

**Town of Niles  
Board of Appeals  
Variance Applications**

**Print Form**

Appeal Number	<hr/>	Date	<hr/>
Name of Applicant	<hr/> Chris Johnson		
Mailing Address	<hr/> 196 E Genesee Street		
	<hr/> Road Address		
	<hr/> Skaneateles	<hr/> NY	<hr/> 13152
	City	State	Zip Code
	<hr/> 315-685-3206		
	(Area Code) Phone Number		
Location of Property	<hr/> 30 Firelane 12C		
	<hr/> Road Address		
	<hr/> Niles	<hr/> NY	<hr/> 13118
	City	State	Zip Code
	<hr/> n/a		
	(Area Code) Phone Number		
Tax Map Number	<hr/> 158.00-1-21		

**Reason for Appeal:** Please give a detailed description. Attach extra sheets is needed.

Existing boathouse is located within the lakefront setback and is in need of repairs to adequately use for storage and access to the lake. The Johnsons are requesting a Pre-existing Non-conforming variance to renovate and add space to the existing boathouse which will provide more storage and safer access.

**Please attach a sketch and/or map of the property in question.** (Include locations and outlines of all buildings, measurements, etc.)

See Site Plan for property information

**Please attach names and addresses of all property owners whose property touches on this one.** Also, include any that are situated directly across a public or private road from this property.

See Site Plan for name/address information

**Town of Niles Board of Appeals  
(continued)**

**Previous Appeal:** Have any other appeals been previously made with respect of this property? If so, please indicate below, when and the result of the appeal.

_____	_____	_____
Date	Granted	Denied

_____	_____	_____
Date	Granted	Denied

The following four factors will be considered by the Board of Appeals and should be addressed by the variance applicant:

See Narrative

1. Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the variance.
2. Whether the proposed variance would have an adverse impact on the physical or environmental conditions of the neighborhood.
3. Whether the benefit sought by the applicant can be achieved by some method, feasible for the applicant to pursue, other than the variance.
4. Whether the alleged difficulty was self-created.

The last factor shall be relevant to the decision of the Board of Appeals, but shall not necessarily preclude the granting of the variance.

**I CERTIFY THAT THE INFORMATION SUBMITTED WITH THIS APPEAL IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

  
\_\_\_\_\_  
Signature of Applicant\*

**\*Only owner(s) of the property to which this appeal applies, or agents designated in writing by such ownership(s), may sign this application.**

**Town of Niles**  
**5923 New Hope Road**  
**Moravia, New York 13118**

**J. Patrick Doyle**  
**Code Enforcement Officer**  
**Email: codes@townofnilesny.gov**

**Office Phone: 315-497-0066**

**Fax: 315-497-9952**

**Cell Phone: 315-729-3921**

Application No. \_\_\_\_\_

Date: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

**Application for Building/Setback/Lot Area Permit**  
**(Not a Permit)**

**IMPORTANT INSTRUCTIONS, PLEASE READ CAREFULLY.**

1. Application must be complete. Please type or clearly print in ink all necessary information.
2. Completed Application must be submitted to the Town of Niles Clerk before review process can begin.
3. Application must be supported with the following documents:

**MINOR PROJECT:**      A. Plot plan/survey (see attached sample at the end of this document)  
                                    B. Sketch of project and/or specifications/materials list.

**MAJOR PROJECT:**      A. Three (3) copies of plot plan/survey signed  
                                    B. Three (3) copies of design drawings signed and sealed by a licensed architect or licensed professional engineer.  
                                    C. One (1) copy of approval from developer, if in Planned Development District.

**PLEASE COMPLETE:**

Location of property: 30 Fire Lane 12C Niles, NY, 13118

Tax Map No.: 158.00-1-21  
(Street or Firelane No., Lot No., Nearest Road)

Name of Owner: Chris Johnson & Jean A. Shook (deceased)

Address: 196 E. Genesee Street, Skaneateles, NY 13152

Phone, Email	<u>315-685-3206</u>	<u>315-427-4610</u>	<u>cejohms@syr.edu</u>
	(Phone)	(Cell)	(Email)

Application for Building/ Setback/ Lot Area Permit ( continued)

**G. ZONING DISTRICT OF PROPERTY** (Circle One)

1. Residential

2. Agricultural/Residential

3. Lakeshore

**H. PRINCIPAL USE OF PRESENT STRUCTURE S AND/ OR LAND** (Circle One)

1. Residential

2. Agricultural/Residential

3. Lakeshore

4. Other (Specify) \_\_\_\_\_

**I. PRINCIPAL USE OF THIS PROPOSED PROJECT** (Describe) Storage and lake access

**J. DIMENSIONS OF TOTAL PROPERTY** (If applicable)

Lot size: Length	<u>294ft</u>	(X) Width	<u>100ft</u>	(=)	Total sq. ft.	_____
Existing Buildings:						
Length	<u>10.1</u>	(X) Width	<u>16.2</u>	(=)	sq. ft.	<u>163.6</u>
Length	<u>18.4</u>	(X) Width	<u>22.4</u>	(=)	sq. ft.	<u>412.2</u>
Length	<u>12</u>	(X) Width	<u>9</u>	(=)	sq. ft.	<u>108</u>
Total square footage – Existing buildings						<u>683.8</u>

**K. DIMENSIONS OF PROPOSED PROJECT** (If applicable)

Length	<u>12.7</u>	(X) Width	<u>20.7</u>	(=)	Total sq. ft.	<u>262.9</u>
Height	<u>12.1</u>	Number of stories	<u>1</u>			

**L. PROPERTY LINE SETBACKS OF PROPOSED PROJECT.** (If applicable)

Front lot line setback	<u>+/- 14.0</u>	ft.	Side lot line setback	<u>+/- 28.4</u>	ft.
Rear lot line setback	<u>+/- 249.8</u>	ft.	Side lot line setback	<u>+/- 49.1</u>	ft.

**M. ENCLOSED LIVING AREA.** (If applicable)

Total sq. Ft. \_\_\_\_\_

**GENERAL INFORMATION PERTAINING TO THIS APPLICATION**

This application will be reviewed by the Code Enforcement Officer and/or the Town Consulting Engineer. If disapproved, a letter of denial explaining reason(s) for denial will be issued to applicant. If approved, a BUILDING/ SETBACK/ LOT AREA PERMIT will be issued to the Applicant.

Work covered by this APPLICATION shall not commence prior to the issuance of a PERMIT. The PERMIT shall be valid for a period of twelve (12) months from the date of issuance. Construction under the PERMIT must be substantially complete within twelve (12) months or an extension must be obtained from the Code Enforcement Officer. A NOTICE OF PERMIT (issued by the Town) must be kept on the premises, publicly visible, throughout the progress of work.



**Application for Building/Setback/Lot Area Permit (continued)**

**A. PROJECT CONTACTS:**

Builder (If self, so indicate) TBD

Address \_\_\_\_\_

Phone / Cell / Email \_\_\_\_\_

Architect or Engineer \_\_\_\_\_

Address \_\_\_\_\_

Phone / Cell / Email \_\_\_\_\_

**B. NATURE OF WORK**

(CHECK ALL APPROPRIATE CATEGORIES BELOW):

1. Repair (structural) X
2. Addition X
3. Alteration \_\_\_\_\_

**Existing Structure(s)**

4. Removal \_\_\_\_\_
5. Demolition X
6. Other (specify) \_\_\_\_\_

1. Single Family \_\_\_\_\_
2. Accessory Buildings:  
Garage: \_\_\_\_\_ Attached \_\_\_\_\_ Detached \_\_\_\_\_  
Shed \_\_\_\_\_

**New Structure(s)**

3. Two Family \_\_\_\_\_
4. Deck: \_\_\_\_\_ Covered \_\_\_\_\_ Open \_\_\_\_\_
5. Swimming Pool: Above \_\_\_\_\_ Below \_\_\_\_\_
6. Other (specify) \_\_\_\_\_

**C. PRINCIPAL CONSTRUCTION MATERIAL TO BE USED:**

1. Wood X
2. Brick \_\_\_\_\_
3. Block \_\_\_\_\_
4. Other (Specify) Steel

**D. TYPE OF FOUNDATION:**

1. Cellar \_\_\_\_\_
2. Slab \_\_\_\_\_
3. Basement \_\_\_\_\_
4. Crawlspace \_\_\_\_\_
5. Other (Specify) STEEL PILES

**E. COMPLETE THE FOLLOWING:**

1. Water Source: Public \_\_\_\_\_ Private Well \_\_\_\_\_ Other N/A
2. Sewage: Public \_\_\_\_\_ Private\* \_\_\_\_\_ None X  
\* If private, has sewage disposal permit been applied for Yes \_\_\_ No \_\_\_
3. Will the project involve plumbing? Yes \_\_\_\_\_ No X
4. Will the project involve H.V.A.C.? Yes \_\_\_\_\_ No X
5. Will the project involve electrical? Yes X No \_\_\_\_\_

**F. COST OF THIS PROJECT:** (all labor\* and materials)

\$ TBD

\* estimate your labor, if applicable.

