

# Town of Canandaigua

5440 Routes 5 & 20 West

Canandaigua, NY 14424

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

TOWN OF CANANDAIGUA  
DEVELOPMENT OFFICE

RECEIVED

MAR 18 2016

FOR REVIEW

## PLANNING BOARD APPLICATION SITE PLAN / SPECIAL USE PERMIT

CPN

016-16

FOR: ☐ Sketch Plan Review

☐ One Stage Site Plan Approval (Preliminary & Final Combined)

☐ Two Stage Preliminary Site Plan Approval

☐ Two Stage Final Site Plan Approval

☒ Special Use Permit (New)

☐ Special Use Permit (Renewal)

Permission for on-site inspection for those reviewing application: ☒ Yes ☐ No

1. Name and address of the property owner: Randall Farnsworth 5375 Thomas Rd.  
Canandaigua NY 14424

Telephone Number of property owner: 394-0050

Fax # \_\_\_\_\_ E-Mail Address: see Venezia #5

**\*\*If you provide your e-mail address, this will be the primary way we contact you \*\***

2. Name and Address Applicant if not the property owner: Venezia & assoc  
5120 Laura Lane Canandaigua 14424

Telephone Number of Applicant: 396-3267 cell 314-6313

Fax # 585-396-0131 E-Mail Address: rocco@veneziasurvey.com

**\*\*If you provide your e-mail address, this will be the primary way we contact you \*\***

3. Subject Property Address: 2555 Rt 332

Nearest Road Intersection: Parkside Drive

Tax Map Number: 70.11-1-36

Zoning District: CC

4. Is the Subject Property within 500' of a State or County Road or Town Boundary? (If yes, the Town may refer your application to the Ontario County Planning Board.)

Please circle one:

YES

NO

5. Is the Subject Property within 500' of an Agricultural District? (If yes, an Agricultural Data Statement must be completed and submitted with this application.)

Please circle one:

YES

NO

(Continued on Back)

6. What is your proposed new project?

Convert former auto dealership into collision  
shop

7. If applying for Site Plan Approval or Special Use Permit, attach a completed Soil Erosion and Sedimentation Control Plan and Permit Application as described in Chapter 165 of the Town Code.

8. Are you requesting a waiver from a professionally prepared site plan?

Please circle one:

YES

NO

*If "yes" the property owner acknowledges and accepts full responsibility for any errors or misrepresentation depicted on the site plan and agrees to indemnify the Town of Canandaigua for any and all expenses, including reasonable attorney's fees, incurred by the Town as a result of any such error or misrepresentation.*

\_\_\_\_\_ (property owner's initials)

9. If no, attach a professionally prepared site plan as described in Chapter 220 Article VII (Site Plan Regulations) of the Town Code.

10. If a Special Use Permit is requested, attach plans and documentation as required in Chapter 220 Article VI (Regulations Governing Special Permit Uses) of the Town Code.

*The applicant / property owner is on notice that their personal/bank check submitted to the Town to meet the landscaping/soil erosion surety requirement(s) as noted in the Planning Board decision sheet will be deposited into a Town non-interest bearing bank account.*

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***Property Owner is responsible for any consultant fees\****  
***(Town Engineer, Town Attorney, etc.) incurred during the application process.***  
***\*See Town Clerk for current Fee Schedule***

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***I hereby acknowledge that I have reviewed all the questions contained in this application and certify that the information provided is accurate and complete to the best of my knowledge and ability. Finally, I hereby grant my designated person in Question #2 of this application form, permission to represent me during the application process.***

***\* [Signature]***  
(Signature of Property Owner)

***3/19/16***  
(Date)

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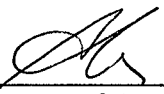
CPN #: 016-16

## Sketch Site Plan Checklist

Applicant: Venezia + assoc's for Farnsworth  
Project Address: 2555 Rte 332, T. of Canandaigua  
Tax Map #: 70.11-1-36 Zoning District: CC  
Project Description Narrative: Convert former auto dealership into collision shop

Sketch Plan Checklist – Chapter 220 §220-66	Shown on Plan by Applicant	Initial PRC Review	PRC Follow Up Review
A. The sketch plan shall be clearly designated as such and shall identify all existing and proposed:			
1) Zoning classification and required setbacks.	X		
2) Lot lines.	X		
3) Land features including environmentally sensitive features identified on the NRI.	X		
4) Land use(s).	X		
5) Utilities.	X		
6) Development including buildings, pavement and other improvements including setbacks.	X		
7) Location and nature of all existing easements, deed restrictions and other encumbrances.	X		
B. Sketch plans shall be drawn to scale.	X		
C. It is the responsibility of the applicant to provide a sketch plan that depicts a reasoned and viable proposal for development of the lot.			

