



BAMMEL ARCHITECTS
A PROFESSIONAL CORPORATION

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CONSULTANTS:

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SEAL:

PROJECT IDENTIFICATION:

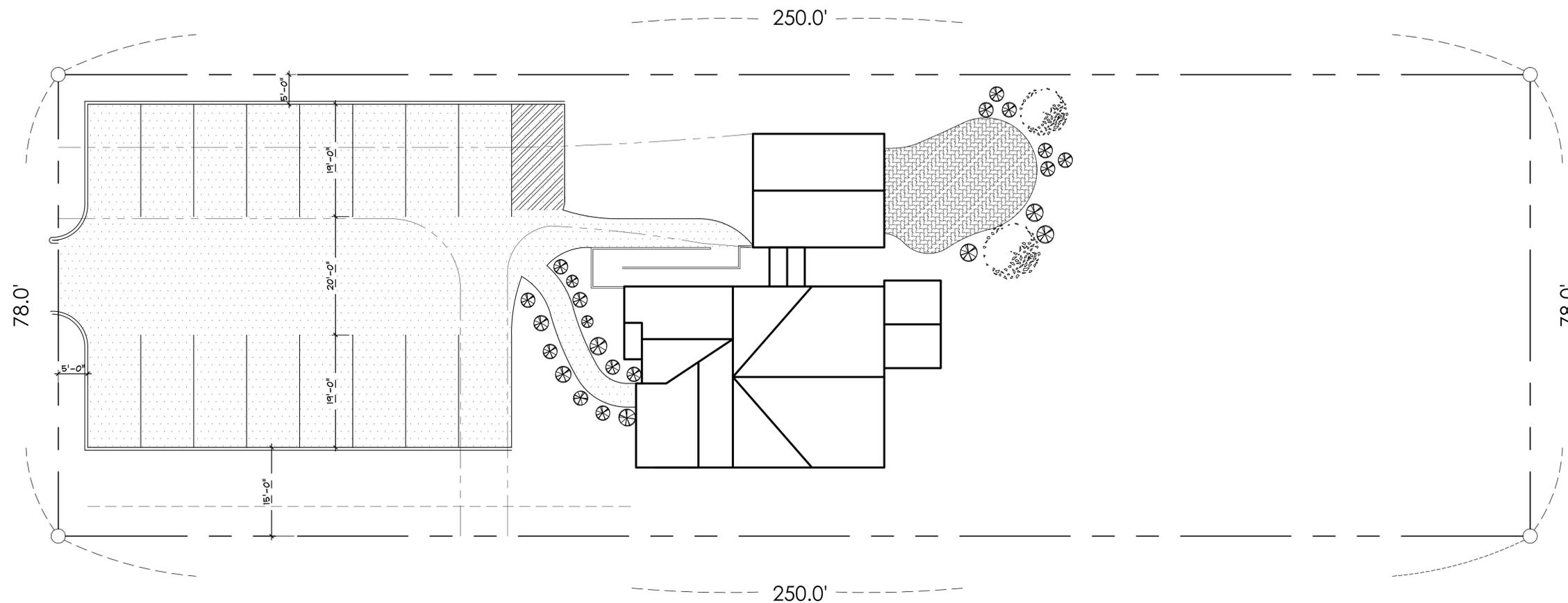
RENOVATIONS TO:
8241 SHERIDAN DR.
WILLIAMSVILLE, NY 14221

ISSUE	
ISSUE DATE:	08/30/2013
FILE NAME:	Proposed Plan 2013-8-30.dwg
PROJECT NUMBER:	xx.xx
SCALE:	AS NOTED
DRAWN BY:	DJB
CHECKED BY:	ALL

