

Village of Ballston Spa

66 FRONT STREET

Ballston Spa, NY 12020

518-885-5711

April 3, 2024

To: Chris Pitts
91 Pleasant Street
Ballston Spa, NY 12020

Re: Application for construction of an accessory building (garage) located at 91 Pleasant Street, Ballston Spa, NY 12020.

Tax ID: 216.33-1-35

Dear Mr. Pitts:

Attached please find your denied application to construct an accessory building (garage) on property located at 91 Pleasant Street, Ballston Spa, NY.

Application is out of compliance with Village of Ballston Spa Code 205-25 items B(4) and A(2)(a).

B(4) Maximum height of accessory building shall be one story or 15', whichever is greater.

A(2)(a) Side yard, 12' from any side lot line.

If you wish to move forward with this project, please submit the enclosed Zoning Board of Appeals application to the Building Department Clerk.

Sincerely,



Dave LaFountain
Code Enforcement Officer
Phone: (518)885-3167
Email: buildinginspector@villageofballstonspa.org
Cc: Anna Stanko

ALL CONSTRUCTION TO BE IN COMPLIANCE WITH "NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE" AND "VILLAGE OF BALLSTON SPA ZONING ORDINANCE"

1. GENERAL INFORMATION

PDD/Subdivision Name: _____

Tax Map No: 216.33-1-35 Historic District: Yes No Ownership: Private Public

2. APPLICANT

Name: CHRIS PITTS Position: OWNER Email: CHRIS@ELEVATECYCLER.COM
 Address: 91 PLEASANT ST City: BALLSTON SPA State: NY Zip Code: 12020
 Telephone: 510 799 5008 Ext: _____

3. PROPERTY OWNER

Name: _____ Position: _____ Email: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Telephone: _____ Ext: _____ Liability Carrier: _____ Policy #: _____

4. PROPOSED CONSTRUCTION LOCATION

Street Number: 91 Street Name: PLEASANT ST BALLSTON SPA, NY 12020
 Apt. Number: _____ Zoning District: R-1

5. USE

Existing Use: _____ Proposed Use: SHED/GARAGE

6. TYPE OF WORK

New Addition Change of Tenant Other

Brief Description of proposed work:
CONSTRUCT A 2 STORY 16x20 GARAGE
FOR STORAGE USE

SETBACKS (in feet)	
FRONT	76'
BACK	255.09
LEFT SIDE	6.26 -12
RIGHT SIDE	35.3

7. PROPOSED BUILDING

Height: 25' Actual Stories: 2 Total Size: 640 square feet Style: Gable
 Type of Frame: wood Type of Foundation: Slab Number of Rooms (excl. bathrooms): _____ Number of Bathrooms: _____
 Number of Bedrooms: _____ Primary Heat System: _____ Type of Fuel: _____ Number of Fireplaces: _____ Number of Wood Stoves: _____
 Sprinklers: Yes No Central Air Conditioning: Yes No Garage: Attached - No. of Cars: _____ Detached - No. of Cars: _____

8. ARCHITECT / ENGINEER

Name: _____ Position: _____ Organization: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Telephone: _____ Ext: _____ Professional License No.: _____ State: _____

9. CONTRACTOR

Name: _____ Position: _____ Organization: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Telephone: _____ Ext: _____ Liability Carrier: _____ Policy No.: _____

10. NAMES, ADDRESSES AND TELEPHONE NUMBERS OF ALL SUBCONTRACTORS:

11. COST AND FEES

Estimated Project Cost \$ _____ Building Permit Fee \$ _____

12. PROVIDED WITH THIS APPLICATION

Two (2) Complete Sets of Plans Plot Plan Energy Audit Materials List Electrical Layout Plumbing Layout

13. AFFIDAVIT

I swear to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the BUILDING CODE, the ZONING ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Signature: [Signature] DATE: 4-1-24
 (Owner or Owner's Agent)