I have reviewed my submitted application and drawings against the above noted criteria and hereby certify that the submitted application matches this check list.

  
Signature of Applicant / Representative

3/17/16  
Date

# Town of Canandaigua

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Canandaigua, NY 14424

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## SPECIAL USE PERMIT APPLICATION

CPN #: \_\_\_\_\_

1. Name and Address of Property Owner: Randall Farmsworth 5375 Thomas  
Canandaigua 14424  
Telephone Number of Property Owner: 394-0050
2. Name and Address of Applicant if not property owner: Venezia + assoc  
5120 Laura Lane Cde 14424  
Telephone Number of Applicant: 585-396-3267 cell 314-6313
3. Subject Property Address: 2555 Route 332  
Subject Property Tax Map Number: 70.00-1-36 Zoning District: CC

### Applying for a "NEW" Special Use Permit:

Proposed Use: Collision Shop / MOTOR VEHICLE REPAIR STATION

Section of Town Zoning Law Pertaining to Proposed Special Use: Chapter 220, Section 23 E

You must attach to this application (1) a detailed site plan in compliance with the Residential / Commercial Checklist; (2) a written statement detailing your compliance with the Town's zoning law; and (3) a statement of operations – a detailed description of your proposed business.

### Applying to "RENEW" an existing Special Use Permit:

Type of Existing Special Use Permit: \_\_\_\_\_

Date of Original Planning Board Approval: \_\_\_\_\_

Section of Town Zoning Law Pertaining to Existing Special Use: Chapter 220, Section \_\_\_\_\_

Are there any proposed changes to the existing Special Use Permit? Yes No

If yes, please explain: \_\_\_\_\_

You must attach to this application (1) a copy of the most recent site plan showing the Planning Board chairperson's signature at the time the existing special use permit was granted/last renewed; (2) a written statement regarding your compliance with all past Planning Board conditions of approval; and (3) photographs of the subject property showing your compliance with all past Planning Board conditions of approval.

The undersigned represents and agrees as a condition to the issuance of these permits that the development will be accomplished in accordance with the Town Zoning Law, the New York State Uniform Fire Prevention and Building Code, and the plans and specifications annexed hereto.

**PERMIT APPLICATION CANNOT BE ACCEPTED WITHOUT THE  
PROPERTY OWNER'S SIGNATURE.**

★ Owner's Signature: Rylandell J. Smith Date: 3/19/16

\*\*\*\*\*

**FOR OFFICE USE ONLY**

Application requires further review by Planning Board  
and/or Zoning Board of Appeals.

Yes

No

\_\_\_\_\_  
Zoning Officer

\_\_\_\_\_  
Date

Flood Zone \_\_\_\_\_

Floodplain Development Permit Required?

Yes

No

Permit Issued	Permit Number	Fee
Special Use Permit		\$50. <sup>00</sup>
Total Permit Fee		\$50. <sup>00</sup> (non-refundable)

\_\_\_\_\_  
Code Enforcement Officer

\_\_\_\_\_  
Date

# Town of Canandaigua

## DEMOLITION PERMIT APPLICATION

1. Name and Address of Property Owner: Randall Farnsworth  
5375 Thomas Rd, Canandaigua 14424
2. Telephone Number/ E-mail of Property Owner: 394-0050
3. Subject Property Address, Tax Map Number, and Zoning District: 2555 Rte 332, Cdga  
70.11-1-36 Z=CC
4. Is subject parcel residential or commercial property: Commercial
5. Are there any hazardous materials on site? YES ☒ NO If yes, how will they be removed? \_\_\_\_\_
6. Please explain demolition project and procedure: Front showroom area to be removed, Remaining bldg to be remodeled
7. Will there be any open burning? YES ☒ NO If yes, please explain: \_\_\_\_\_
8. How will the debris be removed? Dump truck
9. Is this structure historically significant? YES ☒ NO Has the Town Historian been contacted? YES ☒ NO

The property owner represents and agrees as a condition to the issuance of this permit to completely clean up the site and restore it to original condition.

Signature of Owner: Ry Randall Farnsworth

Date: 3/19/16

Please **DO NOT** send payment with this application.  
Payment shall not be made until the fee is determined & the permit is issued.

Contractor Name and Address: \_\_\_\_\_

Contractor Telephone Number/E-mail address: \_\_\_\_\_

Contractor Insurance Certificates Required: C-105.2 / U-26.3 and DB-120.1 or CE-200 / BP-1

Insurance shall provide coverage for demolition activity.

Permit # \_\_\_\_\_

Issue Date \_\_\_\_\_

Expiration Date \_\_\_\_\_