**Application for Building/Setback/Lot Area Permit (continued)**

This project may involve work requiring approval of various outside agencies. Certain outside agency approvals may be required prior to the issuance of a Permit. Final approval of all agencies involved must be submitted to the Code Enforcement Officer prior to the issuance of a Certificate of Occupancy or Compliance. Examples, not limited to the following, would be:

<u>Project Involvement</u>	<u>Agency</u>
1. Land division, Site Plan Review, SEQR, etc.	Niles Planning Board
2. Setback/lot area matters, SEQR	Niles Board of Appeals
3. NYS Roads	NYS Department of Transportation
4. Floodplains, Wetlands	NYS Department of Environmental Conservation
5. Streams, Lakes, Creeks, etc.	US Army Corps of Engineers
6. Skaneateles Lake	City of Syracuse, Cayuga County Health Department
7. Owasco Lake	Cayuga County Health Department
8. Private Septic System	Cayuga County Health Department

Application for a CERTIFICATE OF OCCUPANCY OR COMPLIANCE is made concurrently with this filing. It is the responsibility of the owner or authorized agent to notify the Code Enforcement Officer when the project is completed to obtain a Certificate of Occupancy or Compliance.

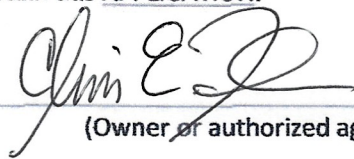
The Town Code Enforcement Officer and/or Building Inspector, upon the display of proper credentials and in the discharge of his duties, shall be permitted to enter upon the premises covered by this application with out interference, for the purposes of inspecting, during normal working hours.

No person shall make any changes to the plans herewith submitted or of the specifications herein contained in the structural part of the project without the written consent of the Code Enforcement Officer.

.....

I certify that the answers to the questions set forth in this APPLICATION are true, correct and complete. Additionally, I agree that, in the event the PERMIT is approved, to comply with the provisions of all State of New York and Federal Government laws, rules and regulations, as they pertain this APPLICATION.

Signature: \_\_\_\_\_



(Owner or authorized agent)



### JOINT APPLICATION FORM

For Permits for activities affecting streams, waterways, waterbodies, wetlands, coastal areas, sources of water, and endangered and threatened species.

**You must separately apply for and obtain Permits from each involved agency before starting work. Please read all instructions.**

#### 1. Applications To:

##### >NYS Department of Environmental Conservation

☐ Check here to confirm you sent this form to NYSDEC.

Check all permits that apply:

☐ Stream Disturbance

☐ Dams and Impoundment Structures

☐ Tidal Wetlands

☐ Water Withdrawal

☐ Excavation and Fill in Navigable Waters

☐ 401 Water Quality Certification\*

☐ Wild, Scenic and Recreational Rivers

☐ Long Island Well

☐ Docks, Moorings or Platforms

☐ Freshwater Wetlands

☐ Coastal Erosion Management

☐ Incidental Take of Endangered / Threatened Species

\* See Instructions (page 3)

##### >US Army Corps of Engineers

☐ Check here to confirm you sent this form to USACE.

Check all permits that apply: ☐ Section 404 Clean Water Act

☐ Section 10 Rivers and Harbors Act

Is the project Federally funded? ☐ Yes ☐ No

If yes, name of Federal Agency:

General Permit Type(s), if known:

Preconstruction Notification: ☐ Yes ☐ No

##### >NYS Office of General Services

☐ Check here to confirm you sent this form to NYSOGS.

Check all permits that apply:

☐ State Owned Lands Under Water

☐ Utility Easement (pipelines, conduits, cables, etc.)

☐ Docks, Moorings or Platforms

##### >NYS Department of State

☐ Check here to confirm you sent this form to NYSDOS.

Check if this applies: ☐ Coastal Consistency Concurrence

#### 2. Name of Applicant

Taxpayer ID (if applicant is NOT an individual)

Mailing Address

Post Office / City

State

Zip

Telephone

Email

Applicant Must be (check all that apply): ☐ Owner ☐ Operator ☐ Lessee

#### 3. Name of Property Owner (if different than Applicant)

Mailing Address

Post Office / City

State

Zip

Telephone

Email

**For Agency Use Only**

Agency Application Number:

**4. Name of Contact / Agent**

<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/>
Mailing Address		Post Office / City	State	Zip	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
Telephone	<input type="text"/>	Email	<input type="text"/>		

**5. Project / Facility Name**

Property Tax Map Section / Block / Lot Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Project Street Address, if applicable	Post Office / City	State	Zip
<input type="text"/>	<input type="text"/>	NY	<input type="text"/>

Provide directions and distances to roads, intersections, bridges and bodies of water

☐ Town ☐ Village ☐ City County Stream/Waterbody Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Project Location Coordinates: Enter Latitude and Longitude in degrees, minutes, seconds:

Latitude: ° ' " Longitude: ° ' "

**6. Project Description:** Provide the following information about your project. Continue each response and provide any additional information on other pages. **Attach plans on separate pages.**

a. Purpose of the proposed project:

b. Description of current site conditions:

c. Proposed site changes:

d. Type of structures and fill materials to be installed, and quantity of materials to be used (e.g., square feet of coverage, cubic yards of fill material, structures below ordinary/mean high water, etc.):

e. Area of excavation or dredging, volume of material to be removed, location of dredged material placement:

f. Is tree cutting or clearing proposed? ☐ Yes If Yes, explain below. ☐ No

Timing of the proposed cutting or clearing (month/year):

Number of trees to be cut:  Acreage of trees to be cleared:

g. Work methods and type of equipment to be used:

h. Describe the planned sequence of activities:

i. Pollution control methods and other actions proposed to mitigate environmental impacts:

j. Erosion and silt control methods that will be used to prevent water quality impacts:

k. Alternatives considered to avoid regulated areas. If no feasible alternatives exist, explain how the project will minimize impacts:

l. Proposed use: ☐ Private ☐ Public ☐ Commercial

m. Proposed Start Date:  Estimated Completion Date:

n. Has work begun on project? ☐ Yes If Yes, explain below. ☐ No

o. Will project occupy Federal, State, or Municipal Land? ☐ Yes If Yes, explain below. ☐ No

p. List any previous DEC, USACE, OGS or DOS Permit / Application numbers for activities at this location:

q. Will this project require additional Federal, State, or Local authorizations, including zoning changes?

☐ Yes If Yes, list below. ☐ No



**7. Signatures.**

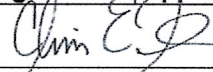
Applicant and Owner (If different) must sign the application. If the applicant is the landowner, the **landowner attestation form** can be used as an electronic signature as an alternative to the signature below, if necessary. Append additional pages of this Signature section if there are multiple Applicants, Owners or Contact/Agents.

I hereby affirm that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief.

Permission to Inspect - I hereby consent to Agency inspection of the project site and adjacent property areas. Agency staff may enter the property without notice between 7:00 am and 7:00 pm, Monday - Friday. Inspection may occur without the owner, applicant or agent present. If the property is posted with "keep out" signs or fenced with an unlocked gate, Agency staff may still enter the property. Agency staff may take measurements, analyze site physical characteristics, take soil and vegetation samples, sketch and photograph the site. I understand that failure to give this consent may result in denial of the permit(s) sought by this application.

False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the NYS Penal Law. Further, the applicant accepts full responsibility for all damage, direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and agrees to indemnify and save harmless the State from suits, actions, damages and costs of every name and description resulting from said project. In addition, Federal Law, 18 U.S.C., Section 1001 provides for a fine of not more than \$10,000 or imprisonment for not more than 5 years, or both where an applicant knowingly and willingly falsifies, conceals, or covers up a material fact; or knowingly makes or uses a false, fictitious or fraudulent statement.