BELOW THIS LINE TO BE COMPLETED BY THE BUILDING DEPARTMENT

ACTION ON APPLICATION

Permit Granted Date: _____ Signed: _____

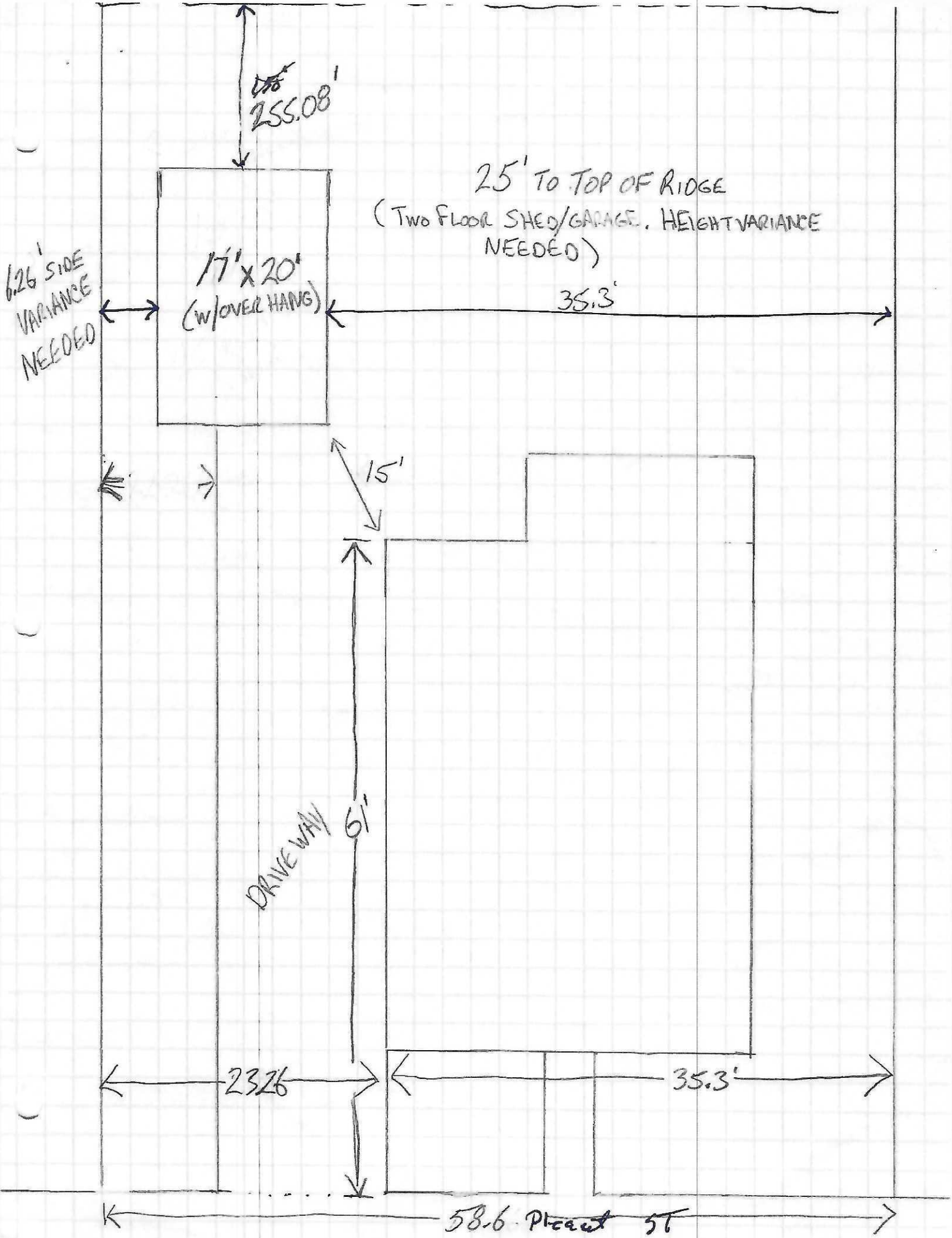
Permit Denied Date: APR 01 2024 Signed: [Signature]

