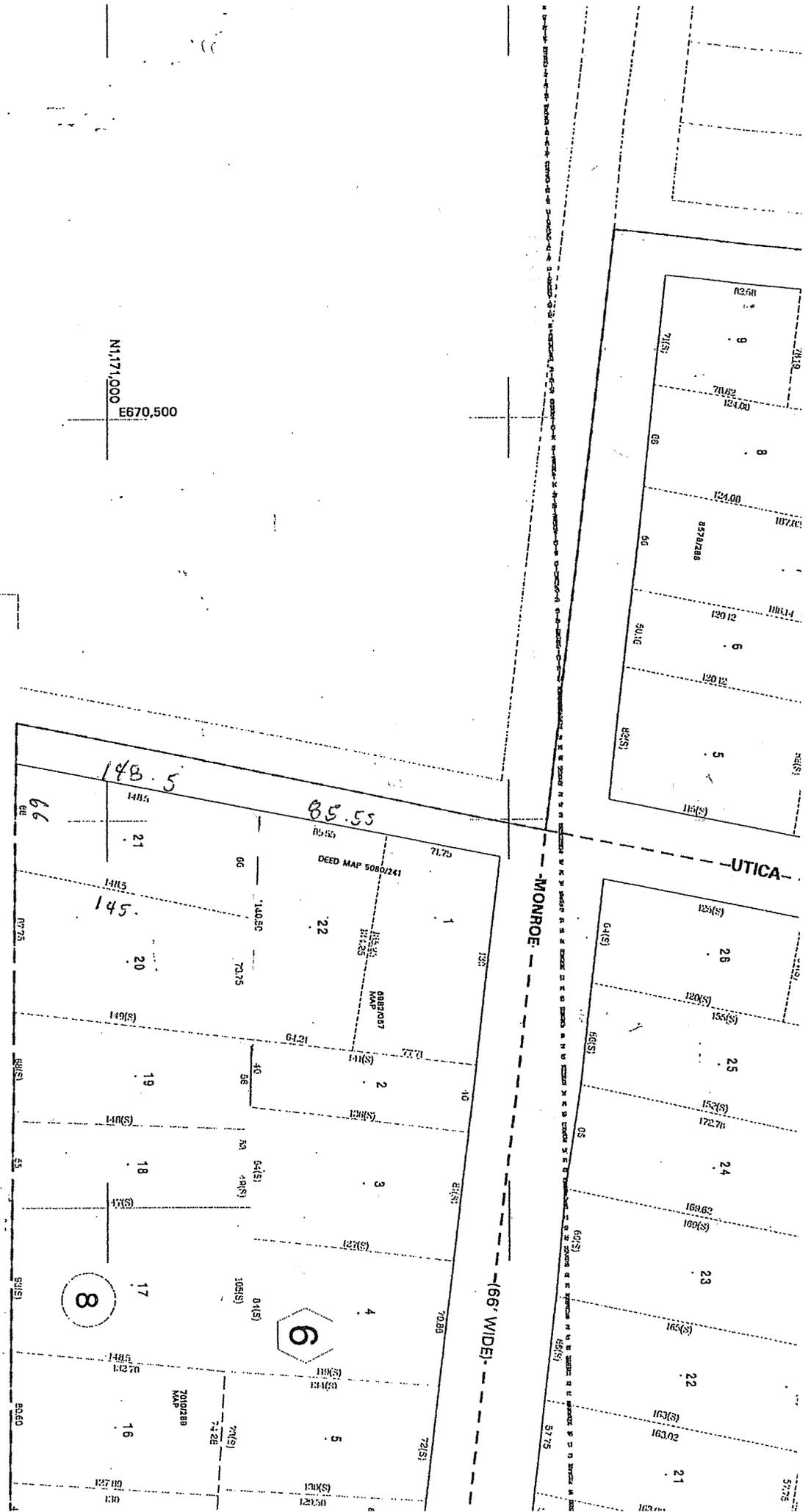
REVISIONS			
BY	DATE	MADE BY	DATE

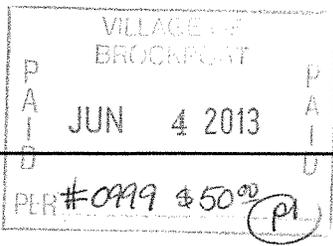
  

SPECIAL DISTRICTS	
SCH.	BROCKPORT

<p>WARNING: Use of measurement and penalty for description herein if established by law. Contact the Monroe County Surveyor for exact instrument location.</p> <p>Copyright 1989. All rights reserved by the County of Monroe. Maintenance, alteration, sale or distribution of this map or any portion thereof is prohibited without written permission of the Monroe County Director of Finance.</p> <p>THIS MAP FOR TAX PURPOSES ONLY</p>	<p>Property Line</p> <p>Right-of-Way Line</p> <p>Original Sublot Line</p> <p>Railroad</p> <p>Easement</p> <p>Water Course</p>	<p>Town/County Boundary</p> <p>Village Boundary</p> <p>Block Limit Line</p> <p>Great Lot or Tract Line</p> <p>Monument</p> <p>Quasi-Lot or Tract No.</p>
--	---	--





# VILLAGE OF BROCKPORT

49 State Street, Brockport, New York 14420  
Telephone: (585)-637-5300 Fax: (585)-637-1045  
Website: [www.brockportny.org](http://www.brockportny.org)

## PLANNING BOARD APPLICATION

**DEADLINE: MONDAY Noon, 2 weeks prior to meeting**

Change of Use: \_\_\_\_\_ Addition: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Site Plan: \_\_\_\_\_  
Other: Parking area

Meeting Date: 6/10/13 at 7:00pm  
Application Fee: \$ \$0.00  
Date Submitted: 5-28-13  
Plans Submitted (10 copies): /  
Environmental Assessment Form Submitted: /

Please note:

- Applicant must attend meeting(s).
- Failure to show, withdrawal of application, or denial will result in forfeiture of fee.
- Applicant may be billed for Village Engineer fees related to the review of application.
- The Planning Board will determine the need for a public hearing. If so, a separate fee will be billed.

PROPERTY ADDRESS: 51 Monroe Ave