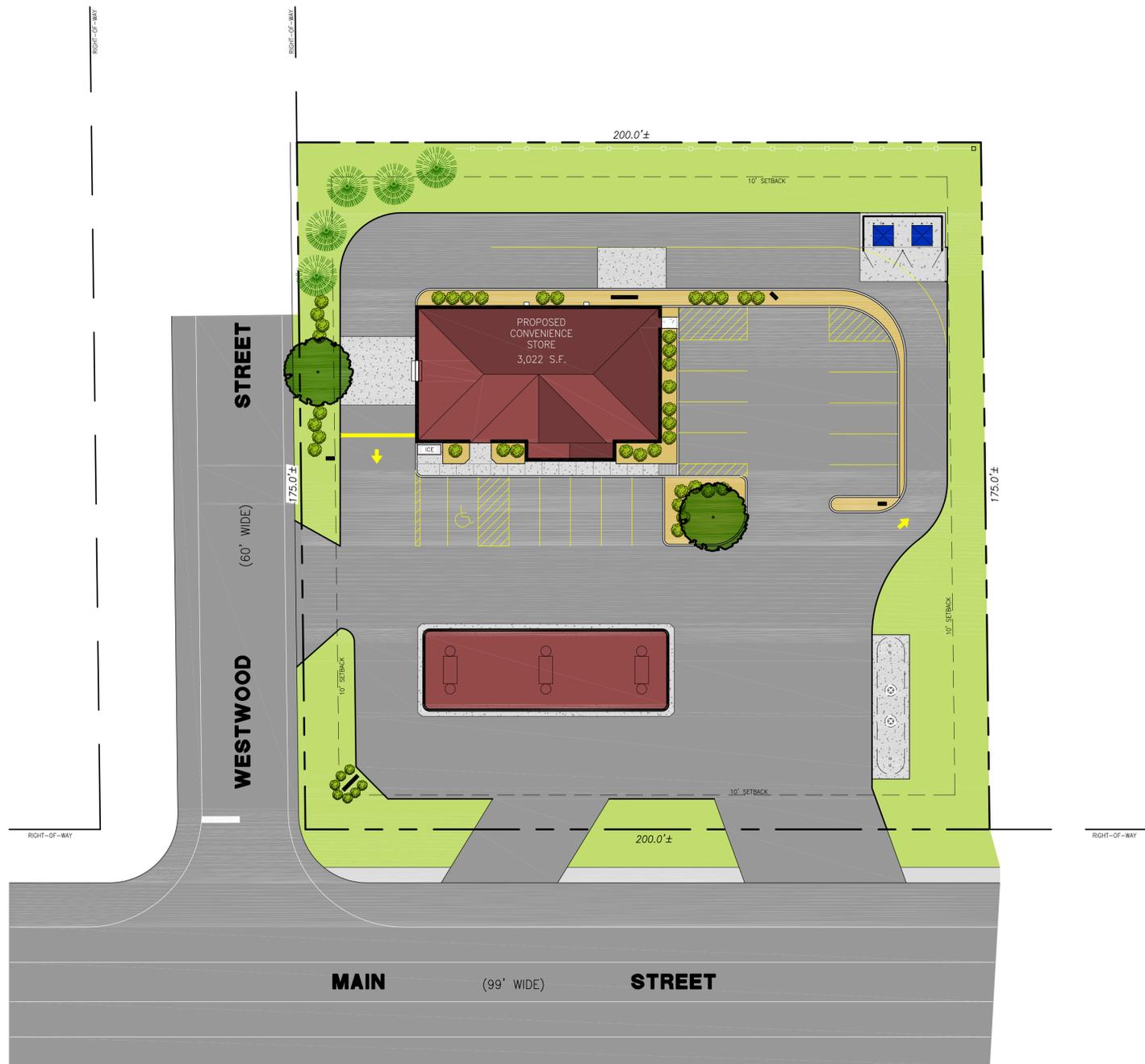
SHEET TITLE:
SITE PLAN

DRAWING NO:

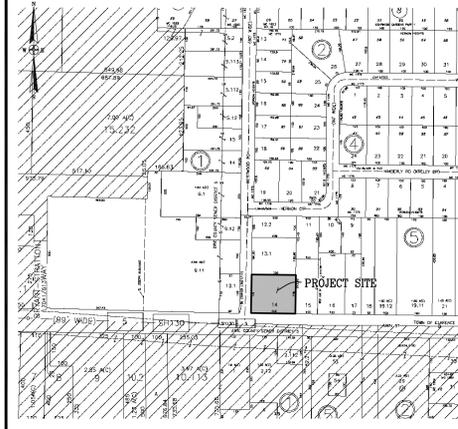
SP-100



1 SITE PLAN
1" = 10'-0"



PLAN
SCALE: 1" = 20'



SITE LOCATION
SCALE: NOT TO SCALE

GENERAL NOTES:

1. LOCATION OF EXISTING UTILITIES ARE APPROXIMATE. CONTRACTOR TO VERIFY LOCATION (HORIZONTAL & VERTICAL) PRIOR TO CONSTRUCTION.
2. VERIFY ALL EXISTING CONDITIONS (I.E. AS-BUILT LOCATIONS, ELEVATIONS & DIMENSIONS) PRIOR TO BID PREPARATION AND CONSTRUCTION.
3. CONTRACTOR IS TO OBTAIN PERMISSION TO ACCESS UTILITIES WITHIN RIGHT-OF-WAY AND/OR UNDER THE AUTHORITY OF OTHERS.
4. CONTRACTOR SHALL TAKE ALL REASONABLE MEASURES TO PROTECT EXISTING TREES WHICH ARE TO BE PRESERVED FROM ALL TYPES OF ROOT, TRUNK AND LIMB DAMAGE; INCLUDING BUT NOT LIMITED TO, RETAINING WALLS AND CONSTRUCTION FENCE WHICH PREVENT FILLING ON TOP, OR SOIL COMPACTION OVER ROOTS.
5. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH LOCAL CONSTRUCTION SPECIFICATIONS WHERE APPLICABLE AND/OR SUBJECT TO THE LATEST REVISION BY THE TOWN ENGINEER.
6. CONTRACTOR SHALL REPAIR ALL SIDEWALKS, PAVEMENTS AND LAWN AREAS DISTURBED BY SITE WORK.

NOTE:
THESE PLANS DO NOT ASSURE THE PRESENCE OR LOCATION OF UTILITIES. THE CONTRACTOR SHALL NOTIFY "DIG SAFELY-NEW YORK" TOLL FREE AT 1-800-962-7962 TWO (2) FULL WORKING DAYS BEFORE THE START OF CONSTRUCTION, NOT COUNTING THE DAY OF YOUR CALL.

LEGEND:

⊕	HYD.	HYDRANT
⊙	P.P.	UTILITY POLE
□		RECEIVER/CATCH BASIN/D.I.
○	M.H.	MANHOLE
●	W.V.	WATER VALVE
—	ST	STORM SEWER LINE
—	SA	SANITARY SEWER LINE
—	W	WATER LINE
—	G	GAS LINE
—	OE	OVERHEAD ELECTRIC WIRES
—	UE	UNDERGROUND ELECTRIC
—		EXISTING CONTOUR
—		PROPOSED CONTOUR
—		EXIST. SPOT ELEVATION
—		PROP. SPOT ELEVATION
—		SELECT FILL (NO.2 R.O.C.)
—		PROP. WALL-PAK LIGHT
—		TO BE REMOVED

DATE	DESCRIPTION	BY

PROJECT TITLE: PROPOSED KENYON'S VARIETY STORE
8250 MAIN ST. - TOWN OF CLARENCE, NY

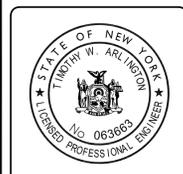
CLIENT: KENYON PARTNERSHIP
859 DAVISON ROAD
LOCKPORT, NEW YORK 14094

DRAWING TITLE: CONCEPT PLAN

APEX CONSULTING
SURVEY & ENGINEERING SERVICES, P.C.