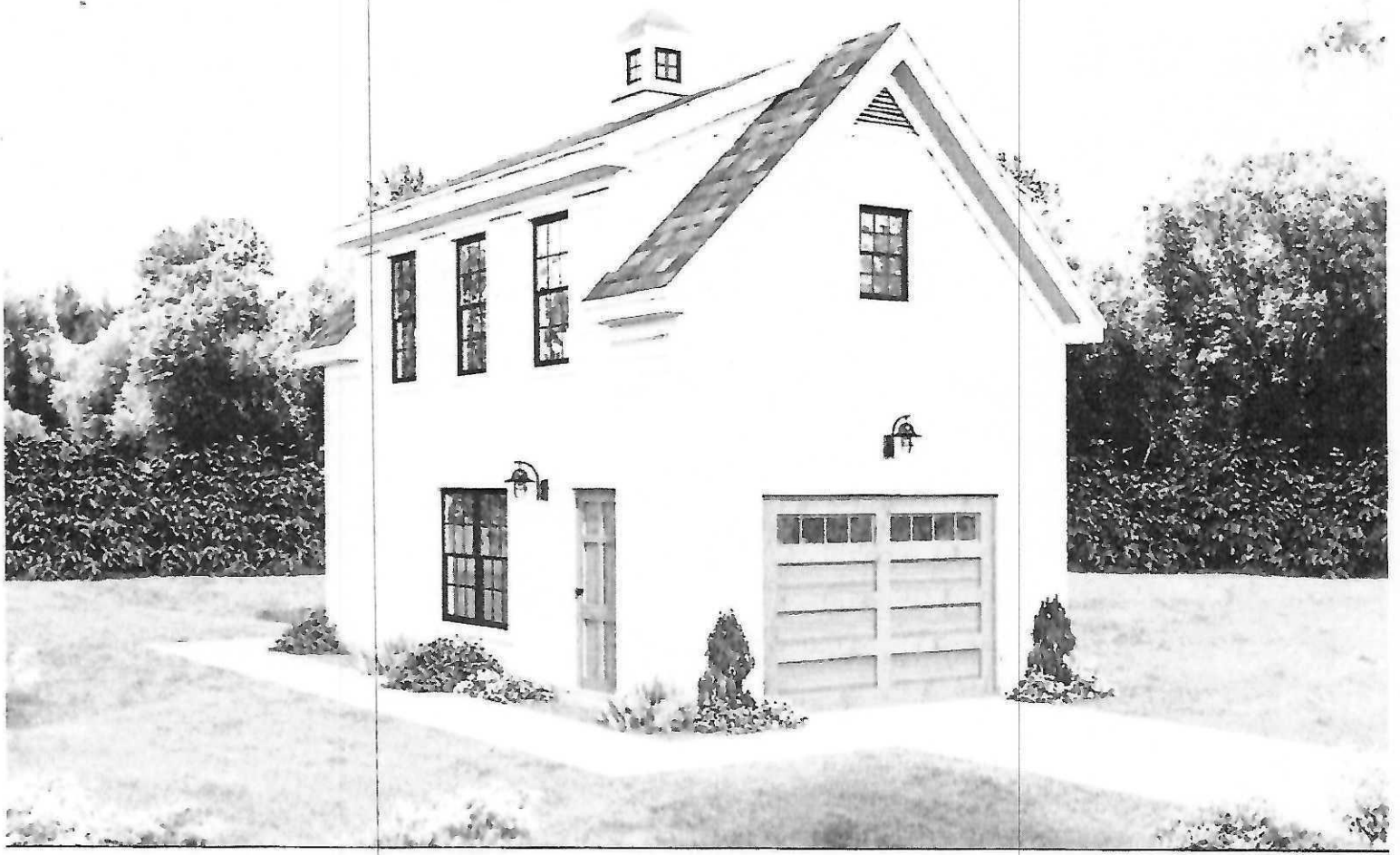
Reason for Denial: _____

Variance/Special Permit Granted By: _____ Date: _____

Certificate of Occupancy Granted By: _____ Date: _____

Certificate of Compliance Granted By: _____ Date: _____





Engage Slab -
Engage Bulky Pad

Village of Ballston Spa
Zoning Board of Appeals
66 Front Street
Ballston Spa, NY 12020
518.885.5711

Instructions

APPEAL TO THE ZONING BOARD FOR AN INTERPRETATION, USE VARIANCE AND/OR VARIANCE EXTENSION

APPLICATION REQUIREMENTS

1. Eligibility: To apply for relief from the Village's Zoning Ordinance, an applicant must be the property owner(s) or lessee or have an option to lease or purchase the property in question. The Zoning Board of Appeals (ZBA) shall not accept any application for appeal that includes a parcel which has a written violation from the Building Inspector that is not the subject of the application.