Tax Map Parcel #(s): 068.60-6-2 Parcel size: 40 width 135 depth

Property Zoning District: 0 Res Property Class: 418

Present Use of Property: Rooming Hse Proposed Use of Property: same

Flood Zone:  Yes  No Map # \_\_\_\_\_ Map Date \_\_\_\_\_

Description of Proposal: 20 x 18 paved parking area rear yard

Value of Construction: \$ \_\_\_\_\_ Building Permit required after Planning Board approval: \_\_\_ yes  no

### Certification of Statements:

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application.

I/We hereby certify that I/We are title owner(s) of the property property identified in the above application and that the applicant(s) named is/are authorized to make the application described herein.

[Signature]  
Applicant Signature

\_\_\_\_\_  
Owner Signature

James Zisovski  
Applicant Name Printed/Typed

\_\_\_\_\_  
Owner Name Printed/Typed

53 main st Bkpt  
Mailing Address

\_\_\_\_\_  
Mailing Address

Phone # / Fax # / E-mail

Phone # / Fax # / E-mail

.....

Copies to: \_\_\_ Planning Board \_\_\_ B/Z Officer \_\_\_ Village Attorney \_\_\_ Village Engineer \_\_\_ DPW Spt.

Appendix C

State Environmental Quality Review

SHORT ENVIRONMENTAL ASSESSMENT FORM

For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR <u>James Zisovski</u>	2. PROJECT NAME <u>Parking area</u>
3. PROJECT LOCATION: <u>51 Monroe Ave</u> Municipality <u>Village of Bkpt</u> County <u>Monroe</u>	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) <u>130' East of Urtich street, South side of Monroe Ave</u>	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: <u>20 by 18 = 360 sq ft paved parking area</u>	
7. AMOUNT OF LAND AFFECTED: Initially <u>360</u> acres sq ft Ultimately <u>360</u> acres sq ft	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe:	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: <u>5/29/13</u> Signature: _____	

