

ASSESSOR
BUILDING INSPECTOR
PLUMBING INSPECTOR

TOWN OF LOCKPORT

6200 Robinson Road
Lockport, New York 14094



OFFICE OF LANDS,
BUILDING, AND CODE ENFORCEMENT

FIRE BUREAU
PLANNING BOARD
ZONING BOARD

(716)439-9526
439-9527
FAX 439-9532

PLANNING BOARD AGENDA

Work Session:

DATE: May 9, 2012

TIME: 4:00 PM

PLACE: 6560 Dysinger Rd.

Meeting Date:

DATE: May 16, 2012

TIME: 7:00 PM

PLACE: 6560 Dysinger Rd.

SCHEDULED AGENDA FOR MEETING TO DATE

1. Approval of the April 18, 2012 Minutes.
2. 6719 S. Transit Rd. – SBL# 152.03-1-27 – Elmwood Real Estate, Owner -Craig Heidelbergman proposing 4-bay car wash. PUBLIC HEARING required for Special Use Permit, N.C. approval, architectural review site plan. Variances required.
3. 5377 Upper Mtn. Rd. – SBL# 108.00-1-33.12 – C. Mathews/R. Hodge, Owners
Proposing to subdivide 20.8 acres. Special Use Permit, PUBLIC HEARING required.
4. 6121 Robinson Rd. – SBL# 138.09-1-2.12 – Alterra Development/Dunn Tire –
Proposing 2-bay addition on north side of building.

Property Owner Name: ELMWOOD REAL ESTATE GROUP INC
 Property Address Location: 6719 Transit Rd
 Tax Map Number (SBL): 152.03-1-27
 Permit: 2012-00076 Received: 3/16/2012 Issued: 3/16/2012 Expire: 3/16/2013

Permission is hereby granted to the applicant/owner:

----- Applicant -----		-- General Contractor -- GE	
Name:	Elmwood Real Estate Group Inc	Craig Heidelman	
Addr:	606 N French Rd Ste 8	6719 Transit RD.	
C,S,Z:	Amherst, NY 14228	Lockport, NY 14094	
Phone:	Work:	(301) 639-2273	Ins Exp
Locat:	Transit Rd 6719	Insurance	
Type:	0650 PLANNING BOARD REVIEW FEE	Processed By: BMB	Inspector: BMB
Cost:	0 Sq Ft: 0	Own: PR	HU: 0 BU: 1

Desc: Magic Mist Auto Wash Informational
 Line 2: Requires Special Use Permit, N.C. Planning Board, Setback Variances
 Line 3:
 Bld Fee: 0.00 C/O Fee: 0.00 Sewer Fee: 150.00 Total Fee: \$150.00
 Outcome 30 BP APPLICATION GRANTED ID:1E+04

Code	Required Approvals for Permit:	2012-00076	OC	Date	Who
PB	PLANNING BOARD		10		

Fee Date	Code	Fees for Permit Number: 2012-00076	Fees
3/16/2012	0650	PLANNING BOARD REVIEW FEE	\$150.00
		Total Fees:	\$150.00

Property Owner Name: ELMWOOD REAL ESTATE GROUP INC
Property Address Location: 6719 Transit Rd
Tax Map Number: 152.03-1-27

1. PROJECT DESCRIPTION:

Magic Mist Auto Wash Informational
Requires Special Use Permit, N.C. Planning Board, Setback Variances

2. STRUCTURE USE: 0650 PLANNING BOARD REVIEW FEE

3. TOWN OF LOCKPORT Building Department based on our limited examination, and with our comments, shall not be construed as indicating the plans and specifications are in full compliance with all applicable codes.

Approval by any TOWN OF LOCKPORT Board does not relieve the applicant of obtaining other needed approvals from other agencies.

This Permit is not valid until Certificate of Insurance is filed with Building Inspector.

4. All Construction, Erection and Use shall comply with Current Zoning Ordinances, Building Codes, Subdivision Regulations. All Construction and Use shall meet New York State Building Construction Code Provisions.

