TOWN OF CANANDAIGUA E R DEVELOPMENT OFFICE	
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FEB 1 9 2016 R 5440 Routes 5 & 20 We	est
V Canandaigua, NY 1442	
Phone: (585) 394-1120 / Fax: (58	5) 394-9476
PLANNING BOARD APP	LICATION
SITE PLAN / SPECIAL US	
FOR: Sketch Plan Review	CPN UIS IW
One Stage Site Plan Approval (Preliminary & Fina	al 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 appli	cation: YesNo
1. Name and address of the property owner: Linda M	
4926 Wes	+ Lake Road Canandaique
Telephone Number of property owner: $396-99$	487
Fax # E-Mail Address: 6 ma	ndabandb 6 g mail 160
**If you provide your e-mail address	s, this will be the primary way we contact you **
2. Name and Address Applicant <i>if not the property owner</i> :	
Telephone Number of Applicant:	
Fax # E-Mail Address:	
**If you provide your e-mail address	s, this will be the primary way we contact you **
	ake Road (County Rd 16)
Nearest Road Intersection: <u>Devel Road</u>	•
Tax Map Number: $154.06 - 1 - 12.000$	Zoning District: RR3
4. Is the Subject Property within 500' of a State or County Roa	nd or Town Boundary? (If yes, the
Town may refer your application to the Ontario County Plan	nning Board.)
Please circle one: (YES) NO	
5. Is the Subject Property within 500' of an Agricultural Distric	ct? (If yes, an Agricultural Data
Statement must be completed and submitted with this applied	cation.)
Please circle one: YES (NO	(Continued on Back)

\6. \	What is your proposed new project? Land town form
<u>.</u>	PFR 1.5 2010 2 5440 Routes 5 & 20 West V A Concentrations, NY 14424
	TIZ-AL
o VI-s	Have the necessary building permit applications been included with this form? If not, please verify which forms are required to be submitted with the Development Office.
Section 8	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. (handing I tam I is grantfully I) is rought up I attached and
	Are you requesting a waiver from a professionally prepared site plan? (Is worth) throw that telegraph (1994) through the plan? Please circle one: YES NO
ov <u> </u>	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 is fees, incurred by the Town as a result of any such error or misrepresentation
1-1-1-1	If no, attach a professionally prepared site plan as described in Chapter 220 Article VII (Site
*** axiy 10	aPlan Regulations) of the Trown Godernian » រាក់សុមារប្រជាព្ធ ពេទ្ធTi* ។
117.	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. Incology to reduce apoliple i
!:_The **u0/s !{{}_{{}_{1}}}{}_{{}_{1}}}	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 the Communication of the Communication of
<u> </u>	Property Owner is responsible for any consultant fees the hold recount. (Town Engineer: Town Attorney; etc.) incurred during the application process. It is a second recount fee Schedule.
cert	ereby acknowledge that I have reviewed all the questions contained in this application and stiffs that the information provided is accurate and complete to the best of my knowledge and lity. Finally, I hereby grant my designated person in Question #2 of this application form, permission to represent me during the application process second
	nacl land (a) get an expert of the continuous of an about the continuous of the cont

RECE.	DWN OF CANANDAIGUA DEVELOPMENT OFFICE FEB 19 2016	R 5440 Routes 5 & 20 West Canandaigua, NY 14424 Phone: (585) 394-1120 / Fax: (585) 394-9476 E SPECIAL USE PERMIT APPLICATION
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E SPECIAL USE PERMIT APPLICATION
CPN#:013-16
Applying for a "NEW" Special Use Permit:
Proposed Use: Journst home
Section of Town Zoning Law Pertaining to Proposed Special Use: Chapter 220, Section
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: Lenda Malley Date: Doc 22, 20(5



Onanda by the Lake Bed and Breakfast 4926 West Lake Road Canandaígua, NY 14424 www.onandabythelake.com onandabandb@gmail.com 585-396-9487

January 7, 2016

Onanda by the Lake Bed & Breakfast is currently operating as a three bedroom bed & breakfast. It operates year round, 24 hours a day.