SURVEYING • ENGINEERING • LANDSCAPE ARCHITECTURE

102 EAST AVENUE, LOCKPORT, NEW YORK 14094
Phone: (716) 439-0188 FAX: (716) 439-0189



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DATE: 8/7/2013
SCALE: 1" = 20'
PROJECT NO.: 13-106
DRAWN BY: DES
CHECKED BY: TWA

DWG. NO.:
SHEET **L1a** OF

617.20
Appendix A
State Environmental Quality Review
FULL ENVIRONMENTAL ASSESSMENT FORM

Purpose: The full EAF is designed to help applicants and agencies determine, in an orderly manner, whether a project or action may be significant. The question of whether an action may be significant is not always easy to answer. Frequently, there are aspects of a project that are subjective or unmeasurable. It is also understood that those who determine significance may have little or no formal knowledge of the environment or may not be technically expert in environmental analysis. In addition, many who have knowledge in one particular area may not be aware of the broader concerns affecting the question of significance.

The full EAF is intended to provide a method whereby applicants and agencies can be assured that the determination process has been orderly, comprehensive in nature, yet flexible enough to allow introduction of information to fit a project or action.

Full EAF Components: The full EAF is comprised of three parts:

- Part 1:** Provides objective data and information about a given project and its site. By identifying basic project data, it assists a reviewer in the analysis that takes place in Parts 2 and 3.
- Part 2:** Focuses on identifying the range of possible impacts that may occur from a project or action. It provides guidance as to whether an impact is likely to be considered small to moderate or whether it is a potentially-large impact. The form also identifies whether an impact can be mitigated or reduced.
- Part 3:** If any impact in Part 2 is identified as potentially-large, then Part 3 is used to evaluate whether or not the impact is actually important.

THIS AREA FOR LEAD AGENCY USE ONLY

DETERMINATION OF SIGNIFICANCE -- Type 1 and Unlisted Actions

Identify the Portions of EAF completed for this project:

Part 1

Part 2

Part 3

Upon review of the information recorded on this EAF (Parts 1 and 2 and 3 if appropriate), and any other supporting information, and considering both the magnitude and importance of each impact, it is reasonably determined by the lead agency that:

- A. The project will not result in any large and important impact(s) and, therefore, is one which will **not** have a significant impact on the environment, therefore a **negative declaration will be prepared**.
- B. Although the project could have a significant effect on the environment, there will not be a significant effect for this Unlisted Action because the mitigation measures described in PART 3 have been required, therefore a **CONDITIONED negative declaration will be prepared.***
- C. The project may result in one or more large and important impacts that may have a significant impact on the environment, therefore a **positive declaration will be prepared**.

*A Conditioned Negative Declaration is only valid for Unlisted Actions

Name of Action

Name of Lead Agency

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)

RECEIVED

SEP 18 2013

website

Date

ZONING OFFICE

received
revised 9-18-13

to Sockett+Shear 9-18-13

PART 1--PROJECT INFORMATION
Prepared by Project Sponsor

NOTICE: This document is designed to assist in determining whether the action proposed may have a significant effect on the environment. Please complete the entire form, Parts A through E. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Provide any additional information you believe will be needed to complete Parts 2 and 3.

It is expected that completion of the full EAF will be dependent on information currently available and will not involve new studies, research or investigation. If information requiring such additional work is unavailable, so indicate and specify each instance.

Name of Action Proposed Kenyon's 'C' Store with fuel & Tim Horton's Drive-thru

Location of Action (include Street Address, Municipality and County)

8250 Main Street
Town of Clarence, Erie County, NY

Name of Applicant/Sponsor KENYON PARTNERSHIP

Address 859 DAVISON ROAD

City / PO LOCKPORT State NY Zip Code 14094

Business Telephone 716-439-0961

Name of Owner (if different) _____

Address _____

City / PO _____ State _____ Zip Code _____

Business Telephone _____

Description of Action:

1. Proposed demolition of existing building & canopy and removal of existing underground fuel tanks.
2. Construction of new 3000 s.f. convenience store with Tim Horton's kiosk.
3. New fuel canopy.
4. New parking areas, pavement circulation, landscaping, lighting and other site improvements.

Please Complete Each Question--Indicate N.A. if not applicable

A. SITE DESCRIPTION

Physical setting of overall project, both developed and undeveloped areas.

1. Present Land Use: Urban Industrial Commercial Residential (suburban) Rural (non-farm)
 Forest Agriculture Other _____

2. Total acreage of project area: 0.80 acres.

APPROXIMATE ACREAGE	PRESENTLY	AFTER COMPLETION
Meadow or Brushland (Non-agricultural)	<u>0</u> acres	_____ acres
Forested	<u>0</u> acres	_____ acres
Agricultural (Includes orchards, cropland, pasture, etc.)	<u>0</u> acres	_____ acres
Wetland (Freshwater or tidal as per Articles 24,25 of ECL)	<u>0</u> acres	_____ acres
Water Surface Area	<u>0</u> acres	_____ acres
Unvegetated (Rock, earth or fill)	<u>0</u> acres	_____ acres
Roads, buildings and other paved surfaces	<u>0.22</u> acres	<u>0.53</u> acres
Other (Indicate type) <u>LAWN AND TREES</u>	<u>0.58</u> acres	<u>0.27</u> acres

3. What is predominant soil type(s) on project site? Wassaic Silt Loam (WaA)

- a. Soil drainage: Well drained 100 % of site Moderately well drained _____ % of site.
 Poorly drained _____ % of site

b. If any agricultural land is involved, how many acres of soil are classified within soil group 1 through 4 of the NYS Land Classification System? NA acres (see 1 NYCRR 370).