5. This Building Permit is herewith INVALID or is subject to a stop order if, subsequently to its date of issue, The Structure or "Use" is adjudged to be in serious conflict with provision(s), of current ordinance(s), use, code(s), Subdivision or other governing regulations.

6. Cessation of activities on subject premises shall become effective with the invalidation of this Building Permit by the Issuing Officer. THE APPLICANT OF THE PERMIT SHALL BE SO NOTIFIED.

7. The undersigned states that this blue print is in compliance with the N. Y. S. Energy Conservation Construction Code, and will be built accordingly.

8. Failure to obtain certificate of occupancy may render invalid any or all portions of this permit.

9. ACCEPTED: _____ DATE: _____

(Contractor - Builder - Owner)

10. ACCEPTED: _____ DATE: _____

(Building Inspector and Zoning Officer)

Property Owner Name: MATHEWS COLLEEN ANN
 Property Address Location: 5377 Upper Mt Rd
 Tax Map Number (SBL): 108.00-1-33.12
 Permit: 2012-00064 Received: 3/14/2012 Issued: 3/14/2012 Expire: 3/14/2013

Permission is hereby granted to the applicant/owner:

----- Applicant -----		-- General Contractor -- GE	
Name: Mathews Colleen Ann		Mathews Colleen Ann	
Addr: 5377 Upper Mt Rd		5377 Upper Mt Rd	
C,S,Z: Lockport, NY 14094		Lockport, NY 14094	
Phone: (716) 433-5164	Work:	(716) 433-5164	Ins Exp
Locat: Upper Mt Rd 5377		Insurance	
Type: 0650 PLANNING BOARD REVIEW FEE		Processed By: BMB	Inspector: BMB
Cost: 0	Sq Ft: 0	Own: PR	HU: 0 BU: 1

Desc: Proposing to subdivide 20.8 Acres

Line 2:

Line 3:

Bld Fee: 0.00 C/O Fee: 0.00 Sewer Fee: 150.00 Total Fee: \$150.00
 Outcome 30 BP APPLICATION GRANTED ID:1E+04

Code	Required Approvals for Permit:	2012-00064	OC	Date	Who
PB	PLANNING BOARD		10		

Fee Date	Code	Fees for Permit Number: 2012-00064	Fees
3/14/2012	0650	PLANNING BOARD REVIEW FEE	\$150.00
		Total Fees:	\$150.00

Property Owner Name: MATHEWS COLLEEN ANN Property Address Location: 5377 Upper Mt Rd Tax Map Number: 108.00-1-33.12

1. PROJECT DESCRIPTION: Proposing to subdivide 20.8 Acres

2. STRUCTURE USE: 0650 PLANNING BOARD REVIEW FEE

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9. ACCEPTED: _____ DATE: _____

(Contractor - Builder - Owner)

10. ACCEPTED: _____ DATE: _____

(Building Inspector and Zoning Officer)

Property Owner Name: ALTERRA DEV CORP
 Property Address Location: 6121 Robinson Rd
 Tax Map Number (SBL): 138.09-1-2.12

Permit: 2012-00172 Received: 5/1/2012 Issued: 5/1/2012 Expire: 5/1/2013

Permission is hereby granted to the applicant/owner:

----- Applicant -----		-- General Contractor -- GE	
Name: Alterra Dev Corp		Alterra Dev Corp	
Addr: 625 Delaware Ave		625 Delaware Ave	
C,S,Z: Buffalo, NY 14202		Buffalo, NY 14202	
Phone: (716) 884-7900	Work: (716) 998-4872	(716) 884-7900	Ins Exp
Locat: Robinson Rd 6121		Insurance	
Type: 0650 PLANNING BOARD REVIEW FEE		Processed By: BMB	Inspector: BMB
Cost: 0	Sq Ft: 0	Own: PR	HU: 0 BU: 1

Desc: 2 Bay addition on north side of building

Line 2:

Line 3:

Bld Fee: 0.00 C/O Fee: 0.00 Sewer Fee: 150.00 Total Fee: \$150.00
 Outcome 30 BP APPLICATION GRANTED ID:1E+04

