

**Village of Brockport  
Planning Board  
Meeting Agenda  
Monday, September 17, 2012 7pm**

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

**APPROVAL OF MINUTES** of August 21, 2012

**CORRESPONDENCE**

**OLD BUSINESS:**

1. Application of:      Name:            Lorenzo Zaragoza  
                                 Address:        10 Water Street  
                                 Tax Map #:    069.45-2-26  
                                 Zoning:        B-Business  
                                 Parcel Size:   54' wide x 50' deep  
                                 Prop. Class:   330 – vacant commercial  
                                 Purpose:       Convert grass lot to parking lot
  
2. Application of:      Name:            William Riddell  
                                 Address:        173 Main Street  
                                 Tax Map #:    068.68-2-20  
                                 Zoning:        B-Business  
                                 Parcel Size:   66' wide x 165' deep  
                                 Prop. Class:   331 – vacant commercial with improvements  
                                 Purpose:       Review site plan to use current empty lot for parking for his  
                                                    retail store at 177 Main Street

**NEW BUSINESS:**

1. Application of:      Name:            Alton Plumb  
                                 Address:        100 Fair Street  
                                 Tax Map #:    069.17-1-15  
                                 Zoning:        I-Industrial  
                                 Parcel Size:   11.23 acres  
                                 Prop. Class:   710 – manufacturing  
                                 Purpose:       Review concept usage development plan for revitalization  
                                                    of former Kleen Brite facility

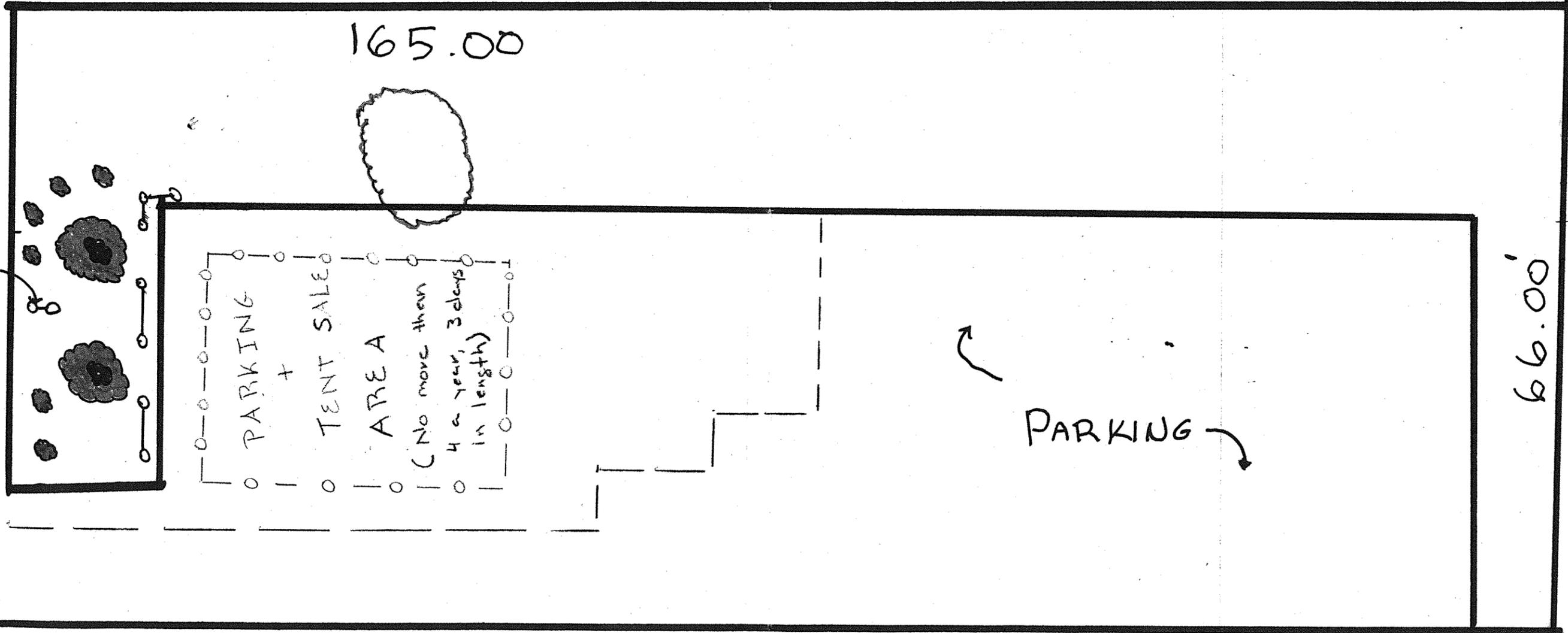
**ADJOURNMENT:**

**NEXT REGULAR MEETING:** October 15, 2012 7pm, upon application.  
Application materials are due by Noon Monday, October 1, 2012.