4. Are there bedrock outcroppings on project site? Yes No

a. What is depth to bedrock 2 - 4 (in feet)

5. Approximate percentage of proposed project site with slopes:
 0-10% 100 % 10- 15% _____ % 15% or greater _____ %

6. Is project substantially contiguous to, or contain a building, site, or district, listed on the State or National Registers of Historic Places? Yes No

7. Is project substantially contiguous to a site listed on the Register of National Natural Landmarks? Yes No

8. What is the depth of the water table? 2 - 4 (in feet)

9. Is site located over a primary, principal, or sole source aquifer? Yes No

10. Do hunting, fishing or shell fishing opportunities presently exist in the project area? Yes No

11. Does project site contain any species of plant or animal life that is identified as threatened or endangered? Yes No

According to:

NYSDEC Environmental Resource Mapper

Identify each species:

12. Are there any unique or unusual land forms on the project site? (i.e., cliffs, dunes, other geological formations?)

Yes No

Describe:

13. Is the project site presently used by the community or neighborhood as an open space or recreation area?

Yes No

If yes, explain:

14. Does the present site include scenic views known to be important to the community? Yes No

15. Streams within or contiguous to project area:

None

a. Name of Stream and name of River to which it is tributary

None

16. Lakes, ponds, wetland areas within or contiguous to project area:

None

b. Size (in acres):

NA

17. Is the site served by existing public utilities? Yes No
- a. If YES, does sufficient capacity exist to allow connection? Yes No
- b. If YES, will improvements be necessary to allow connection? Yes No
18. Is the site located in an agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? Yes No
19. Is the site located in or substantially contiguous to a Critical Environmental Area designated pursuant to Article 8 of the ECL, and 6 NYCRR 617? Yes No
20. Has the site ever been used for the disposal of solid or hazardous wastes? Yes No

B. Project Description

1. Physical dimensions and scale of project (fill in dimensions as appropriate).

- a. Total contiguous acreage owned or controlled by project sponsor: 0.80 acres.
- b. Project acreage to be developed: 0.53 acres initially; 0.53 acres ultimately.
- c. Project acreage to remain undeveloped: 0.27 acres.
- d. Length of project, in miles: 0.04+/- (if appropriate)
- e. If the project is an expansion, indicate percent of expansion proposed. 50 %
- f. Number of off-street parking spaces existing 0; proposed 16
- g. Maximum vehicular trips generated per hour: 25 (upon completion of project)?
- h. If residential: Number and type of housing units:

	One Family	Two Family	Multiple Family	Condominium
Initially	_____	_____	_____	_____
Ultimately	_____	_____	_____	_____

- i. Dimensions (in feet) of largest proposed structure: 24+/- height; 40 width; 72 length.
- j. Linear feet of frontage along a public thoroughfare project will occupy is? 200 ft.
2. How much natural material (i.e. rock, earth, etc.) will be removed from the site? 0 tons/cubic yards.
3. Will disturbed areas be reclaimed Yes No N/A

a. If yes, for what intended purpose is the site being reclaimed?

asphalt pavement and lawn

- b. Will topsoil be stockpiled for reclamation? Yes No
- c. Will upper subsoil be stockpiled for reclamation? Yes No
4. How many acres of vegetation (trees, shrubs, ground covers) will be removed from site? 0.31 acres.

5. Will any mature forest (over 100 years old) or other locally-important vegetation be removed by this project?

Yes No

6. If single phase project: Anticipated period of construction: 3 months, (including demolition)

7. If multi-phased:

a. Total number of phases anticipated _____ (number)

b. Anticipated date of commencement phase 1: _____ month _____ year, (including demolition)

c. Approximate completion date of final phase: _____ month _____ year.

d. Is phase 1 functionally dependent on subsequent phases? Yes No

8. Will blasting occur during construction? Yes No

9. Number of jobs generated: during construction 15 ; after project is complete 8

10. Number of jobs eliminated by this project 0.

11. Will project require relocation of any projects or facilities? Yes No

If yes, explain:

12. Is surface liquid waste disposal involved? Yes No

a. If yes, indicate type of waste (sewage, industrial, etc) and amount _____

b. Name of water body into which effluent will be discharged _____

13. Is subsurface liquid waste disposal involved? Yes No Type sanitary

14. Will surface area of an existing water body increase or decrease by proposal? Yes No

If yes, explain:

15. Is project or any portion of project located in a 100 year flood plain? Yes No

16. Will the project generate solid waste? Yes No

a. If yes, what is the amount per month? 20 tons

b. If yes, will an existing solid waste facility be used? Yes No

c. If yes, give name BFI ; location approved landfill

d. Will any wastes not go into a sewage disposal system or into a sanitary landfill? Yes No

e. If yes, explain:

17. Will the project involve the disposal of solid waste? Yes No

a. If yes, what is the anticipated rate of disposal? _____ tons/month.

b. If yes, what is the anticipated site life? _____ years.