**Signature of Applicant**



Date

11/3/2025

Applicant Must be (check all that apply): ☒ Owner ☐ Operator ☐ Lessee

Printed Name

Chris E. Johnson

Title

Owner

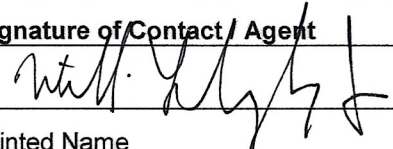
**Signature of Owner (if different than Applicant)**

Date

Printed Name

Title

**Signature of Contact / Agent**



Date

11.10.25

Printed Name

William Murphy Jr

Title

Architect

**For Agency Use Only**

**DETERMINATION OF NO PERMIT REQUIRED**

Agency Application Number

(Agency Name) has determined that No Permit is required from this Agency for the project described in this application.

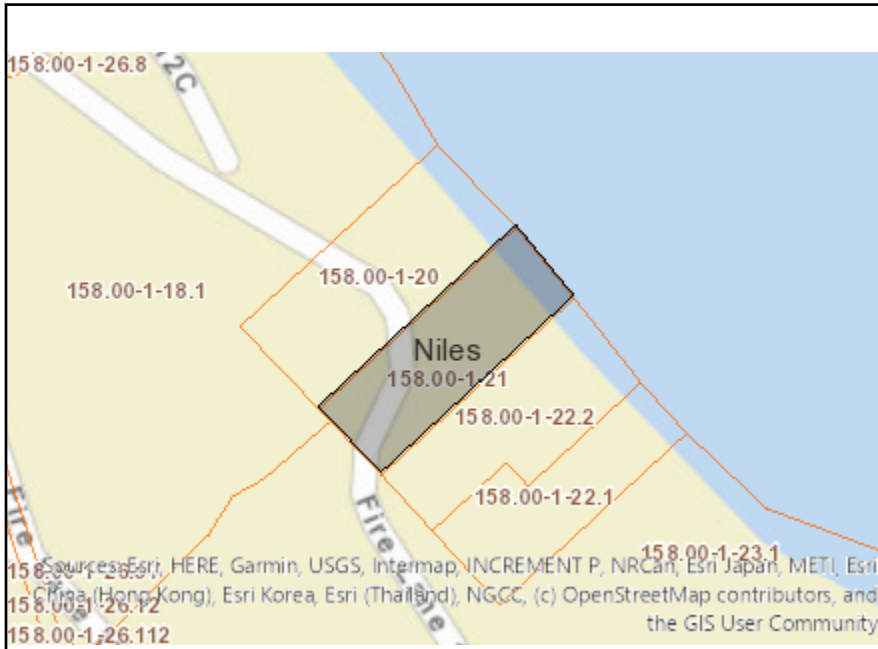
Agency Representative:

Printed Name

Title

Signature

Date



**Disclaimer:** The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources to confirm data provided by the Mapper or to obtain data not provided by the Mapper.



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	Yes
Part 1 / Question 20 [Remediation Site]	No

# *Short Environmental Assessment Form*

## *Part 1 - Project Information*

### Instructions for Completing

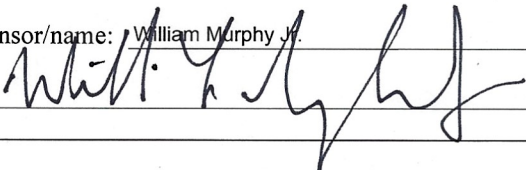
**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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.

<b>Part 1 – Project and Sponsor Information</b>				
Name of Action or Project:				
Project Location (describe, and attach a location map):				
Brief Description of Proposed Action:				
Name of Applicant or Sponsor:			Telephone:	
			E-Mail:	
Address:				
City/PO:			State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO	YES
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.			<input type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO	YES
If Yes, list agency(s) name and permit or approval:			<input type="checkbox"/>	<input type="checkbox"/>
3.   a. Total acreage of the site of the proposed action? _____ acres b. Total acreage to be physically disturbed? _____ acres c. Total acreage (project site and any contiguous properties) owned _____ acres or controlled by the applicant or project sponsor?				
4. Check all land uses that occur on, are adjoining or near the proposed action: 5.     Urban       Rural (non-agriculture)       Industrial       Commercial       Residential (suburban) <input type="checkbox"/> Forest     Agriculture                   Aquatic       Other(Specify): <input type="checkbox"/> Parkland				



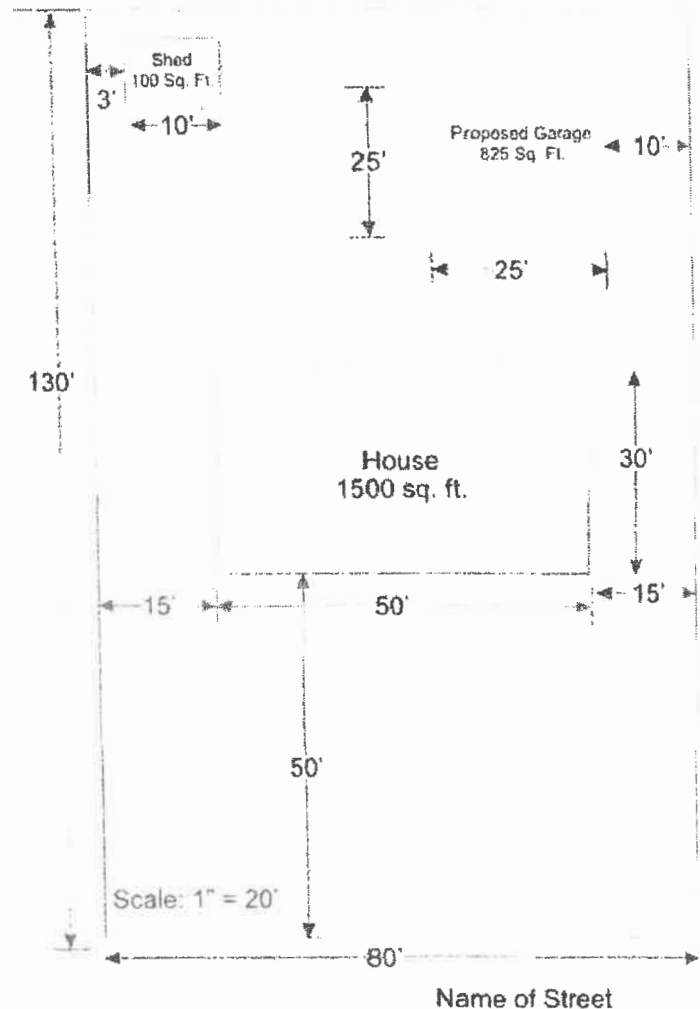
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO  <input type="checkbox"/>  <input type="checkbox"/>	YES  <input type="checkbox"/>  <input type="checkbox"/>	N/A  <input type="checkbox"/>  <input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO  <input type="checkbox"/>	YES  <input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO  <input type="checkbox"/>	YES  <input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	YES  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO  <input type="checkbox"/>	YES  <input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO  <input type="checkbox"/>	YES  <input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO  <input type="checkbox"/>	YES  <input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	NO  <input type="checkbox"/>  <input type="checkbox"/>	YES  <input 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? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	NO  <input type="checkbox"/>  <input type="checkbox"/>	YES  <input 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 checked="" type="checkbox"/> Shoreline <input checked="" 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 plan?	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
_____ _____		
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	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"/>
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>  Applicant/sponsor/name: <u>William Murphy Jr.</u> Date: <u>11.10.25</u> Signature: <u></u> Title: <u>Architect</u>		

## PLOT PLAN SHOULD CONTAIN:

- A. Name of Owner.
- B. Address of Property.
- C. Tax Map No.
- D. Dimensions of lot to scale.  
Indicate north per compass.
- E. Draw existing structures on lot to scale.  
Draw with solid lines.
- F. Draw proposed structures to scale.  
Draw with dotted lines.
- G. Indicate square footage of all structures.
- H. Distance from all structures to lot lines.
- I. Identification of adjoining property.  
i.e., Street, Lake, Neighbors by name.

