

**Town of Lansing Zoning Board of Appeals
Application for Variance**



Application Fee _____

Application Date May 4 2022

Property for which Variance is being requested

Tax Parcel No. 38.-1-20 Street Address 233 Asbury Rd

Applicant's Name and Address

Mark Armstrong , 233 Asbury Rd

Zoning District (check one)

Phone _____ R1

Cell (607) 279-5198 R2

Email marmst2@twcny.rr.com R3

(If Applicant different from owner, notarized written permission of owner must be attached hereto.)

Owner's Name and Address (if different)

same

Phone _____ B1

Cell _____ B2

Email _____ L1

RA

IR

Application for (check applicable item)

- A. Interpretation of Zoning Ordinance or Map
- B. Area Variance
- C. Use Variance
- D. Appeal of decision of Code Enforcement Officer

Request relates to provisions of (check applicable item)

- A. Town of Lansing Land use Ordinance, Section _____
- B. Town of Lansing Subdivision Regulations, Section _____
- C. Other (Identity) set back from centerline of Asbury Rd.

Purpose of Request: (attach additional information if necessary)

Would like to add a porch to the front of the house. Specifically a roof over recessed front door.

House is 61' 9" from centerline of Asbury Rd, Support posts for proposed porch roof will be no more than 6' from the house toward the road.

Justification of Request: (attach additional information if necessary)

Existing recessed entryway has allowed water to damage sill.

Protection provided by the porch roof will eliminate cause of damage.

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

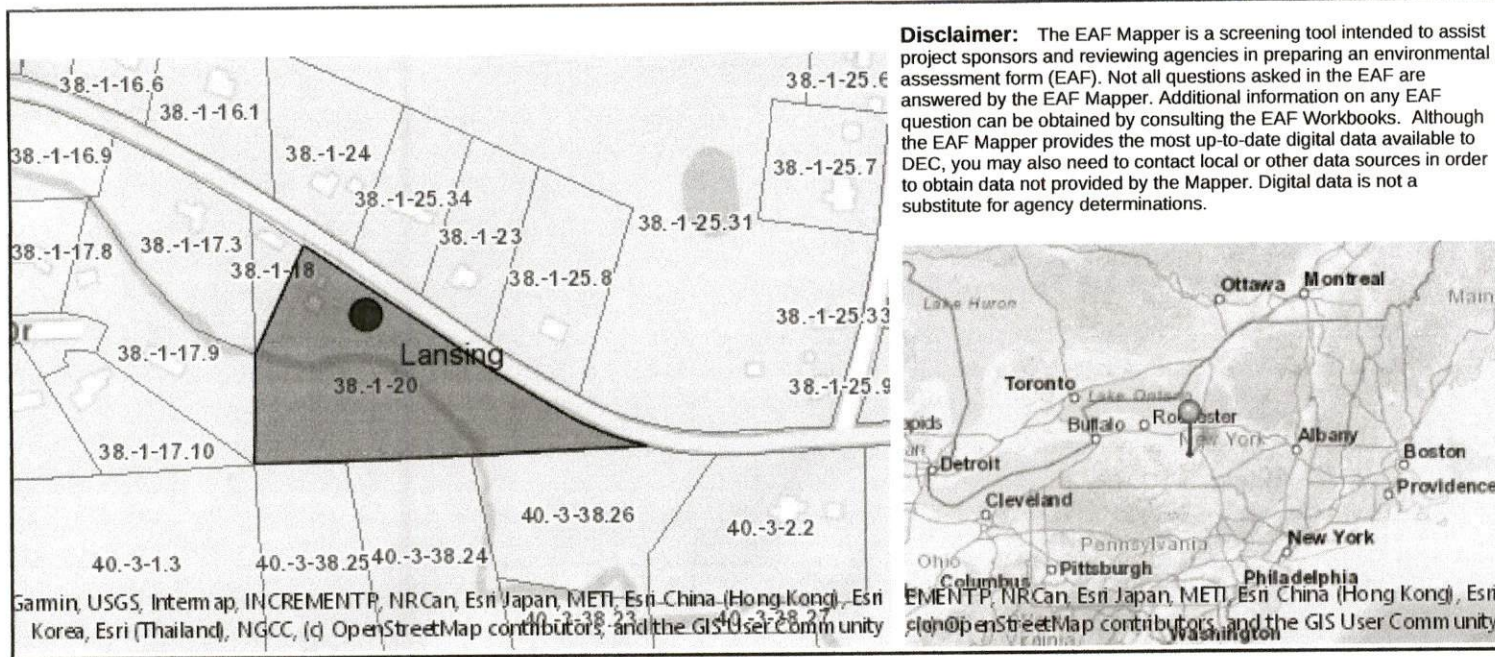
Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Mark Armstrong			
Name of Action or Project: Front Porch Addition			
Project Location (describe, and attach a location map): 233 Asbury Rd, Lansing NY Tax map # 38.-1-20			
Brief Description of Proposed Action: Add roof over front entry. Approx. 48 sq ft (8 x 6 ft) attached to the house and supported by 2 posts within 6' from the house.			
Name of Applicant or Sponsor: Mark Armstrong		Telephone: 607 279 9904 E-Mail: MARMST2@TWCNY.RR.COM	
Address: 233 Asbury Rd			
City/PO: Lansing		State: NY	Zip Code: 14882
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		48 sq ft acres	
b. Total acreage to be physically disturbed?		8 sq ft acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		4.8 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

		NO	YES	N/A
5. Is the proposed action,	a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
	b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		<input type="checkbox"/>	<input checked="" type="checkbox"/> 4	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES	
If Yes, identify: _____		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES	
	b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
	c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?		NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: N/A _____		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?		NO	YES	
If No, describe method for providing potable water: _____ N/A _____		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?		NO	YES	
If No, describe method for providing wastewater treatment: _____ N/A _____		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?		NO	YES	
		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?		NO	YES	
		<input type="checkbox"/>	<input checked="" type="checkbox"/> 4	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		<input checked="" type="checkbox"/> 4	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____				

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input type="checkbox"/>	<input checked="" type="checkbox"/> 4
If Yes, briefly describe: _____ New rain gutter to be tied in to existing _____		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: _____	NO	YES
	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
	<input checked="" type="checkbox"/> 4	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Mark Armstrong</u> Date: <u>6-2-2022</u> Signature: _____ Title: _____		



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
Part 1 / Question 20 [Remediation Site]	No



223
Asbury

223 Asbury



233 Asbury Rd
SBL # 38.-1-20



0 15 30 60 90 120
US Feet

Mark Armstrong 274-5198
233 Asbury Rd