Code	Required Approvals for Permit:	2012-00172	OC	Date	Who
PB	PLANNING BOARD		10		

Fee Date	Code	Fees for Permit Number: 2012-00172	Fees
5/1/2012	0650	PLANNING BOARD REVIEW FEE	\$150.00
		Total Fees:	\$150.00

Property Owner Name: ALTERRA DEV CORP Property Address Location: 6121 Robinson Rd Tax Map Number: 138.09-1-2.12

- 1. PROJECT DESCRIPTION: 2 Bay addition on north side of building

2. STRUCTURE USE: 0650 PLANNING BOARD REVIEW FEE

3. TOWN OF LOCKPORT Building Department based on our limited examination, and with our comments, shall not be construed as indicating the plans and specifications are in full compliance with all applicable codes.

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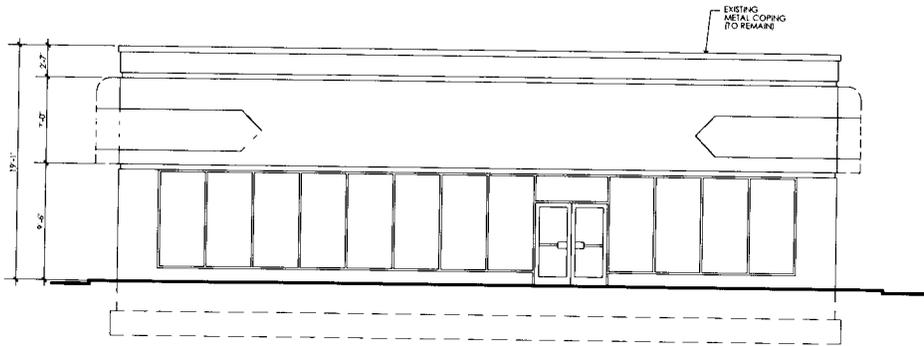
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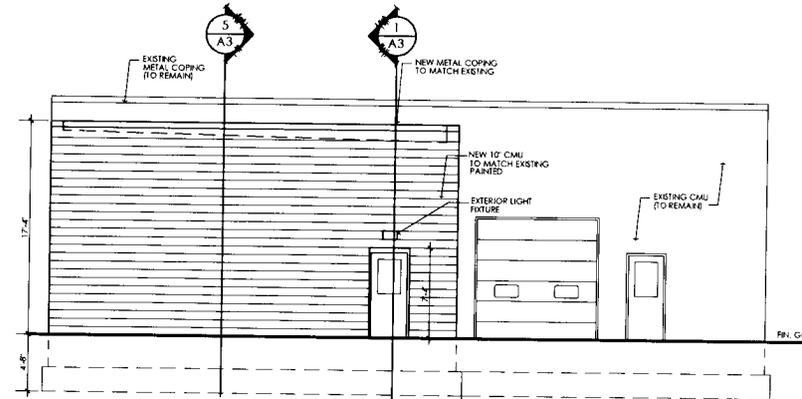
8. Failure to obtain certificate of occupancy may render invalid any or all portions of this permit.