### SAMPLE PLOT PLAN



**NOTE: THE ABOVE IS A SAMPLE PLOT PLAN AND SETBACKS SHOWN MAY NOT COMPLY WITH CURRENT SETBACKS. SEE NEXT PAGE – SECTION 164-8. BUILDING SETBACK LINES OF THE CODE OF THE TOWN OF NILES – FOR MINIMUM SETBACK REQUIREMENTS.**

Contact J. Patrick Doyle, Code Enforcement Officer, with any questions regarding setbacks.

*Town of Niles, NY*

## Chapter 164. Setbacks and Lot Area

### § 164-8. Building setback lines.

- A. All buildings hereafter constructed in the town shall be set back a minimum distance of 75 feet from the center line of any public or private right-of-way, except buildings constructed on lots with frontage on Owasco Lake or Skaneateles Lake. Buildings constructed on lakefront lots shall be set back a minimum of 25 feet from the lake mean high-water mark and 25 feet from the center line of a public or private right-of-way.
- B. No building shall be closer than 25 feet to an adjacent side property line or rear property line except buildings on lots with lake frontage, which shall be set back a minimum of 15 feet. The rear property line shall be the point of the lot farthest from and most parallel to the frontage required by § 164-7 of this chapter.  
[Amended 9-6-1990 by L.L. No. 1-1990]
- C. Roadside stands, bus shelters and garbage shelters, as defined, shall be exempt from the seventy-five-foot road setback requirement, provided they are actively in use for their designed purpose. Any of the above structures of which the permitted use has been discontinued for more than 90 days must be moved no less than 75 feet back from the center of the highway. Any time a portable structure has not been open for three or more consecutive business days it shall be presumed that its use has been discontinued for over 90 days, and the burden of proof that the structure has been used within the past 90 days shall fall upon its owner. Failure of the owner to produce evidence of current use to the Code Enforcement Officer shall be cause for issuance of an order to move said structure. Portable structures shall not be placed on any foundation which would remain in place if the structure is moved. The structure must be secure so as not to blow into the highway or onto the property of others from winds of less than hurricane force. No section of this chapter shall be construed as to allow any person to place any structure upon any public highway right-of-way without receiving prior approval from the agency having control of said right-of-way.  
[Added 6-12-2003 by L.L. No. 3-2003]

### § 164-13. Setback and lot area permits.

No building shall be constructed or extended without a setback and/or lot area permit, as applicable, issued by the Code Enforcement Official. Every application for a setback and/or lot area permit shall be accompanied by a plot plan with all dimensions shown indicating the size and shape of the lot and buildings and location within the town.

## Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

***\*\*This form cannot be used to waive the workers' compensation rights or obligations of any party.\*\****

**Under penalty of perjury**, I certify that I am the owner of the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriate box):

- ☐ I am performing all the work for which the building permit was issued.
- ☐ I am not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping me perform such work.
- ☐ I have a homeowners insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

I also agree to either:

- ◆ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a CE-200 exemption form; OR
- ◆ have the general contractor, performing the work on the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

\_\_\_\_\_  
(Signature of Homeowner)

\_\_\_\_\_  
(Date Signed)

\_\_\_\_\_  
(Homeowner's Name Printed)

Home Telephone Number \_\_\_\_\_

Property Address that requires the building permit:

30 Firelane 12C

Niles, NY 13118

Sworn to before me this _____ day of _____, _____.
_____ (County Clerk or Notary Public)

Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.

LAWS OF NEW YORK, 1998  
CHAPTER 439

The general municipal law is amended by adding a new section 125 to read as follows:

125. ISSUANCE OF BUILDING PERMITS. NO CITY, TOWN OR VILLAGE SHALL ISSUE A BUILDING PERMIT WITHOUT OBTAINING FROM THE PERMIT APPLICANT EITHER:

1. PROOF DULY SUBSCRIBED THAT WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS COVERAGE ISSUED BY AN INSURANCE CARRIER IN A FORM SATISFACTORY TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD AS PROVIDED FOR IN SECTION FIFTY-SEVEN OF THE WORKERS' COMPENSATION LAW IS EFFECTIVE; OR

2. AN AFFIDAVIT THAT SUCH PERMIT APPLICANT HAS NOT ENGAGED AN EMPLOYER OR ANY EMPLOYEES AS THOSE TERMS ARE DEFINED IN SECTION TWO OF THE WORKERS' COMPENSATION LAW TO PERFORM WORK RELATING TO SUCH BUILDING PERMIT.

### Implementing Section 125 of the General Municipal Law

#### 1. General Contractors -- Business Owners and Certain Homeowners

For businesses and certain homeowners listed as the general contractors on building permits, proof that they are in compliance with Section 57 of the Workers' Compensation Law (WCL) is ONE of the following forms that indicate that they are:

- ♦ insured (C-105.2 or U-26.3),
- ♦ self-insured (SI-12), or
- ♦ are exempt (CE-200),

under the mandatory coverage provisions of the WCL. Any residence that is not a 1, 2, 3 or 4 Family, Owner-occupied Residence is considered a business (income or potential income property) and must prove compliance by filing one of the above forms.

#### 2. Owner-occupied Residences

For homeowners of a 1, 2, 3 or 4 Family, Owner-occupied Residence, proof of their exemption from the mandatory coverage provisions of the Workers' Compensation Law when applying for a building permit is to file form BP-1 (12/08).

- ♦ Form BP-1 shall be filed if the homeowner of a 1, 2, 3 or 4 Family, Owner-occupied Residence is listed as the general contractor on the building permit, and the homeowner:
  - ◊ is performing all the work for which the building permit was issued him/herself,
  - ◊ is not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping the homeowner perform such work, or
  - ◊ has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.
- ♦ If the homeowner of a 1, 2, 3 or 4 Family, Owner-occupied Residence is hiring or paying individuals a total of 40 hours or MORE in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may not file the "Affidavit of Exemption" form, BP-1(12/08), but shall either:
  - ◊ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit (the C-105.2 or U-26.3 form), OR
  - ◊ have the general contractor, (performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit) provide appropriate proof of workers' compensation coverage, or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit.



ANDREW M. CUOMO  
GOVERNOR

STATE OF NEW YORK  
WORKERS' COMPENSATION BOARD  
328 STATE STREET  
SCHENECTADY, NY 12305



ROBERT E. BELOTEN  
CHAIR

December 1, 2008

To all Code Enforcement Officials, Building Departments, and Municipal Entities:

Effective January 18, 1999, Section 125 of the General Municipal Law requires that any individual applying for a building permit must prove to the building department that he/she is in compliance with the mandatory coverage provisions of the Workers' Compensation Law before the building permit is issued.

### General Background

Under Section 57 of the Workers' Compensation Law, businesses listed as the general contractors on building permits are required to submit proof of compliance with the mandatory coverage provisions of the Workers' Compensation Law to the building department before a building permit is issued. Section 125 of the General Municipal Law is specifically targeted at ensuring that all applicants who list themselves as the general contractors on the building permit are in compliance with the mandatory coverage provisions of the Workers' Compensation Law.

For homeowner applicants, the instruction manual includes a link to form BP-1 Affidavit of Exemption to Show Specific Proof of Workers' Compensation Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence. The law requires homeowners to provide proof of workers' compensation compliance when applying for a building permit. If the homeowner qualifies for an exemption, the homeowner must either complete this form and file it with the local building department; or the homeowner must complete Form CE-200 and file it with the local building department.

### Implementing Section 125 of the General Municipal Law

#### 1. General contractors and Business Owners

Businesses listed as the general contractors on building permits, must prove that they are in compliance with the mandatory coverage requirements and also Section 57 of the Workers' Compensation Law (WCL) by producing ONE of the following forms indicating that they are:

- insured (Form C-105.2 or U-26.3 – the business's insurance carrier will send this form to the building department upon the business's request) All private carriers and their licensed insurance agents are authorized to issue the form C-105.2 as their Certificate of NYS Workers' Comp Insurance. The State Insurance Fund uses the U-26.3 form as its Certificate of NYS Workers' Compensation Insurance.
- self-insured (Form SI-12 -- Certificate of Workers' Compensation Self-Insurance (the business calls the Board's Self-Insurance Office at 518-402-0247), **OR** Form GSI-105.2 -- Certificate of Participation in Workers' Compensation Group Self-Insurance) (the business's Group Self-Insurance Administrator will send this form to the government entity upon request).
- exempt (Form CE-200 – {Form CE-200 is available on the Board's website, [www.wcb.ny.gov](http://www.wcb.ny.gov), under the heading "Forms." Paper applications for this form are available by writing or visiting any Customer Service Center at any District Office of the Workers' Compensation Board.})

Any residence that is not a 1, 2, 3, or 4 Family, Owner-occupied Residence is considered a business (income or potential income property) and must prove compliance by filing one of the above forms. (Please note: **ACORD** forms are **NOT** acceptable proof of workers' compensation coverage!)