18. Will project use herbicides or pesticides? Yes No

19. Will project routinely produce odors (more than one hour per day)? Yes No

20. Will project produce operating noise exceeding the local ambient noise levels? Yes No

21. Will project result in an increase in energy use? Yes No

If yes, indicate type(s)

electricity and natural gas (existing utilities at the road are sufficient)

22. If water supply is from wells, indicate pumping capacity NA gallons/minute.

23. Total anticipated water usage per day 1000 gallons/day.

24. Does project involve Local, State or Federal funding? Yes No

If yes, explain:

25. Approvals Required:

			Type	Submittal Date
City, Town, Village Board	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>Special Exception Permit</u>	<u>Sept. 2013</u>
			_____	_____
			_____	_____
City, Town, Village Planning Board	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>Site Plan Approval</u>	<u>Sept. 2013</u>
			_____	_____
			_____	_____
City, Town Zoning Board	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>Possible variance</u>	<u>Oct. 2013</u>
			_____	_____
			_____	_____
City, County Health Department	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>water & sewer service</u>	<u>Oct. 2013</u>
			_____	_____
			_____	_____
Other Local Agencies	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
Other Regional Agencies	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
State Agencies	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>NYS DOT Work Permit</u>	<u>Nov. 2013</u>
			<u>NYS DEC Tank Removal</u>	<u>Dec. 2013</u>
			_____	_____
Federal Agencies	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____

C. Zoning and Planning Information

1. Does proposed action involve a planning or zoning decision? Yes No

If Yes, indicate decision required:

- | | | | |
|---|--|--|--------------------------------------|
| <input type="checkbox"/> Zoning amendment | <input type="checkbox"/> Zoning variance | <input type="checkbox"/> New/revision of master plan | <input type="checkbox"/> Subdivision |
| <input checked="" type="checkbox"/> Site plan | <input checked="" type="checkbox"/> Special use permit | <input type="checkbox"/> Resource management plan | <input type="checkbox"/> Other |

2. What is the zoning classification(s) of the site?

TND - Traditional Neighborhood District

3. What is the maximum potential development of the site if developed as permitted by the present zoning?

As allowed by Town of Clarence Zoning Ordinance for TND

4. What is the proposed zoning of the site?

NA

5. What is the maximum potential development of the site if developed as permitted by the proposed zoning?

60% lot coverage

6. Is the proposed action consistent with the recommended uses in adopted local land use plans? Yes No

Empty rectangular box for additional information.

7. What are the predominant land use(s) and zoning classifications within a ¼ mile radius of proposed action?

commercial, business and residential

Large empty rectangular box for additional details.

8. Is the proposed action compatible with adjoining/surrounding land uses with a ¼ mile? Yes No

9. If the proposed action is the subdivision of land, how many lots are proposed? NA

a. What is the minimum lot size proposed? NA

10. Will proposed action require any authorization(s) for the formation of sewer or water districts? Yes No

11. Will the proposed action create a demand for any community provided services (recreation, education, police, fire protection)?

Yes No

a. If yes, is existing capacity sufficient to handle projected demand? Yes No

12. Will the proposed action result in the generation of traffic significantly above present levels? Yes No

a. If yes, is the existing road network adequate to handle the additional traffic. Yes No

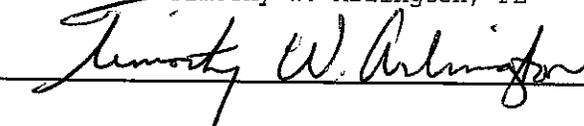
D. Informational Details

Attach any additional information as may be needed to clarify your project. If there are or may be any adverse impacts associated with your proposal, please discuss such impacts and the measures which you propose to mitigate or avoid them.

E. Verification

I certify that the information provided above is true to the best of my knowledge.

Applicant/Sponsor Name Apex Consulting Survey & Services, PC Date August 27, 2011
Timothy W. Arlington, PE

Signature 

Title Consulting Engineer - Project Sponsor

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



09/05/2013

617.20
Appendix A
State Environmental Quality Review
FULL ENVIRONMENTAL ASSESSMENT FORM

Purpose: The full EAF is designed to help applicants and agencies determine, in an orderly manner, whether a project or action may be significant. The question of whether an action may be significant is not always easy to answer. Frequently, there are aspects of a project that are subjective or unmeasurable. It is also understood that those who determine significance may have little or no formal knowledge of the environment or may not be technically expert in environmental analysis. In addition, many who have knowledge in one particular area may not be aware of the broader concerns affecting the question of significance.

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DETERMINATION OF SIGNIFICANCE -- Type 1 and Unlisted Actions

Identify the Portions of EAF completed for this project:

Part 1

Part 2

Part 3

Upon review of the information recorded on this EAF (Parts 1 and 2 and 3 if appropriate), and any other supporting information, and considering both the magnitude and importance of each impact, it is reasonably determined by the lead agency that:

- A. The project will not result in any large and important impact(s) and, therefore, is one which **will not** have a significant impact on the environment, therefore **a negative declaration will be prepared.**
- B. Although the project could have a significant effect on the environment, there will not be a significant effect for this Unlisted Action because the mitigation measures described in PART 3 have been required, therefore **a CONDITIONED negative declaration will be prepared.***
- C. The project may result in one or more large and important impacts that may have a significant impact on the environment, therefore **a positive declaration will be prepared.**

*A Conditioned Negative Declaration is only valid for Unlisted Actions

10647 STRUCTURE DEMOLITION

Name of Action

Name of Lead Agency

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)

8.26.13

Date

PART 1--PROJECT INFORMATION
Prepared by Project Sponsor

NOTICE: This document is designed to assist in determining whether the action proposed may have a significant effect on the environment. Please complete the entire form, Parts A through E. Answers to these questions will be considered as part of the application for approval and may be subject to further verification and public review. Provide any additional information you believe will be needed to complete Parts 2 and 3.

It is expected that completion of the full EAF will be dependent on information currently available and will not involve new studies, research or investigation. If information requiring such additional work is unavailable, so indicate and specify each instance.