9. ACCEPTED: _____ DATE: _____ (Contractor - Builder - Owner)

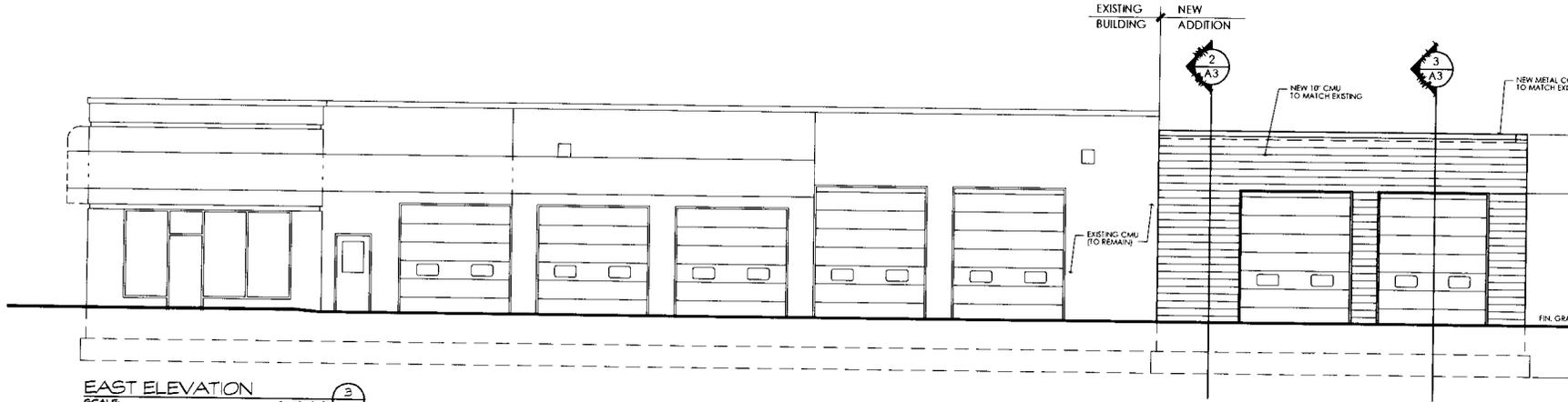
10. ACCEPTED: _____ DATE: _____ (Building Inspector and Zoning Officer)



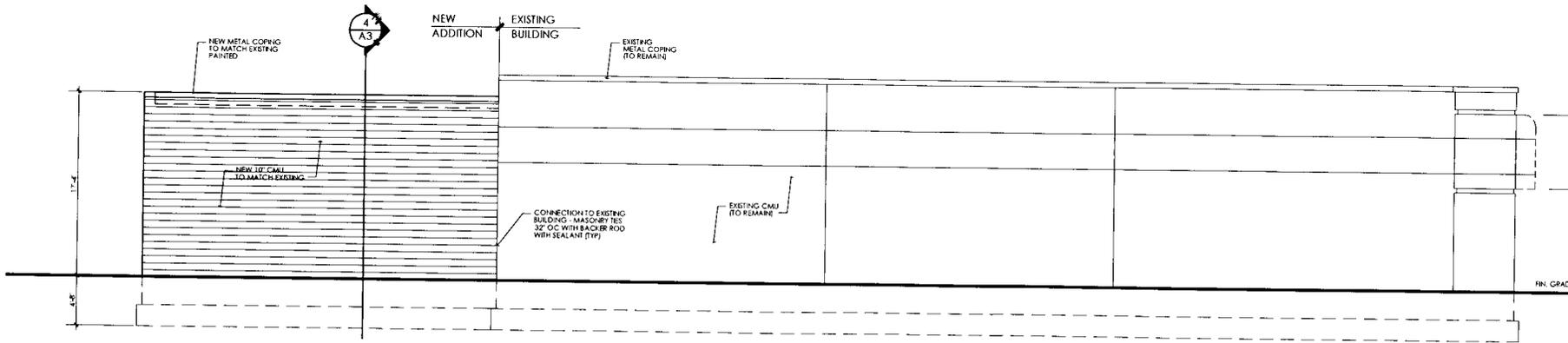
SOUTH ELEVATION
SCALE: 3/16" = 1'-0" (A2)



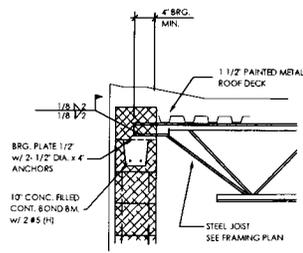
NORTH ELEVATION
SCALE: 3/16" = 1'-0" (A2)



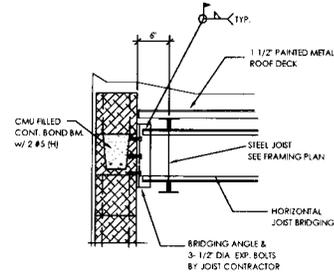
EAST ELEVATION
SCALE: 3/16" = 1'-0" (A2)