## 2. *Owner-occupied Residences*

Homeowners of a 1, 2, 3, or 4 Family, Owner-occupied Residence, must file form BP-1 when applying for a building permit when they are:

- listed as the general contractor on the building permit, and the homeowner:
  - is performing all the work for which the building permit was issued him/herself,
  - is not hiring, paying or compensating in any way, the individual(s) that is (are) performing all the work for which the building permit was issued or helping the homeowner perform such work, or
  - has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.
- If the homeowner of a 1, 2, 3, 4 Family, Owner-occupied Residence is hiring or paying individuals a total of 40 hours or MORE in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may NOT file the "Affidavit of Exemption" form, BP-1, but must either:
  - acquire appropriate workers' compensation coverage and provide, to the government entity issuing the building permit, appropriate proof of that coverage, on forms C-105.2 or U-26.3, OR
  - have the general contractor performing the work provide appropriate proof of workers' compensation coverage, or proof of exemption from that coverage, to the government entity issuing the building permit.

### **Background on Coordinating the Implementation of Section 125 of the General Municipal Law with Existing Statutes**

To ensure that homeowners are not required to have duplicate workers' compensation coverage, the implementation form attempts to coordinate compliance with Section 125 of the Municipal Law with coverage provided under Section 3420(j) of the Insurance Law, which is the homeowner's policy's workers' compensation insurance rider.

As of March 1, 1985, New York State Insurance Law § 3420(j) provides that every policy of comprehensive personal liability insurance (i.e., homeowner's insurance) on a 1, 2, 3, or 4 Family owner-occupied dwelling (including condominiums) will also provide workers' compensation benefits. This section was added to protect the homeowner from unexpected liability when the Board determines that a person, whom the homeowner did not believe required coverage, is found to be entitled to benefits. To receive benefits under this policy, the employee must be found by the Board to have been injured in employment of the policyholder and employed for less than 40 hours a week in and about the owner's 1, 2, 3, 4 family residence in this State.

*Form BP-1 is available on the Board's website, [www.wcb.ny.gov](http://www.wcb.ny.gov), under the heading "Forms."* Please make as many copies of the BP-1 as you require. The BP-1 form reflects the minimum standard to be applied statewide. If a municipality wishes to collect a copy of the certificate of insurance from a building permit applicant's homeowner's insurance policy or obtain a copy of the information page from the building permit applicant's homeowner's insurance policy, the municipality could make that a local requirement which would be in addition to the State requirement.

If you have any questions regarding the BP-1 form, Section 125 of the General Municipal Law or Section 57 of the Workers' Compensation Law, please contact Steve Carbone of the New York State Workers' Compensation Board at (518) 486-6307.

Thank you for your office's cooperation in enforcing Section 125 of the General Municipal Law and Section 57 of the Workers' Compensation Law.

Sincerely,

Peter Michels  
Director of Compliance



## TOWN OF NILES PLANNING BOARD

### REQUEST FOR INFORMAL MEETING REGARDING:

☐ SUBDIVISION    ☐ MERGER    ☐ BUSINESS    ☒ SITE PLAN REVIEW    ☐ OTHER

Date: 6/6/2025

Tax Map #: 158.00-1-21

Acreage/Area 0.66 acres

Owner (s) of property: Chris Johnson and Jean A. Shook (deceased)

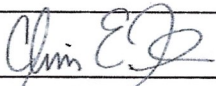
Address of property: 30 Fire Lane 12C Niles, NY, 13118

Description of use of property: Single-family residence with boathouse

Describe proposed project: Renovation/ addition to an existing boathouse located on a lakefront property to allow better access and storage use, and renovating the existing access stair that is currently not safe for use

Attach an existing survey or tax map parcel photocopy (preferred) marked up with proposed subdivision line and existing buildings and structures located thereon.

Additional information: See attached drawings/narrative



Signature of Property Owner

196 E Genesee St

Skaneateles, NY 13152

Signature of Joint Property Owner

Mailing Address

315-685-3206

Home Phone

315-427-4610

Cell Phone

cejohns@syr.edu

E-mail Address

## SPACE Architectural Studio, P.C.

3 Fennell Street, Suite #2, Skaneateles, N.Y. 13152  
p: (315) 685-0540 | e: bill@spacearchstudio.com | www.spacearchstudio.com

# Project Narrative

Chris Johnson Boathouse & Stair Renovation

Project Location: 20 Firelane 12C, Niles, NY, 13118

Tax Map No.: 158.00-1-21

Town Zoning District: Skaneateles Lake Front

SPACE Architectural Studio project #: 2025-15

Date: 23 June 2025

---

Chris Johnson would like to renovate an existing boathouse on his property that needs repairs and does not have safe access or adequate storage space. The proposal includes renovating the boathouse to include more outdoor equipment storage and new safe stair access from the top of the bank. The existing boathouse sits within the lake yard setback which creates a Pre-Existing Non-Conforming (P.E.N.C) condition.

Due to the location of the existing boathouse, the requested (P.E.N.C) variance is listed below:

- Minimum lake yard setback where 25 ft is required, a variance of +/- 25.0 ft (P.E.N.C.) is requested

In response to whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the variance – No, this proposal will not produce an undesirable change in the character of the neighborhood. This proposal includes a small addition and renovation to an existing boathouse needing repairs and cosmetic updates. This proposal will improve the view of the property and character of the neighborhood.

To whether this benefit sought by the applicant can be achieved by some method, feasible for the applicant to pursue, other than a variance – No, this benefit cannot be gained by any method other than a variance due to the existing conditions of the boathouse which is intended to be renovated.

To whether the requested area variance is substantial – Yes, the requested variance is substantial due to the location of the existing boathouse within the lake yard, however this is a P.E.N.C. variance with no change to the existing location. While there is a small storage addition, it is not substantial in size from the existing footprint and does not increase its P.E.N.C. lake yard setback.

## SPACE Architectural Studio, P.C.

3 Fennell Street, Suite #2, Skaneateles, N.Y. 13152

p: (315) 685-0540 | e: bill@spacearchstudio.com | www.spacearchstudio.com

To whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district – No, the proposed variance will not have an adverse effect on the neighborhood because this proposal is not substantial and does not encroach onto any neighboring property or the lake – not more than the P.E.N.C. conditions. Our proposal will not obscure any neighboring property's view of the lake with this proposed renovation.

