

# Town of Canandaigua

5440 Routes 5 & 20 West  
Canandaigua, NY 14424

Phone: (585) 394-1120 / Fax: (585) 394-9476

RECEIVED	TOWN OF CANANDAIGUA DEVELOPMENT OFFICE	FOR REVIEW
	JUL 7 2020	

## AGRICULTURAL DATA STATEMENT

CPN #: 20-050

In accordance with NYS Town Law § 283-a, the Town of Canandaigua will use the following information to evaluate possible impacts that would occur on property within an agricultural district containing a farm operation or on property with boundaries within 500 feet of a farm operation.

- A. Name and Address of Property Owner: Charles L. Gerlock  
4883 Canandaigua Farmington townline Rd, 14424
- B. Name and Address of Applicant: Charles L. Gerlock  
4883 Canandaigua Farmington townline Rd 14424
- C. Description of the proposed project: Subdivision of subject property from 1 parcel to 2 parcels.
- D. Project Location: 4883 Canandaigua-Farmington TL Rd.
- E. Tax Map #: 56.02-1-3.00
- F. Is any portion of the subject property currently being farmed? ☐ Yes ☐ No
- G. List the name and address of any land owner within the agricultural district that the land contains farm operations and is located within 500 feet of the boundary of the property upon which the project is proposed.

### Name / Address

- Kimberly Crowley & Mark Stryker - 1906 Co. Rd. 28, Farmington, NY 14425
- Peter & Julie Maslyn - 5000 Cdga-Farm TL Rd. Farmington, NY 14425
- Robert & June Gerlock - TM# 43-1-35.2

- H. Attach a tax map or other map showing the site of the proposed project relative to the location of farm operations identified in this Agricultural Data Statement.

\*\*\*\*\*

## FOR TOWN USE ONLY

**Circle Type of Application:**

Special Use Permit

Site Plan Approval

Subdivision

Use Variance

**Circle Review Authority:**

Zoning Board of Appeals

Planning Board

Town Board

**Notice Provision:**

Date when written notice of the application described in Part I was provided to the land owners identified in the Agricultural Data Statement.

\_\_\_\_\_

Date referral sent to the Ontario County Planning Department:

\_\_\_\_\_

\_\_\_\_\_  
Name of Official Completing Form

\_\_\_\_\_  
Date