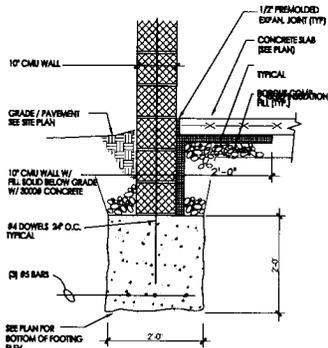
WEST ELEVATION
SCALE: 3/16" = 1'-0" (A2)



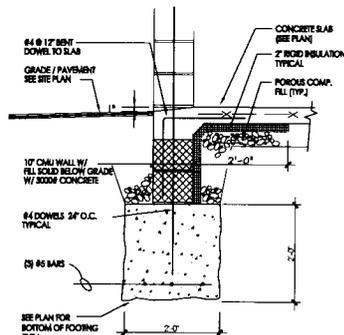
SECTION SCALE 1" = 1'-0" (1)



SECTION SCALE 1" = 1'-0" (2)

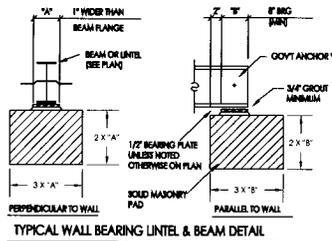


SECTION SCALE 1" = 1'-0" (3)



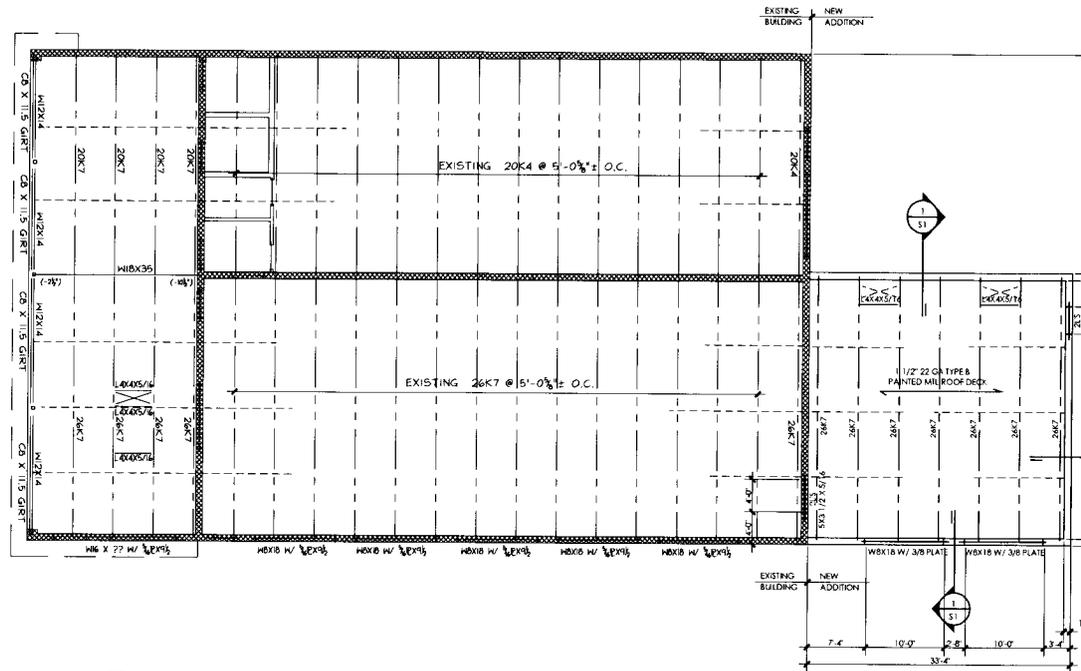
SECTION SCALE 1" = 1'-0" (4)