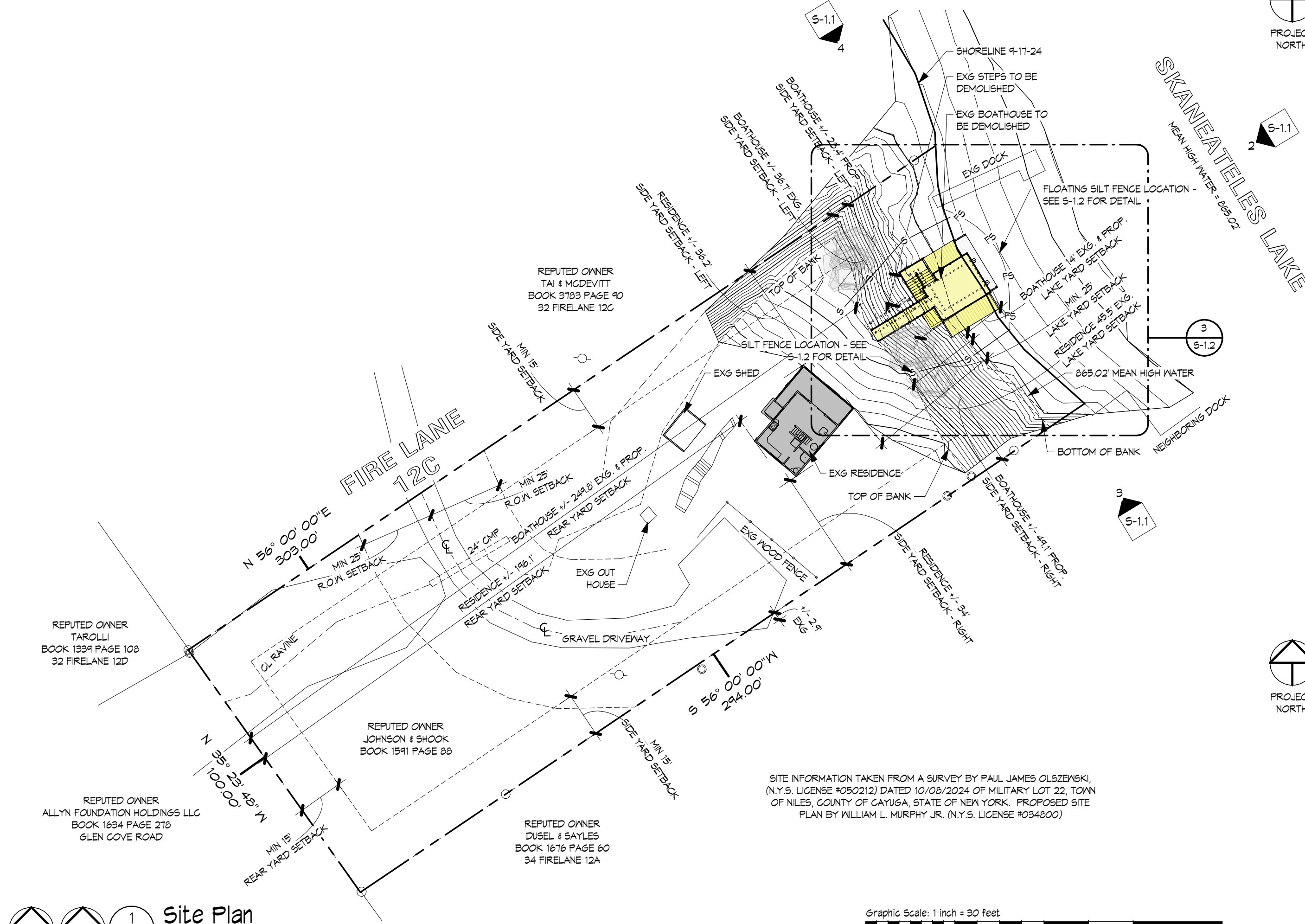
To whether the alleged difficulty was self-created, which consideration shall be relevant to the decision of the board of appeals but shall not necessarily preclude the granting of the area variance – Yes, this difficulty was self-created due to adding extra storage space to the boathouse, however the P.E.N.C. conditions of the existing boathouse and nature of the stair access resulted in the boathouse being difficult to access and use.

Thank you for considering our proposal.



DENSITY CONTROL SCHEDULE					
SKANEATELES LAKE FRONT					
	REQ'D./ALLOWED	EXISTING	PROPOSED	DIFFERENCE	REQ'D. VARIANCE
MINIMUM LOT SIZE	15,000 sf	+/- 0.66 ACRES / 28749.6 SF	-	-	-
MINIMUM LOT FRONTAGE	75 ft	+/- 100.0 ft	-	-	-
MINIMUM LAKE YARD SETBACK	RESIDENCE	25 ft	+/- 45.5 FT	+/- 45.5 FT	-
	BOATHOUSE	25 ft	+/- 0 ft (P.E.N.C.)	+/- 0 ft (P.E.N.C.)	+/- 25 ft (P.E.N.C.)
MINIMUM SIDE YARD SETBACK, LEFT	RESIDENCE	15 ft	+/- 36.2 ft	+/- 36.2 ft	-
	BOATHOUSE	15 ft	+/- 36.2 ft	+/- 36.2 ft	-
MINIMUM SIDE YARD SETBACK, RIGHT	RESIDENCE	15 ft	+/- 34.0 ft	+/- 34.0 ft	-
	BOATHOUSE	15 ft	+/- 51.4 ft	+/- 49.1 ft	+/- 2.3 ft
MINIMUM REAR YARD SETBACK	RESIDENCE	15 ft	+/- 196.1 ft	+/- 196.1 ft	-
	BOATHOUSE STEPS	15 ft	+/- 249.8 ft	+/- 249.8 ft	-

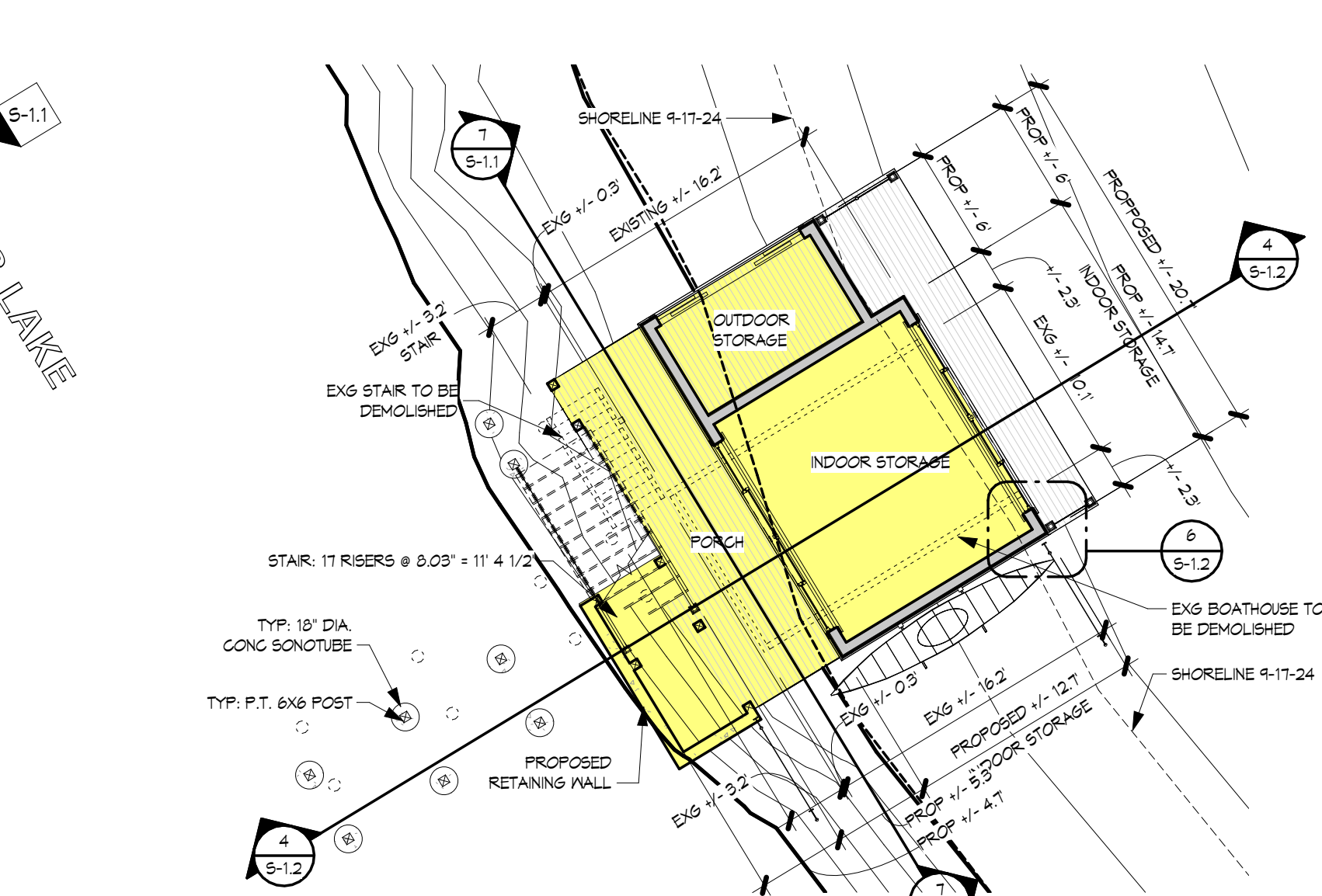
\* (P.E.N.C.) - PRE-EXISTING NON-CONFORMING.