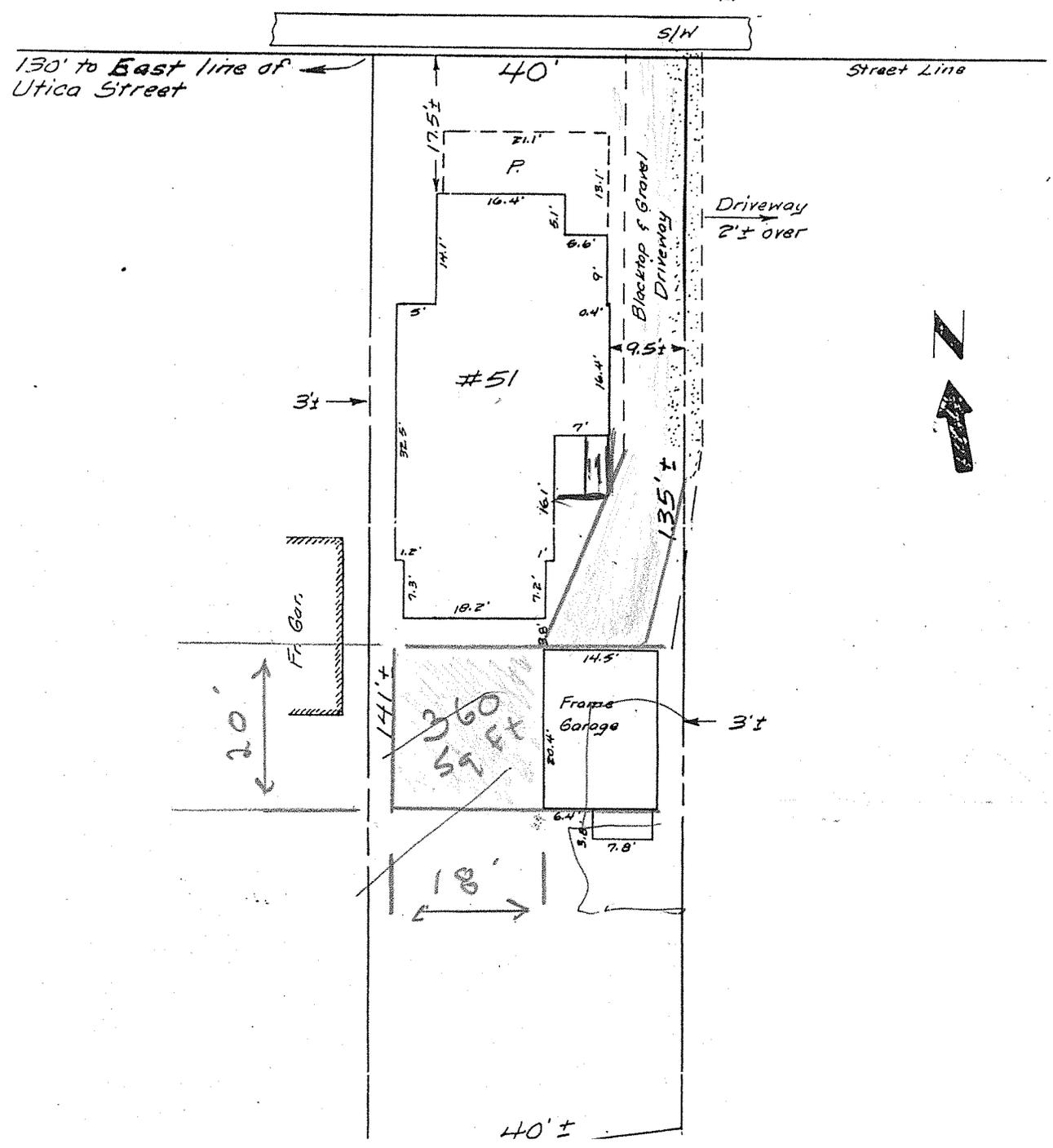
If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment



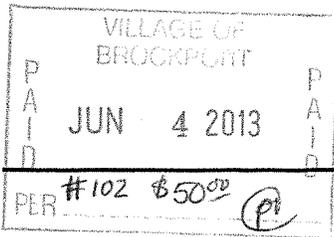
# STANDARD TAPE LOCATION MAP

For \_\_\_\_\_ Parcel at: <sup>City</sup> Village BROCKPORT Town \_\_\_\_\_ County MONROE  
Street 51 MONROE AVENUE Lot No. \_\_\_\_\_ Subdivision \_\_\_\_\_  
Reference Data: Liber \_\_\_\_\_ of Maps, Page \_\_\_\_\_; Liber 2952 of Deeds, Page 381; Monuments (not) used.  
Showing TWO story FRAME dwelling; garage (not) attached.  
Distance as shown from WEST property line actually measured. Main front wall is (~~front~~) on apparent uniform set-back line.