* NOTE: CIP ANGLES MAY BE USED IN LIEU OF GOVT ANCHORS

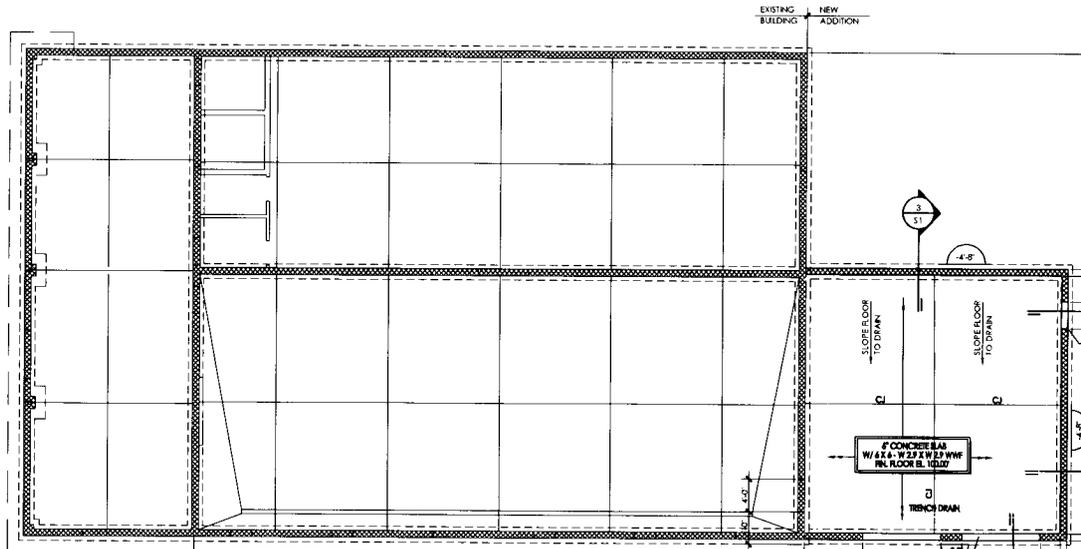


LINTEL SCHEDULE		
SCHEDULE APPLIES TO ALL OPENINGS REQUIRED, INCLUDING OPENINGS REQUIRED FOR MECH. DUCTS		
THICKNESS OF MASONRY WALL	SPAN OF OPENING	SIZE OF LINTEL
4" MASONRY	UP TO 5'-0"	3" x 3" x 7'6"
	5'-0" TO 8'-0"	3" x 3" x 15'3"
6" MASONRY	UP TO 5'-0"	4" x 4" x 9"
	5'-0" TO 7'-0"	4" x 4" x 15'9"
8" MASONRY	UP TO 5'-0"	3" x 4" x 12'6"
	5'-0" TO 7'-0"	3" x 4" x 12'6"
	7'-0" TO 10'-0"	3" x 4" x 12'6"
10" MASONRY	UP TO 5'-0"	3" x 4" x 9" x 6"
	5'-0" TO 7'-0"	3" x 4" x 9" x 6"
	7'-0" TO 10'-0"	3" x 4" x 9" x 6"
12" MASONRY	UP TO 5'-0"	3" x 4" x 12'6"
	5'-0" TO 7'-0"	3" x 4" x 12'6"
	7'-0" TO 10'-0"	3" x 4" x 12'6"

LINTELS TO BEAR 4" FOR EACH FOOT OF SPAN AT EACH END WITH MIN. 6" BEARINGS (EACH END)



FRAMING PLAN SCALE 1/8" = 1'-0" (1/2)



FOUNDATION PLAN SCALE 1/8" = 1'-0" (1)

- FLOOR CONSTRUCTION SHALL BE CONCRETE SLAB ON COMPACTED FILL WITH 6" x 6" x 2.9" x 2.9" W.W.F. (SEE PLAN & SECTIONS FOR SIZE)
- FINISH FLOOR ELEVATION 5'100.00'
- CONSTRUCTION AND CONTROL JOINTS ARE NOTED THRU C.L. ON PLAN (SEE TYPICAL DETAILS)
- BOTTOM OF FOOTING INDICATOR SHOWN IN (1/2) ON PLAN DENOTES DISTANCE FROM FINISH FLOOR TO BOTTOM OF FOOTING.