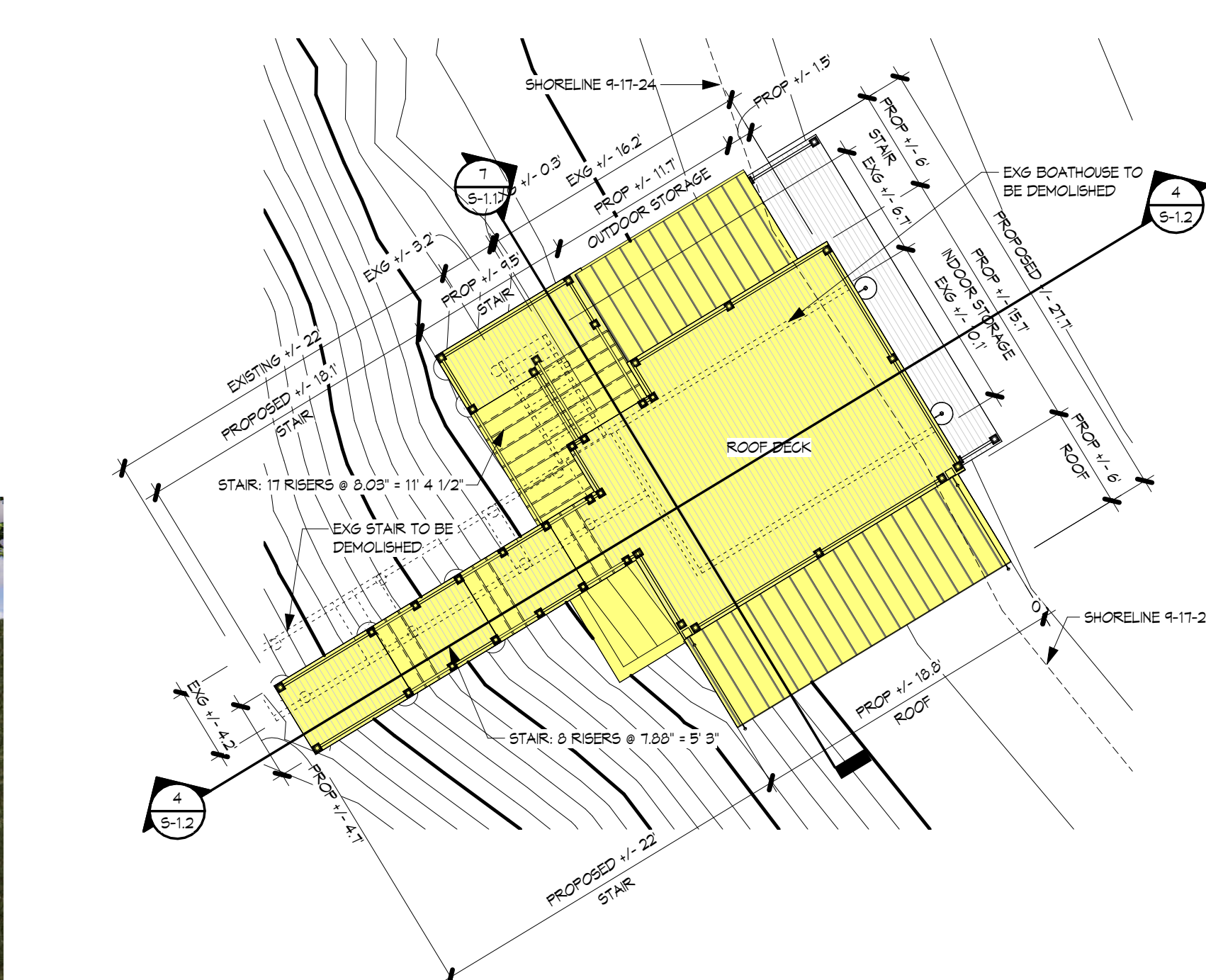
**1 Site Plan**  
SCALE: 1" = 30'-0"  
PROJECT NORTH TRUE NORTH



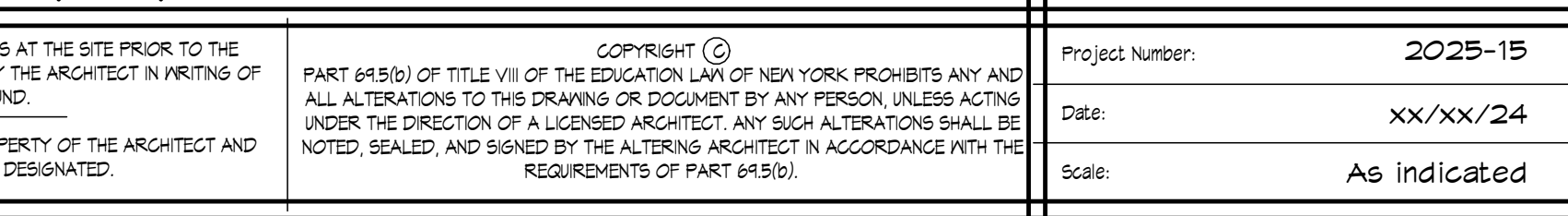
**2 Boathouse Foundation Plan**  
SCALE: 1/8" = 1'-0"  
PROJECT NORTH TRUE NORTH



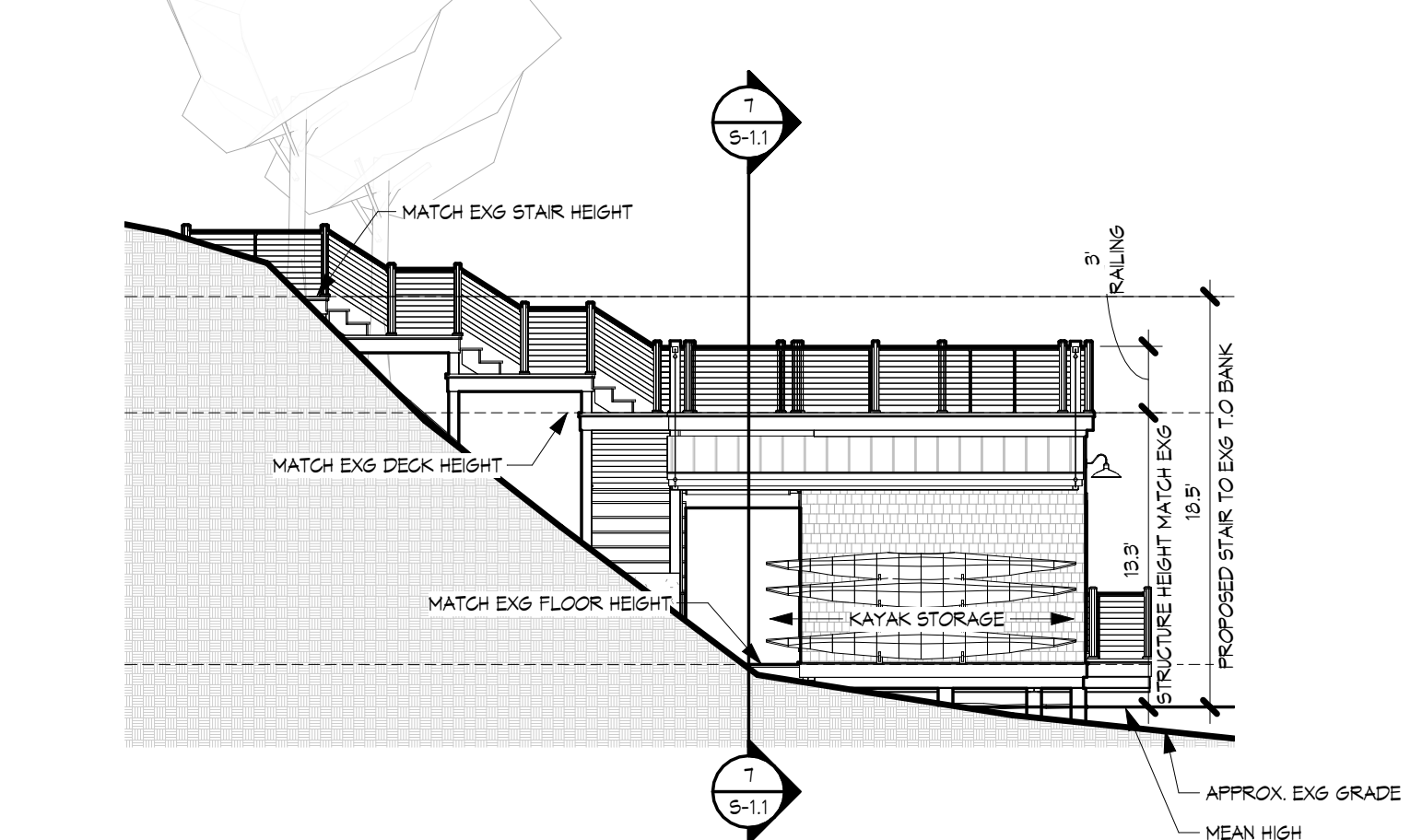
**5 Boathouse First Floor Plan**  
SCALE: 1/8" = 1'-0"  
PROJECT NORTH TRUE NORTH