2. Complete Submissions: Applicants are encouraged to work with Village staff to ensure a complete application. The ZBA will only consider completed applications that contain 1 original and 1 digital of the following:

___ Completed application pages 1 and 8, the pages relating to the requested relief (p.2 for interpretation or extension, pp. 3-5 for use variance, pp. 6-7 for area variance) and any additional supporting materials/documentation.

___ Completed SEQR Environmental Assessment Form - short or long form as required by action. http://www.dec.ny.gov/docs/permits_ej_operations_pdf/seafpartone.pdf

___ Detailed "to scale" drawings of the proposed project - folded and no larger than 24" x 36". Identify all existing and proposed structures, lot boundaries and dimensions, and the relationship of structures to the lot dimensions. Also, include any natural or manmade features that might affect your property (e.g., drains, ponds, easements, etc.).

3. APPLICATION FEE (NON-REFUNDABLE): Make checks payable to the "Village of Ballston Spa". Fees are cumulative and required for each request below.

___ Interpretation \$500.

___ Use variance \$200.

Area variance Residential use/property \$100. Non-residential use/property \$300.

___ Extensions \$150.

Check Village website www.villageofballstonspa.org for application meeting Dates.

VILLAGE OF BALLSTON SPA

66 Front St
Ballston Spa, NY 12020
Ph: (518)885-5711 Fax: (518)885-0512

APPLICATION FOR:
APPEAL TO THE ZONING BOARD FOR AN
INTERPRETATION, USE VARIANCE, AREA VARIANCE AND/OR VARIANCE EXTENSION

	<u>APPLICANT(S)</u>	<u>OWNER(S) (if not applicant)</u>	<u>ATTORNEY/AGENT</u>
Name	Suzanne & Christopher Pitts		
Address	91 Pleasant St		
	Ballston Spa, NY 12020		
Phone	518-605-4268, 518-788-5888		
Email	Sac@elevatecycles.com	chris@elevatecycles.com	

*An applicant must be the property owner, lessee, or one with an option to lease or purchase the property in question.

Applicant's interest in the premises: Owner Lessee Under option to lease of purchase

PROPERTY INFORMATION

- Property Address/Location: 91 Pleasant St Tax Parcel No: 216.33-1-35
- Date acquired by current owner: 2003
- Zoning District when purchased: R1
- Present use of property: Single residence
- Current Zoning District: R1
- Has a previous ZBA application/appeal been filed for this property?
 - Yes (when? 2008, for what? INCREASED LOT SIZE)
 - No
- Is property located within (check all that apply):
 - Historic District
 - Architectural Review District
 - 500' of a State Park, city boundary, or county/state highway?

8. Brief description of proposed action:

Construct a 2 story 16x20 garage
for storage use

9. Is there a written violation for this parcel that is not the subject of this application? ___ Yes / No

10. Has the work, use or occupancy to which this appeal relates already begun? ___ Yes / No

11. Identify the type of appeal you are requesting (*check all that apply*):

- INTERPRETATION (p.2)
- VARIANCE EXTENSION (p.2)
- USE VARIANCE (pp.3-6)
- AREA VARIANCE (pp. 6-7)

FEES: Make checks payable to the "VILLAGE OF BALLSTON SPA". Fees are cumulative and required for each request below:

- Interpretation \$500
- Use variance \$200
- Area variance
 - Residential use/property: \$100
 - Non-residential use/property: \$300
- Extensions: \$150

VA

INTERPRETATION - PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

1. Identify the section(s) of the Zoning Ordinance for which you are seeking an interpretation:

Section(s) _____

2. How do you request that this section be interpreted?

3. If interpretation is denied, do you wish to request alternative zoning relief? ___ Yes ___ No

4. If the answer to #3 is "yes", what alternative do you request? ___ Use Variance ___ Area Variance

NA

EXTENSION OF A VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

- 1. Date original variance was granted: _____
- 2. Type of variance granted? ____ Use ____ Area
- 3. Date original variance expired: _____

4. Explain why the extension is necessary. Why wasn't the original timeframe sufficient:

When requesting an extension of time for an existing variance, the applicant must prove that the circumstances upon which the original variance was granted have not changed. Specifically demonstrate that there have been no significant changes on the site, in the neighborhood, or within the circumstances upon which the original variance was granted:

USE VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

A use variance is requested to permit the following: _____

For the Zoning Board to grant a request for a use variance, an applicant must prove that the zoning regulations create an unnecessary hardship in relation to that property. In seeking a use variance, New York State law requires an applicant to prove all four of the following "tests".