Name of Action Demolition of 10647 Main Street

Location of Action (include Street Address, Municipality and County)

10647 Main Street
Clarence, NY 14031

Name of Applicant/Sponsor Yan Kit Yu

Address 5130 Hillcrest Drive

City / PO Clarence State NY Zip Code 14031

Business Telephone (716) 759-6486

Name of Owner (if different) _____

Address _____

City / PO _____ State _____ Zip Code _____

Business Telephone _____

Description of Action:

Demolition of a structures built prior to 1950.

Please Complete Each Question--Indicate N.A. if not applicable

A. SITE DESCRIPTION

Physical setting of overall project, both developed and undeveloped areas.

1. Present Land Use: Urban Industrial Commercial Residential (suburban) Rural (non-farm)
 Forest Agriculture Other _____

2. Total acreage of project area: 0.4 acres.

APPROXIMATE ACREAGE	PRESENTLY	AFTER COMPLETION
Meadow or Brushland (Non-agricultural)	_____ acres	_____ acres
Forested	_____ acres	_____ acres
Agricultural (Includes orchards, cropland, pasture, etc.)	_____ acres	_____ acres
Wetland (Freshwater or tidal as per Articles 24,25 of ECL)	_____ acres	_____ acres
Water Surface Area	_____ acres	_____ acres
Unvegetated (Rock, earth or fill)	_____ acres	_____ acres
Roads, buildings and other paved surfaces	<u>.3</u> acres	<u>.2</u> acres
Other (Indicate type) <u>Lawn/landscaping</u>	<u>.1</u> acres	<u>.1</u> acres

3. What is predominant soil type(s) on project site? _____

- a. Soil drainage: Well drained _____% of site Moderately well drained 100% of site.
 Poorly drained _____% of site

b. If any agricultural land is involved, how many acres of soil are classified within soil group 1 through 4 of the NYS Land Classification System? _____ acres (see 1 NYCRR 370).

4. Are there bedrock outcroppings on project site? Yes No

a. What is depth to bedrock <5' (in feet)

5. Approximate percentage of proposed project site with slopes:

- 0-10% 100% 10- 15% _____% 15% or greater _____%

6. Is project substantially contiguous to, or contain a building, site, or district, listed on the State or National Registers of Historic Places? Yes No

7. Is project substantially contiguous to a site listed on the Register of National Natural Landmarks? Yes No

8. What is the depth of the water table? varies (in feet)

9. Is site located over a primary, principal, or sole source aquifer? Yes No

10. Do hunting, fishing or shell fishing opportunities presently exist in the project area? Yes No

11. Does project site contain any species of plant or animal life that is identified as threatened or endangered? Yes No

According to:

Identify each species:

12. Are there any unique or unusual land forms on the project site? (i.e., cliffs, dunes, other geological formations?)

Yes No

Describe:

13. Is the project site presently used by the community or neighborhood as an open space or recreation area?

Yes No

If yes, explain:

14. Does the present site include scenic views known to be important to the community? Yes No

15. Streams within or contiguous to project area:

a. Name of Stream and name of River to which it is tributary

16. Lakes, ponds, wetland areas within or contiguous to project area:

b. Size (in acres):

17. Is the site served by existing public utilities? Yes No
- a. If **YES**, does sufficient capacity exist to allow connection? Yes No
- b. If **YES**, will improvements be necessary to allow connection? Yes No
18. Is the site located in an agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? Yes No
19. Is the site located in or substantially contiguous to a Critical Environmental Area designated pursuant to Article 8 of the ECL, and 6 NYCRR 617? Yes No
20. Has the site ever been used for the disposal of solid or hazardous wastes? Yes No

B. Project Description

1. Physical dimensions and scale of project (fill in dimensions as appropriate).

- a. Total contiguous acreage owned or controlled by project sponsor: 1 acres.
- b. Project acreage to be developed: .3 acres initially; .3 acres ultimately.
- c. Project acreage to remain undeveloped: .1 acres.
- d. Length of project, in miles: _____ (if appropriate)
- e. If the project is an expansion, indicate percent of expansion proposed. _____ %
- f. Number of off-street parking spaces existing _____; proposed _____
- g. Maximum vehicular trips generated per hour: _____ (upon completion of project)?
- h. If residential: Number and type of housing units:

	One Family	Two Family	Multiple Family	Condominium
Initially	_____	_____	_____	_____
Ultimately	_____	_____	_____	_____

- i. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; _____ length.
- j. Linear feet of frontage along a public thoroughfare project will occupy is? _____ ft.
2. How much natural material (i.e. rock, earth, etc.) will be removed from the site? _____ tons/cubic yards.

3. Will disturbed areas be reclaimed Yes No N/A

a. If yes, for what intended purpose is the site being reclaimed?

New building and landscaping

- b. Will topsoil be stockpiled for reclamation? Yes No
- c. Will upper subsoil be stockpiled for reclamation? Yes No
4. How many acres of vegetation (trees, shrubs, ground covers) will be removed from site? _____ acres.

5. Will any mature forest (over 100 years old) or other locally-important vegetation be removed by this project?

Yes No

6. If single phase project: Anticipated period of construction: 6 months, (including demolition)

7. If multi-phased:

a. Total number of phases anticipated 1 (number)

b. Anticipated date of commencement phase 1: _____ month _____ year, (including demolition)

c. Approximate completion date of final phase: _____ month _____ year.

d. Is phase 1 functionally dependent on subsequent phases? Yes No

8. Will blasting occur during construction? Yes No

9. Number of jobs generated: during construction _____; after project is complete _____

10. Number of jobs eliminated by this project _____.

11. Will project require relocation of any projects or facilities? Yes No

If yes, explain:

12. Is surface liquid waste disposal involved? Yes No

a. If yes, indicate type of waste (sewage, industrial, etc) and amount _____

b. Name of water body into which effluent will be discharged _____

13. Is subsurface liquid waste disposal involved? Yes No Type _____

14. Will surface area of an existing water body increase or decrease by proposal? Yes No

If yes, explain:

15. Is project or any portion of project located in a 100 year flood plain? Yes No

16. Will the project generate solid waste? Yes No

a. If yes, what is the amount per month? _____ tons

b. If yes, will an existing solid waste facility be used? Yes No

c. If yes, give name _____; location _____

d. Will any wastes not go into a sewage disposal system or into a sanitary landfill? Yes No

e. If yes, explain:

17. Will the project involve the disposal of solid waste? Yes No

a. If yes, what is the anticipated rate of disposal? _____ tons/month.

b. If yes, what is the anticipated site life? _____ years.