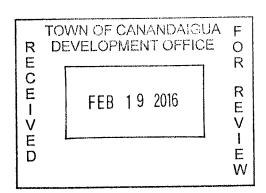
Three parking spaces are provided specifically for guests so there is a parking space for each room. Lighting is provided at the parking spaces and the walkways leading to the houses. Additionally, there are lights at each entrance to the house. Trash is kept in the garage.

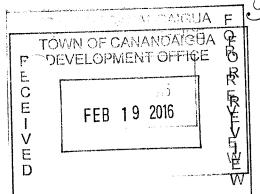
There is one small unlit sign at the base of the driveway which states "Onanda by the Lake Bed and Breakfast". A picture is attached.

Thank you for your consideration.

Linda Maltese

Innkeeper





Planning Board approval of waiver (date):

Town of Canandaigua

5440 Routes 5 & 20 West Canandaigua, NY 14424 (585) 394-1120 / Fax: (585) 394-9476

Established 1789

WAIVER REQUEST

PURSUANT TO TOWN CODE §220-65 (L)

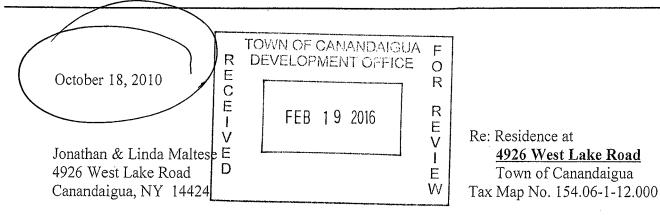
Applicant: Linda Maltese
Telephone #: 396-9487 Email: on an da band 66 q mail 10m
Telephone #: 396-9487 Email: on and a band b 6 g mail. 10m Subject Address: 4926 west lake Road Canandaigua Tax Map #: 154, 96-1-12,000 CPN #:
Tax Map #: 154,06 - 1-12,000 CPN #:
Waiver requested for: Notamina (repaid ster flam) (i.e. a professionally prepared site plan, landscaping requirements, etc.)
Reasons for Waiver:
1. <u>No site development</u>
2. not financially necessary
3
Additional Information:
I hereby request a waiver of requirement(s) as described above pursuant to Town Code § 220-65(L).
Signature of Applicant Jan 7, 2016 Date

Town of Canandaigua
5440 Routes 5 & 20 West DEVELOPMENT OFFICE O
Canandaigua, NY 14424 E
Established 1789 E MAR 17 2016 E V V I
WAIVER REQUESTE W
PURSUANT TO TOWN CODE §220-65 (L)
Applicant: Linda Maltese
Telephone #: 585-396-9487 Email & nanda band b @ qmail com
Telephone #: 585-396-9487 Email & nanda band b & gmail com Subject Address: 4926 West Lake Rd Cananda i qua
Tax Map #: 154.06-1-12.000 CPN #: 613-16
Waiver requested for: <u>Professionally prefaved site plan is not needed</u> . (i.e. a professionally prepared site plan, landscaping requirements, etc.)
Reasons for Waiver:
1.
2
3
Additional Information:
I hereby request a waiver of requirement(s) as described above pursuant to Town Code § 220-65(L).
Anda Maltere March 17, 2016 Signature of Applicant Date
Signature of Applicant Date

Planning Board approval of waiver (date): _

CANANDAIGUA LAKE WATERSHED COMMISSION

- * City of Canandaigua
- * Village of Rushville
- * Village of Palmyra
- * Village of Newark * Town of Gorham



Re: Residence at 4926 West Lake Road Town of Canandaigua

Dear Mr. & Ms. Maltese,

At your request, an onsite wastewater treatment (septic) system inspection was conducted on October 12, 2010 at the property referenced above. The property consists of a five (5) bedroom, two (2) bathroom residence. The expressed purpose of this inspection was to satisfy the Town's concerns over the request for a permit to operate a Bed & Breakfast. The findings of this inspection and an Onsite Training Network (OTN) "Site Report" inspection findings form follow.