- 1. That the applicant cannot realize a reasonable financial return on initial investment for any currently permitted use on the property. "Dollars & cents" proof must be submitted as evidence. The property in question cannot yield a reasonable return for the following reasons:

NA

A. Submit the following financial evidence relating to this property (attach additional evidence as needed):

1. Date of purchase: _____ Purchase amount: \$ _____

2. Indicate dates and costs of any improvements made to property after purchase:

<u>Date</u>	<u>Improvement</u>	<u>Cost</u>

3. Annual maintenance expense: \$ _____

4. Annual taxes: \$ _____

5. Annual income generated from property: \$ _____

6. City assessed value: \$ _____

7. Appraised Value: \$ _____ Appraiser: _____ Date: _____

Appraisal Assumptions: _____

B. Has property been listed for sale with the Multiple Listing Service (MLS)?

___ Yes If "yes", for how long?

___ No

1. Original listing date(s): _____ Original listing price: \$ _____

If listing price was reduced, describe when and to what extent:

2. Has the property been advertised in the newspapers or other publications? ___ Yes ___ No
If yes, describe frequency and name of publications:

3. Has the property had a "For Sale" sign posted on it? ___ Yes ___ No

If yes, list dates when sign was posted:

4. How many times has the property been shown and with what results?

2. That the financial hardship relating to this property is unique and does not apply to a substantial portion of the neighborhood. Difficulties shared with numerous other properties in the same neighborhood or district would not satisfy this requirement. This previously identified financial hardship is unique for the following reasons:

3. That the variance, if granted, will not alter the essential character of the neighborhood. Changes that will alter the character of a neighborhood or district would be at odds with the purpose of the Zoning Ordinance. The requested variance will not alter the character of the neighborhood for the following reasons:

IVA

4. That the alleged hardship has not been self-created. An applicant (whether the property owner or one acting on behalf of the property owner) cannot claim "unnecessary hardship" if that hardship was created by the applicant, or if the applicant acquired the property knowing (or was in a position to know) the conditions for which the applicant is seeking relief. The hardship has not been self-created for the following reasons:

Multiple horizontal lines for handwritten response.

AREA VARIANCE-PLEASE ANSWER THE FOLLOWING (add additional information as necessary):

The applicant requests relief from the following Zoning Ordinance article(s) _____

<u>Dimensional Requirements</u>	<u>From</u>	<u>To</u>
height	15'	25'
side yard	12'	6'

Other:

To grant an area variance, the ZBA must balance the benefits to the applicant and the health, safety, and welfare of the neighborhood and community, taking into consideration the following:

1. Whether the benefit sought by the applicant can be achieved by other feasible means. Identify what alternatives to the variance have been explored (alternative designs, attempts to purchase land, etc.) and why they are not feasible.

It cannot be achieved by other means. The layout of the house and driveway make it difficult to place the structure further into the property.

2. Whether granting the variance will produce an undesirable change in the character of the neighborhood or a detriment to nearby properties. Granting the variance will not create a detriment to nearby properties or an undesirable change in the neighborhood character for the following reasons:

It will not create a detriment to the neighborhood or nearby properties - the structure will enhance our property thereby enhancing the neighborhood.

3. Whether the variance is substantial. The requested variance is not substantial for the following reasons:

We are seeking a variance of 6' of the property line - which is not substantial in its entirety - many homes of this age are closer to the side property line.

4. Whether the variance will have adverse physical or environmental effects on neighborhood or district. The requested variance will not have an adverse physical or environmental effect on the neighborhood or district for the following reasons:

It will not have an adverse effect - it will enhance our property and the neighborhood by improving the main house.