18. Will project use herbicides or pesticides? Yes No

19. Will project routinely produce odors (more than one hour per day)? Yes No

20. Will project produce operating noise exceeding the local ambient noise levels? Yes No

21. Will project result in an increase in energy use? Yes No

If yes, indicate type(s)

22. If water supply is from wells, indicate pumping capacity _____ gallons/minute.

23. Total anticipated water usage per day _____ gallons/day.

24. Does project involve Local, State or Federal funding? Yes No

If yes, explain:

25. Approvals Required:

			Type	Submittal Date
City, Town, Village Board	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
City, Town, Village Planning Board	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	SEQRA	8/26/13
			_____	_____
			_____	_____
City, Town Zoning Board	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
City, County Health Department	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
Other Local Agencies	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Building Department	8/26/13
			_____	_____
			_____	_____
Other Regional Agencies	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
State Agencies	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____
Federal Agencies	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____	_____
			_____	_____
			_____	_____

C. Zoning and Planning Information

1. Does proposed action involve a planning or zoning decision? Yes No

If Yes, indicate decision required:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Zoning amendment | <input type="checkbox"/> Zoning variance | <input type="checkbox"/> New/revision of master plan | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Site plan | <input type="checkbox"/> Special use permit | <input type="checkbox"/> Resource management plan | <input checked="" type="checkbox"/> Other |

2. What is the zoning classification(s) of the site?

TND

3. What is the maximum potential development of the site if developed as permitted by the present zoning?

As developed

4. What is the proposed zoning of the site?

same

5. What is the maximum potential development of the site if developed as permitted by the proposed zoning?

As developed

6. Is the proposed action consistent with the recommended uses in adopted local land use plans? Yes No

7. What are the predominant land use(s) and zoning classifications within a ¼ mile radius of proposed action?

Commercial and residential

8. Is the proposed action compatible with adjoining/surrounding land uses with a ¼ mile? Yes No

9. If the proposed action is the subdivision of land, how many lots are proposed? _____

a. What is the minimum lot size proposed? 66' x 264'

10. Will proposed action require any authorization(s) for the formation of sewer or water districts? Yes No

11. Will the proposed action create a demand for any community provided services (recreation, education, police, fire protection)?

Yes No

a. If yes, is existing capacity sufficient to handle projected demand? Yes No

12. Will the proposed action result in the generation of traffic significantly above present levels? Yes No

a. If yes, is the existing road network adequate to handle the additional traffic. Yes No

D. Informational Details

Attach any additional information as may be needed to clarify your project. If there are or may be any adverse impacts associated with your proposal, please discuss such impacts and the measures which you propose to mitigate or avoid them.

E. Verification

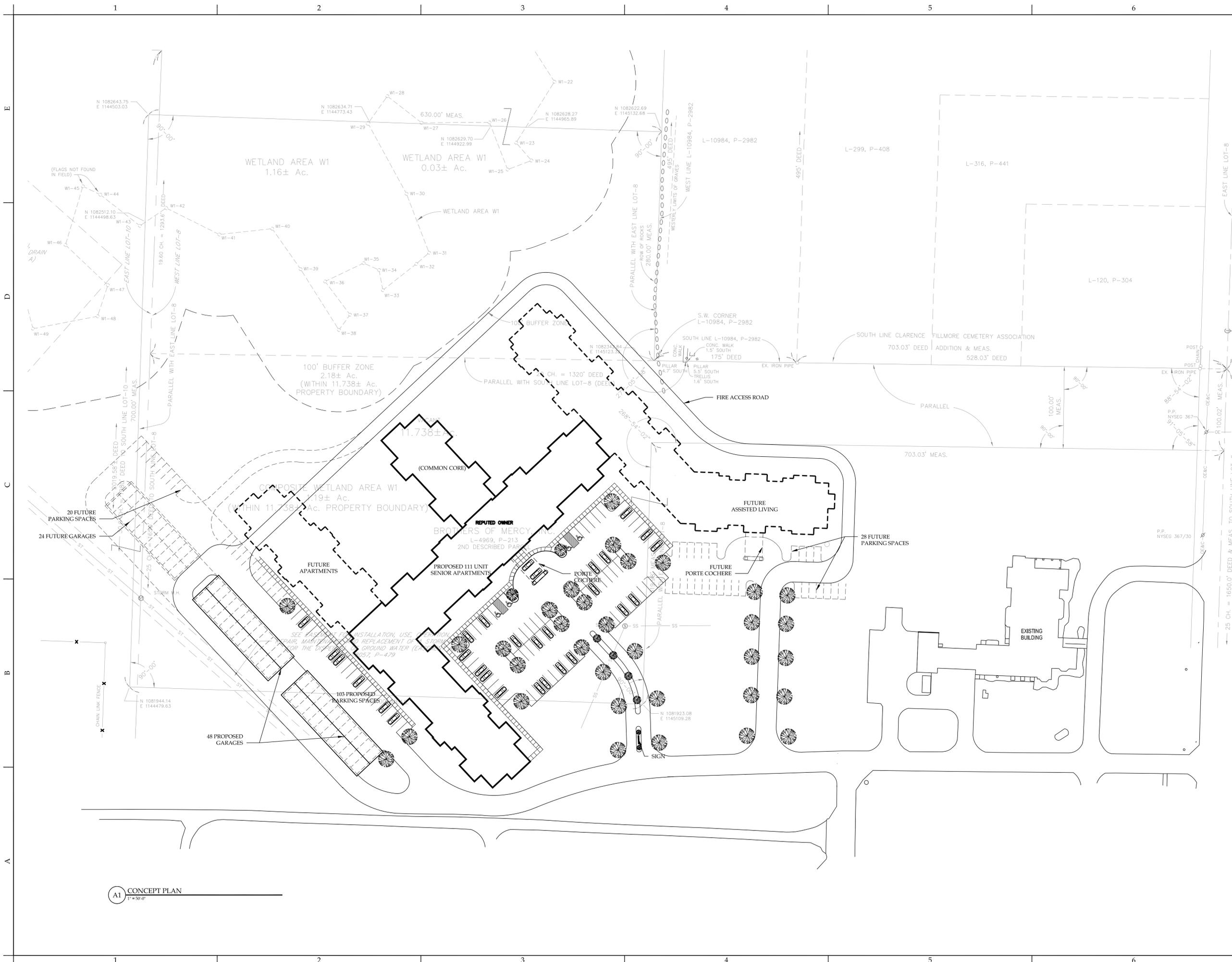
I certify that the information provided above is true to the best of my knowledge.