MONROE AVENUE (66')



AC



# VILLAGE OF BROCKPORT

49 State Street, Brockport, New York 14420  
Telephone: (585)-637-5300 Fax: (585)-637-1045  
Website: [www.brockportny.org](http://www.brockportny.org)

## PLANNING BOARD APPLICATION

**DEADLINE: MONDAY Noon, 2 weeks prior to meeting**

**Meeting Date:** 6-10-13 at 7:00pm

Application Fee: \$ 50.00

Date Submitted: 5-28-13

Plans Submitted (10 copies):

Environmental Assessment Form Submitted:

Change of Use: \_\_\_\_\_ Addition: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Site Plan: \_\_\_\_\_

Other: Driveway Expansion 10' by 10.5'

Please note:

- Applicant must attend meeting(s).
- Failure to show, withdrawal of application, or denial will result in forfeiture of fee.
- Applicant may be billed for Village Engineer fees related to the review of application.
- The Planning Board will determine the need for a public hearing. If so, a separate fee will be billed.

**PROPERTY ADDRESS:** 54 Brockway Place Brockport, NY 14420

Tax Map Parcel #(s): 068.76-1-15 Parcel size: 54.10' width 65.52' depth

Property Zoning District: O-Residential Property Class: Single Family Home

Present Use of Property: Student Housing Proposed Use of Property: Student Housing

Flood Zone:  Yes  No Map # \_\_\_\_\_ Map Date 4/15/94

Description of Proposal: Expand width of driveway by 10' wide + 10.5' deep to allow off street

parking for 3 cars. on street parking and on the lawn parking is not allowed by village ordinance. (See Survey attached)

Value of Construction: \$ 1,100 Building Permit required after Planning Board approval:  yes  no

### Certification of Statements:

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application.

I/We hereby certify that I/We are title owner(s) of the property property identified in the above application and that the applicant(s) named is/are authorized to make the application described herein.

James R. Lawson  
Applicant Signature

James R. Lawson  
Owner Signature

James R. Lawson  
Applicant Name Printed/Typed

James R. Lawson  
Owner Name Printed/Typed

69 Pine Court North West Seneca NY 14884 69 Pine Court North West Seneca NY 14884  
Mailing Address Mailing Address

/s/ J.R. Lawson 14  
E-mail

/J.R.  
Fax #

Board B/Z Office

age Engineer

PROJECT ID NUMBER

617.20  
APPENDIX C

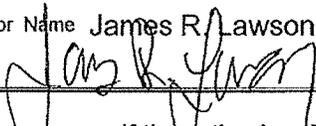
SEQR

STATE ENVIRONMENTAL QUALITY REVIEW

### SHORT ENVIRONMENTAL ASSESSMENT FORM

for UNLISTED ACTIONS Only

#### PART 1 - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT / SPONSOR James R. Lawson	2. PROJECT NAME
3. PROJECT LOCATION: Brockport Municipality	Monroe County
4. PRECISE LOCATION: Street Address and Road Intersections, Prominent landmarks etc -or provide map 54 Brockway Place	
5. IS PROPOSED ACTION : <input type="checkbox"/> New <input checked="" type="checkbox"/> Expansion <input type="checkbox"/> Modification / alteration	
6. DESCRIBE PROJECT BRIEFLY: Expand width of driveway 10' and depth 10.5' to allow off street parking for 1 additional car which will allow 1 car per bedroom	
7. AMOUNT OF LAND AFFECTED: Initially                  acres                  Ultimately                  acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER RESTRICTIONS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No      If no, describe briefly:	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? (Choose as many as apply.) <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park / Forest / Open Space <input type="checkbox"/> Other (describe)	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (Federal, State or Local) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      If yes, list agency name and permit / approval:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      If yes, list agency name and permit / approval:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT / APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	
Applicant / Sponsor Name James R. Lawson	Date: May 30, 2013
Signature 	

If the action is a Coastal Area, and you are a state agency,  
complete the Coastal Assessment Form before proceeding with this assessment