WATER SUPPLY: The water supply for this residence is municipal, provided by the Town of Canandaigua.

WASTEWATER TREATMENT SYSTEM: The records in this office indicate that the leach lines were replaced and inspected by the Town of Canandaigua Code Enforcement Officer on May 28, 1988. This replacement system consisted of several leach lines of unequal length installed in a drop box style system. (See attached map.) This system installed consisted of five (5) drop boxes with five (5) leach lines 40 feet long, two (2) at 30 feet, one (1) at 55 feet, one (1) at 50 feet and one (1) at 45 feet for a total of 410 lineal feet of leach lines. The inspection of this system on October 12, 2010 revealed the following:

Interior Plumbing: An inspection of the basement revealed that all the wastewater drainpipes are connected to the septic tank. There does not appear to be a separate greywater system.

Septic Tank: The septic tank, which was pumped on the date of this inspection, is a 1,250-gallon concrete septic tank that is in good condition, including the inlet and outlet baffles.

Drop Box: The drop boxes were located and uncovered. The first drop box cover was opened and there was some evidence of sludge carryover in the box from the septic tank. This was also pumped out during this inspection. This revealed that the box was in fair condition as there was evidence of methane gas deterioration on the concrete.

OTN System Inspection Site Report - Inspection Findings

Check all that apply, and provide explanation	for	each	checked	item	in the	"Comme	nts /
Evaluation" section below:							

1. X System appears to have functioned adequately under past and present loading. There can be no assurance or guarantee of future performance for any period of time. Numerous factors, such as household water usage, leaking toilets, soil characteristics, and seasonal groundwater table fluctuation, as well as owner failure to manage and maintain the system, will affect its performance. (See comment below.)
 System/components indicate unacceptable operation or performance. 2.a Absence of treatment tank or other critical component(s)
3 Due to weather conditions, lack of information provided, and/or inaccessibility to all system components, the inspection results are incomplete.
4 System appears undersized, or has undersized components per current standards for new construction since 1990.
5 Recommend upgrade, expansion, and/or replacement of one or more components.
Comments/Evaluation:
1. It appears that this system is operating adequately as of the date of this inspection.
Since it is the desire to operate this residence as a three (3) bedroom Bed & Breakfast and one (1) bedroom for the owners, it does appear that this system, with a 1,250-gallon septic tank and 410 lineal feet of leach lines should be an adequate size for this hydraulic loading.
IMPORTANT The OTN System Inspection Site Report excludes components that are concealed or otherwise not observable. The Inspection Findings address the present condition of the system but in no way guarantee or warranty future performance.
Date: 10/20/10 Inspector Registration number: OTN-04900TN10301
Inspector's signature: 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
*The inspection report format is part of a standardized process used by those who

*The inspection report format is part of a standardized process used by those who have completed inspection training by the New York Onsite Wastewater Treatment Training Network (OTN).

c. David LeClair – Town of Canandaigua Code Enforcement Officer Jean Chrisman – Town of Canandaigua Zoning Officer



TOWN OF CANANDAIGUA DEVELOPMENT OFFICE Town of Canandaigha SIGN PERMIT APPLICATION

(Complete a separate form for <u>each</u> proposed sign)

MAR	1	7	2016
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<u>S</u>]	ECTION I – APPLICANT / PROPERTY INFORMATION:
1.	Subject Property Address: 4926 West Lake Rd ((ounty Rd 16) Canandaiged Subject Property Tax Map Number: 154.06-1-12.000 Zoning District:
2.	Name and address of Property Owner: 4926 West Lk. Rd. (dg a
2	Telephone Number / E-mail Address: 396-9487 / Onandab and b @ gmail com
3.	Name and Address of Applicant if not property owner:
	Telephone Number / E-mail Address:
4.	Briefly describe the current structures on and use of the property: 5 bedroom wood Structure tourist home
SI	ECTION II – EXISTING SIGNS
De	escribe All Existing Signs on the Property:

SECTION III – DIMENSIONS FOR PROPOSE	ZONING OFFICER TO COMPLETE				
DIMENSIONAL DESCRIPTION	APPLICANT TO COMPLETE	Allowed By Code	Variance Needed		
Square Footage of Display Area	18"×24"				
Ground Sign:					
Front Setback (measured from the road right-of-way)	15 ft.	15 ft			
Left Side Setback	75 ft	15 ft			
Right Side Setback	105 ft.	15 ft			
Height of Proposed Sign (ground to top of supporting structure)	5 ft.				
Building Sign:	Committee of the second of the				
Existing Building Frontage					
Height of Proposed Sign					

SECTION IV - DESCRIPTION DETAILS FOR PROPOSED SIGN

Proposed Wording of S	Sign: Onanda by	the Lake	Ded and	Breaktast
Type of Installation:	X Ground Sign	Buildi	ng Sign	Other (Explain)
Material:	Plastic	Metal	X_ Wood	Other
Illumination of Sign:	Back – Lit	Overhead	Ground Lit	Internal
	None	(Down Lighting)	(Up Lighting)	

SECTION V – SITE INFORMATION: Per § 220-80-A: A sketch site plan shall be attached to this permit application showing the following information:

- > Location of building, structure, or land to which or upon which the sign is to be erected; and
- Location and setbacks of any existing or proposed ground sign and the location and setbacks of all other signs and/or buildings on the property; and
- ➤ Location (drawn to scale not exceeding one inch equals 20 feet) and position of the sign on any buildings or structures, including a depiction of the building front view or elevation; and
- Detailed drawing or blueprint (to a scale not exceeding one inch equals one foot) showing the construction details of the sign, the lettering and/or pictorial matter and color of each, and the position of lighting or other extraneous devices; and
- Identification of all other signs existing on said parcel of land and whether each other sign is conforming or legally nonconforming.

Upon a determination of compliance, a sign permit shall be issued by the Zoning Officer. The applicant shall have 120 days from

the date of issuance to install the sign and submit a request for a certificate of sign compliance or the sign permit will expire.

Within five business days of the placement of any approved sign the applicant shall request for a certificate of sign compliance and provide two sets of photographs of the site and the sign to the Development Office. Upon verification of compliance with this

chapter and/or previous Town approval(s), the Zoning Officer shall issue a certificate of sign compliance.

Should the Zoning Officer, upon inspection, find the sign not to be in compliance with this chapter or previous Town approval(s), the applicant shall be so notified by certified mail. The applicant shall, within 30 days from the date of the notification letter, correct the cited deficiencies and notify the Zoning Officer of the corrections. In no event shall said thirty day period extend the

one-hundred twenty day validation period for the sign permit prescribed within this subsection.

SECTION VI - CONTRACTOR INSURANCE INFORMATION:

General Contractor: Jan Language			
Address: <u>6491 R+ J 20 A J J</u>			
Telephone: 5 85-237-2620			
CONTRACTOR INSURANCE CERTIFICATES REC	UIRED		
□ C-105.2 / U-26.3 and DB-120.1 <u>or</u> □ CE-2	00 / BP-1		
The undersigned represents and agrees as a condition to the issuance of thes accomplished in accordance with the Town Zoning Law, the New York State Uniapprovals/conditions described on the ZBA / PB decision sheet, and the plans and state of the conditions described on the ZBA is decision.	form Fire Prev	ention and l	Building Code,
PERMIT CANNOT BE ISSUED WITHOUT PROPERTY OW.	NER SIGNATUR	LE	
Please <u>DO NOT</u> send payment with this appli	cation.		
	Date: 3	15/16	
**** For Office Use Only ****			
Proposed signage complies with the Town's Sign regulations.	Yes	No	
Planning Board and/or Zoning Board of Appeals requirements have been met.	Yes	No	N/A
Zoning Officer		Date	
Permit # Total Permit Fee	<u>\$150.00</u> per sig	n (Non-Refu	ındable)