5. Whether the alleged difficulty was self-created (although this does not necessarily preclude the granting of an area variance). Explain whether the alleged difficulty was or was not self-created:

It was self created because we are requesting a 2 story structure and a specified size to complement the main house.

DISCLOSURE


Does any Village of Ballston Spa officer, employee, or family member thereof have a financial interest (as defined by General Municipal Law Section 809) in this application? No Yes if "yes", a statement disclosing the name, residence and nature and extent of this interest must be filed with this application.

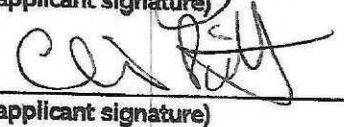
APPLICANT CERTIFICATION

I/We, the property owner(s), or purchaser(s)/lessee(s) under contract, of the land in question, hereby request an appearance before the Zoning Board of Appeals.

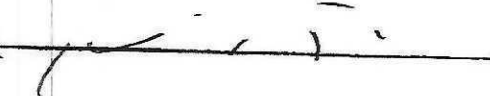
By the signature(s) attached hereto, I/we certify that the information provided within this application and accompanying documentation is, to the best of my/our knowledge, true and accurate. I/We further understand that intentionally providing false or misleading information is grounds for immediate denial of this application.

Furthermore, I/we hereby authorize the members of the Zoning Board of Appeals and designated Village of Ballston Spa staff to enter the property associated with this application for purposes of conducting any necessary site inspections relating to this appeal.

 Date: 4-1-24
(applicant signature)

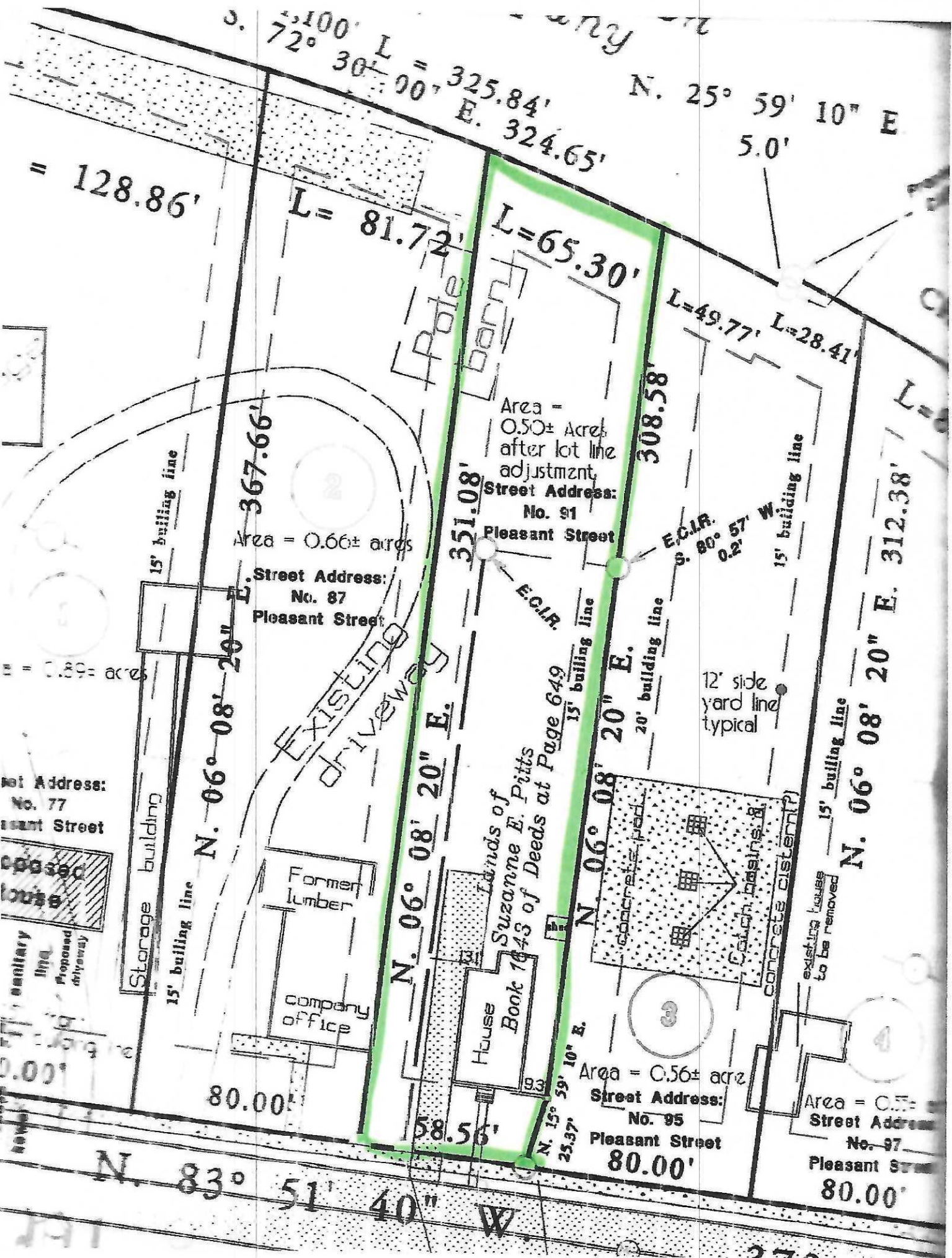
 Date: 4-1-24
(applicant signature)