FILE COPY

CONC. SIDEWALK

3' by 3' sign (5 feet in High)



HOUSE  
No. 167

165.00

66.00'

PARKING

6' WOOD STOCKADE FENCE  
on 177 Main Street

FILE COPY

617.20

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 William Riddlell	2. PROJECT NAME 173 Main Street
3. PROJECT LOCATION: Municipality Village of Brockport County Monroe	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) 173 Main Street, Intersection of College & Main	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: Building Burned down, removed building	
7. AMOUNT OF LAND AFFECTED: Initially .25 acres Ultimately _____ 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) 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 type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: <u>W. Riddlell</u> Date: <u>8/20/2012</u> Signature: <u>William Riddlell</u>	

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

VILLAGE OF BROCKPORT  
PAID SEP 4 2012  
CL# 2009  
PER \$50.00 (pl)

# 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: TUESDAY Noon, 2 weeks prior to meeting**

Change of Use: \_\_\_\_\_ Addition: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Site Plan: \_\_\_\_\_  
Other: concept use devlp plan

Mon. at 7:00pm  
scan  
Submitted: 9-4-12 (pl)

**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:** 100 Fair Street

Tax Map Parcel #(s): 069.17-1-15 Parcel size: 11.23 Acres width \_\_\_\_\_ depth \_\_\_\_\_

Property Zoning District: I Industrial Property Class: 710 manufacture

Present Use of Property: Vacant Proposed Use of Property: MIXED BEST USE

Description of Proposal: REVITALIZATION OF 100 FAIR ST (FORMER KLEEN-BRITE FACILITY) - PROPOSED SITE PLAN ATTACHED AS FIGURE 1

Value of Construction: \$ 2 million 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.

Alton B. Plumb  
Applicant Signature member

Alton B. Plumb  
Owner Signature

AL PLUMB member 100 FAIR ST LLC  
Applicant Name Printed/Typed

AL PLUMB member 100 FAIR ST LLC  
Owner Name Printed/Typed

9/4/12 (pk)

617.20

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 AL PLUMB member 100 FAIR STREET LLC	2. PROJECT NAME FAIR STREET COMPLEX
3. PROJECT LOCATION: Municipality BROCKPORT County MONROE	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) 100 FAIR STREET AKA FORMER KLEEN-BRITE FACILITY	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input checked="" type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: REVITALIZATION OF 100 FAIR STREET (FORMER KLEEN-BRITE FACILITY) - PROPOSED CONCEPTUAL DEVELOPMENT PLAN SEEN IN FIGURE 1 TO INCLUDE RETAIL SALES, MATERIALS HANDLING, STORAGE AND PROCESSING AREAS, OFFICE SPACE	
7. AMOUNT OF LAND AFFECTED: Initially 11.23 acres Ultimately 11.23 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 checked="" type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: MIXED LAND USE ACTIVITIES	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals: NYS DMV DISMANTLER AND RETAIL SALES NYS DEC RURAL TRANSFER STATION	
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: <u>ALTON L. PLUMB, JR.</u> Date: <u>9-04-12</u> Signature: <u><i>Alton L. Plumb, Jr.</i></u>	

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

Reset

9/4/12 PL

**PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)**

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF.  
 Yes  No

B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency.  
 Yes  No

C. COULD ACTION RESULT IN ANY ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)

C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:

C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:

C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:

C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:

C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:

C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:

C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:

D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)?  
 Yes  No If Yes, explain briefly:

E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?  
 Yes  No If Yes, explain briefly:

**PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)**

**INSTRUCTIONS:** For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

- Check this box if you have identified one or more potentially large or significant adverse impacts which **MAY** occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.
- Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action **WILL NOT** result in any significant adverse environmental impacts **AND** provide, on attachments as necessary, the reasons supporting this determination.