Applicant/Sponsor Name Yan Kit Yu Date 8/26/13

Signature Simon Yu

Title Owner

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



NOTICE
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**Matrix/ Regent
 Joint Venture**

**Brother's
 of Mercy**

Bergtold Rd, Clarence

ISSUE:

SA PROJECT TEAM: PRINCIPAL P. Silvestri
 PROJ. ARCH. _____ DRAFTER _____
 JOB CAPT. _____ INTERIORS _____

SEAL:

TITLE:
**CONCEPT
 PLAN**

**SILVESTRI
 ARCHITECTS • PC**
 1321 MILLERSPORT HWY PH. 716.691.0900
 AMHERST, NY 14221 FAX 716.691.4773

SA JOB #: 12142 **DATE:** 07-08-13

DRAWING #: AS-101

A1 CONCEPT PLAN
 1" = 50'-0"

DENSITY CALCULATION
BROTHERS OF MERCY

PROPOSED PROJECT AREA.....23 ACRES
ALLOWED DENSITY.....23 ACRES X 8 UNITS PER ACRE = 184 UNITS

PROPOSED PROJECT UNITS:

111 INDEPENDENT LIVING UNITS WITH KITCHENS WITH POTENTIAL FOR AN ADDITIONAL 36 UNITS IN THE FUTURE

POTENTIAL OF 60 ASSISTED LIVING UNITS

ASSISTED LIVING UNITS WOULD NOT BE CALCULATED AT THE SAME DENSITY RATIO AS THE UNITS WOULD NOT BE "STAND ALONE" AS INDEPENDENT KITCHEN FACILITIES WOULD NOT BE PROVIDED AND THE UNITS WOULD BE SIGNIFICANTLY SMALLER

IN CALCULATING THE DENSITY OF THE BRISTOL HOME PROJECT, ASSISTED LIVING UNITS WERE CALCULATED UTILIZING A .5 MULTIPLIER, IDENTIFYING THAT EACH UNIT WOULD REPRESENT 1/2 OF AN INDEPENDENT UNIT.

UTILIZING THIS STANDARD:

60 ASSISTED LIVING UNITS X .5 = 30 UNITS

TOTAL NUMBER OF UNITS IS THEN $111 + 36 + 30 = 177$

THE PROPOSED DENSITY IS WITHIN THE 8 UNIT PER ACRE STANDARD AS REQUIRED IN THE TOWN ZONING LAW.


9.19.13

SKILLED NURSING FACILITIES/NURSING HOMES
BROTHERS OF MERCY CAMPUS

Nursing homes provide custodial and skilled nursing care 24/7. Skilled nursing care involves trained professionals performing services that are needed temporarily due to an injury or illness, including:

- a nurse attending to a post-operative wound or dispensing and monitoring intravenous medications
- a physical therapist working with a resident to rectify strength and balance issues
- a speech therapist assisting a resident in reclaiming their ability to communicate following a stroke
- an occupational therapist helping a resident to become independent again, particularly when it comes to dressing, personal hygiene and eating

A skilled nursing care facility also provides:

- pharmaceutical, laboratory and radiology services
- social and educational activities
- laundry services
- limited transportation
- end-of-life or hospice care
- respite care

Some facilities are specially designed to accommodate seniors suffering from Alzheimer's or Parkinson's disease, dementia or respiratory ailments. Staff also provide custodial or personal care that focuses on helping residents with activities of daily living, such as:

- bathing
- dressing
- personal hygiene
- eating
- maneuvering in and out of bed and/or walking
- incontinence
-

As Skilled Nursing Facilities require trained professionals and support staff, they may be considered a commercial component of the overall Campus. Identifying this as a commercial component, the overall campus provides the required commercial component for a Special Exception Use Permit as identified in the Town of Clarence Zoning Law. The actual percentage of commercial development on the campus is approximately 40%, well above the required 25% (240 units out of the total of 587 units). The actual percentage of commercial use within the specified 23 acres identified for the new construction is approximately 25 % (60 units within the 207 total--identifying a unit as a unit). Therefore, the proposed building addition will meet the requirements of the Town Zoning Law as to commercial requirements.


9.19.13