If applicant is not the currently the owner of the property, the current owner must also sign.

Owner Signature:  Date: _____

Owner Signature: _____ Date: _____

N. 25° 59' 10" E
L = 325.84'
E. 324.65'
L = 128.86'



= 128.86'

L = 81.72'

L = 65.30'

L = 49.77' L = 28.41'

Area = 0.66± acres
Street Address:
No. 87
Pleasant Street

Area = 0.50± Acres
after lot line
adjustment
Street Address:
No. 91
Pleasant Street

E.C.R.
S. 80° 57' W
0.2'

Lot Address:
No. 77
Pleasant Street

Proposed
house

Sanitary
line
Proposed
driveway

Storage building

80.00'

N. 06° 08' 20" E

N. 83° 51' 40" W

EXISTING
DRIVEWAY

N. 06° 08' 20" E

Lands of
Suzanne E. Pitts
Book 1643 of Deeds at Page 649

House
Book 1643 of Deeds at Page 649

58.56'

N. 15° 59' 10" E
25.37'

Area = 0.56± acre
Street Address:
No. 95
Pleasant Street
80.00'

concrete pad

concrete cistern(?)

12' side
yard line
typical

existing house
to be removed

Area = 0.55±
Street Address:
No. 97
Pleasant Street
80.00'

N. 06° 08' 20" E

L = 312.38'

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							
Name of Action or Project: ADDITION OF GARAGE		CHRIS PITTS					
Project Location (describe, and attach a location map): 91 PLEASANT ST BALLSTON SPA, NY 12020							
Brief Description of Proposed Action: CONSTRUCTION OF GARAGE (2-story) FOR STORAGE.							
Name of Applicant or Sponsor: CHRIS PITTS		Telephone: 518 788 5888					
Address: 91 PLEASANT ST.		E-Mail: CHRIS@ELEVATECYCLES.COM					
City/PO: BALLSTON SPA		State: NY	Zip Code: 12020				
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.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
3.a. Total acreage of the site of the proposed action?		.73 acres					
b. Total acreage to be physically disturbed?		320 SQ FT acres					
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.73 acres					
4. Check all land uses that occur on, adjoining and near the proposed action.							
<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							

5. Is the proposed action,		NO	YES	N/A
a. A permitted use under the zoning regulations?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<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"/>	<input type="checkbox"/>
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, identify: _____		NO	YES	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?		NO	YES	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If the proposed action will exceed requirements, describe design features and technologies: _____		NO	YES	
10. Will the proposed action connect to an existing public/private water supply?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
If No, describe method for providing potable water: _____		NO	YES	
11. Will the proposed action connect to existing wastewater utilities?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If No, describe method for providing wastewater treatment: _____		NO	YES	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?		<input checked="" type="checkbox"/>	<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	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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 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"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?		NO	YES	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources?		NO	YES	
If Yes,		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			
If Yes, briefly describe: _____				

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<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"/>	<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"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>CHRIS PUTTS</u> Signature: <u><i>[Handwritten Signature]</i></u>	Date: <u>4/1/24</u>	

PRINT FORM