\_\_\_\_\_  
Name of Lead Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name of Responsible Officer in Lead Agency

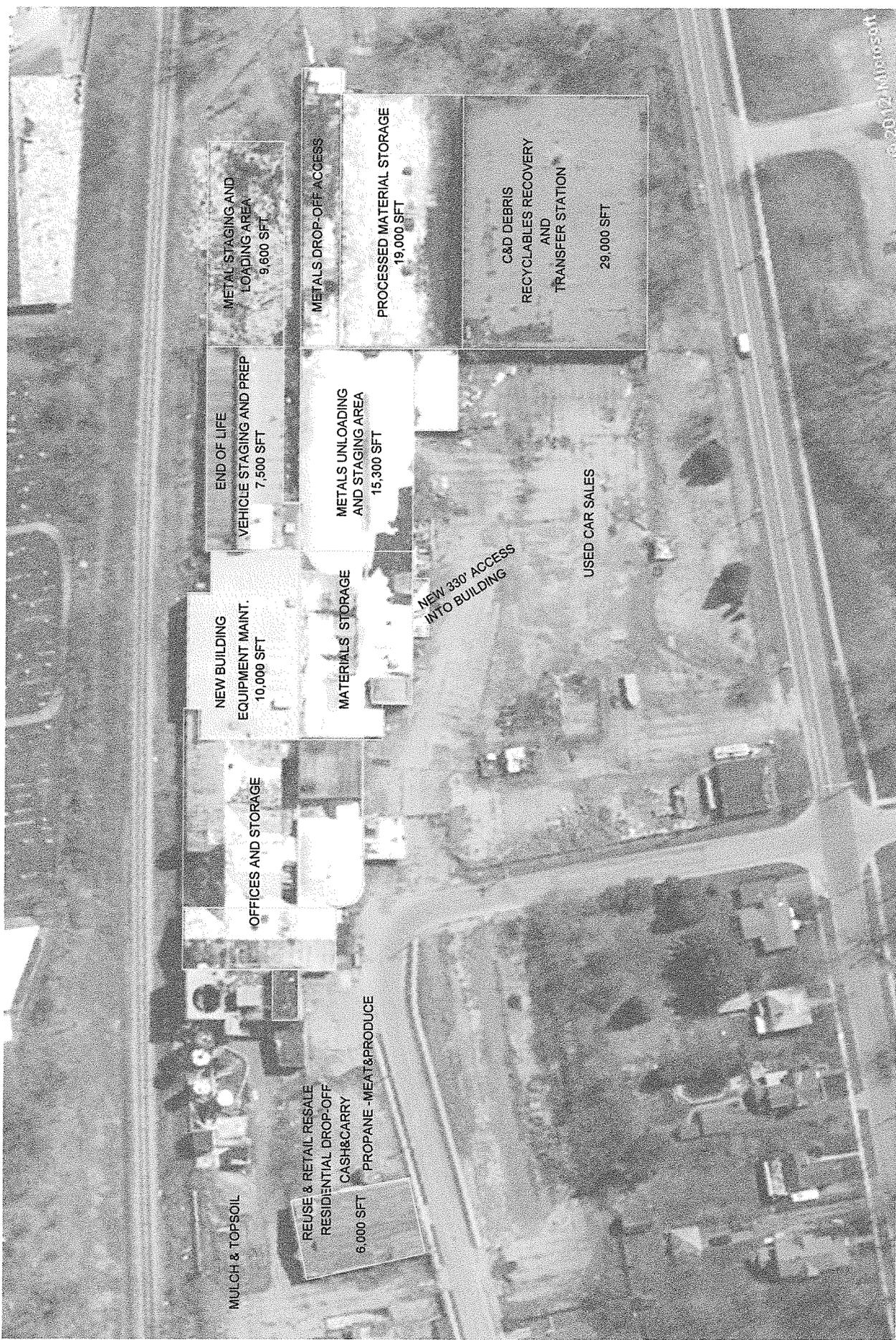
\_\_\_\_\_  
Title of Responsible Officer

\_\_\_\_\_  
Signature of Responsible Officer in Lead Agency

\_\_\_\_\_  
Signature of Preparer (If different from responsible officer)

**Reset**

9/4/12 (P)



SOURCE: MICROSOFT MAPS

<p>MIXED BEST USE PLAN - FAIR STREET COMPLEX</p> <p>CONCEPTUAL USE DEVELOPMENT PLAN</p> <p>FIGURE 1</p>	<p>SCALE: NTS</p> <p>DRAWN BY: J-VP</p> <p>CHKD BY: APJ</p> <p>DATE: 08-29-12</p> <p>*.dwg: siteplan</p>	<p>100 FAIR STREET, LLC.</p> <p>100 FAIR STREET</p> <p>BROCKPORT, NY</p>
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