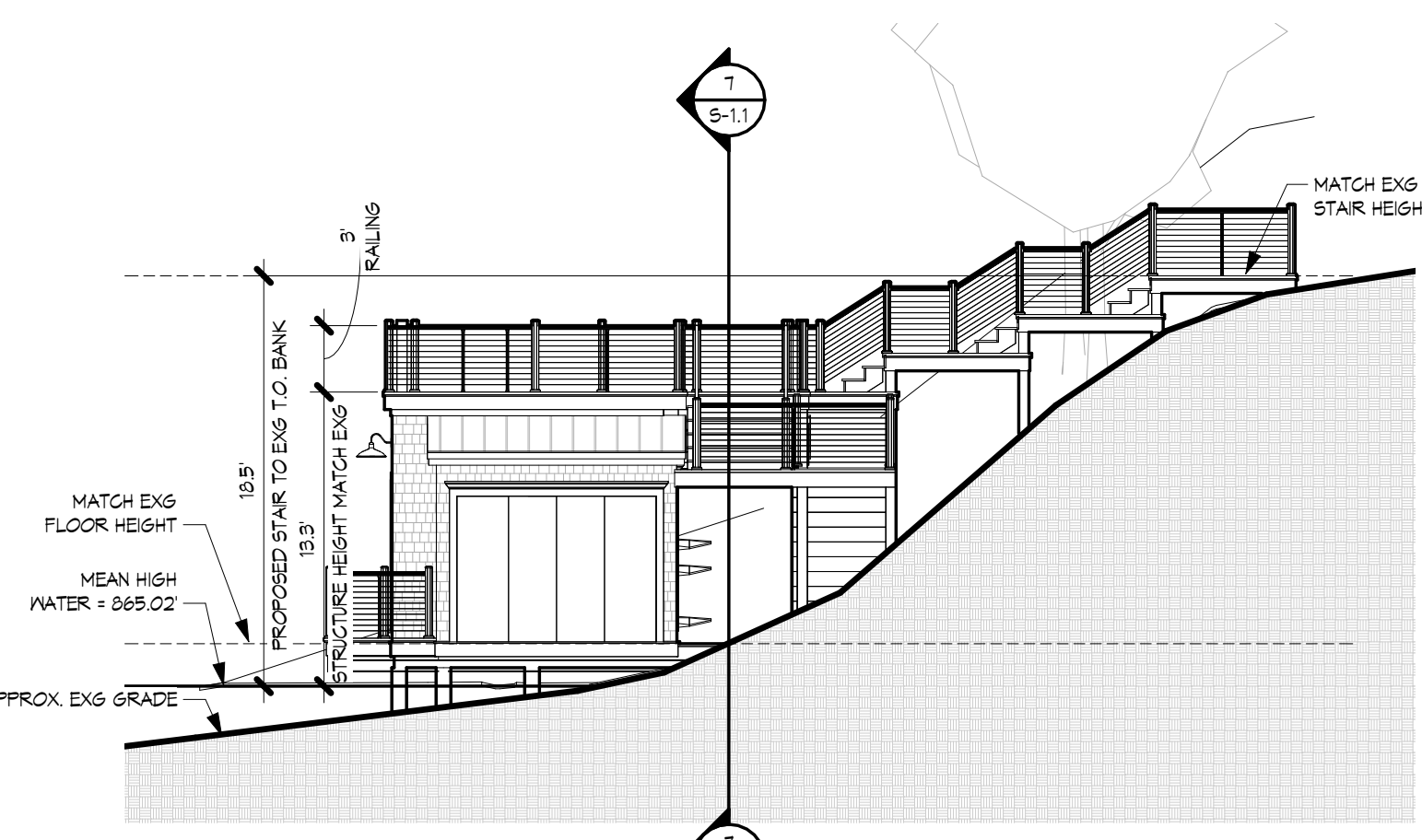
**6 Boathouse Roof Plan**  
SCALE: 1/8" = 1'-0"  
PROJECT NORTH TRUE NORTH



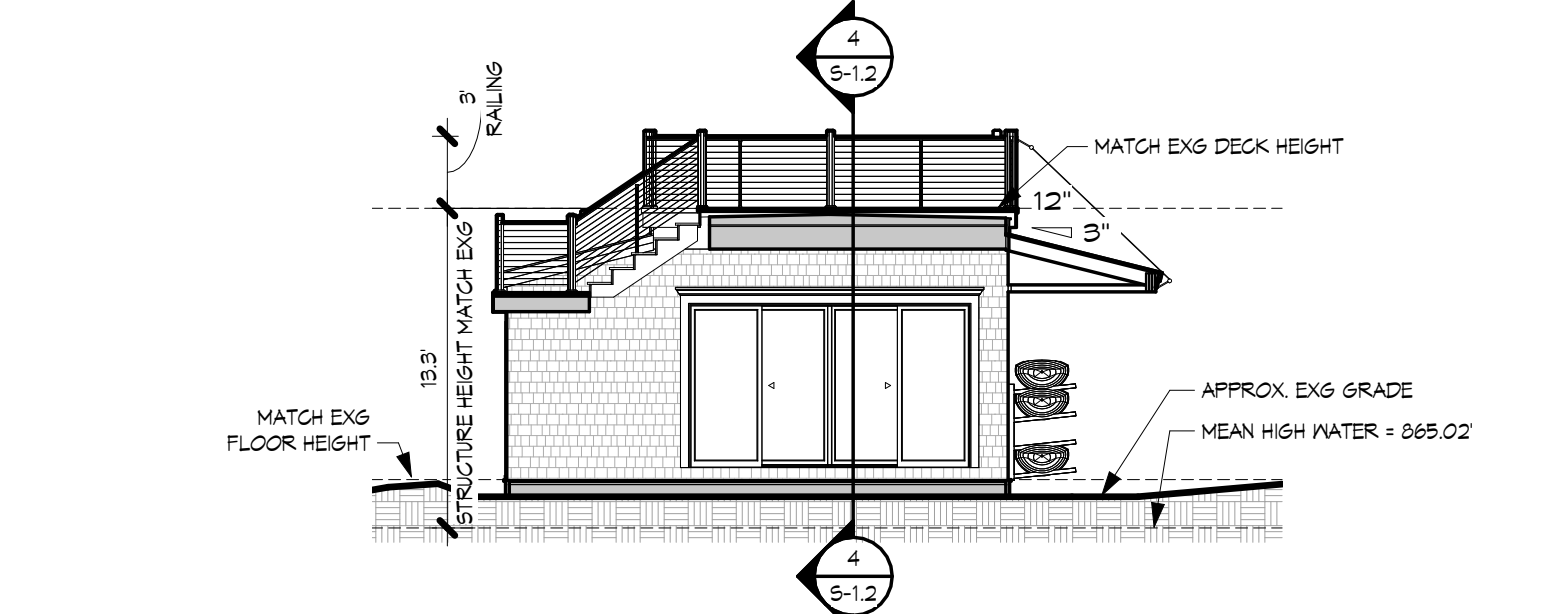
**2 Building Elevation - East**  
SCALE: 1/8" = 1'-0"  
GRAPHIC SCALE: 1 inch = 8 feet



**3 Building Elevation - South**  
SCALE: 1/8" = 1'-0"  
GRAPHIC SCALE: 1 inch = 8 feet



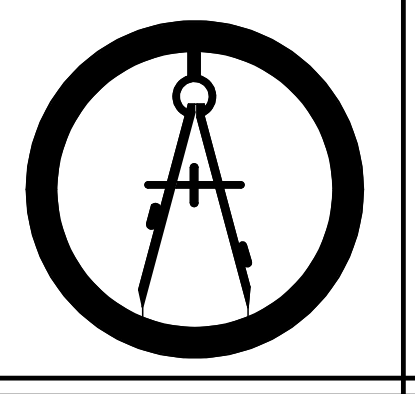
**4 Building Elevation - North**  
SCALE: 1/8" = 1'-0"  
GRAPHIC SCALE: 1 inch = 8 feet



**7 Building Elevation - West**  
SCALE: 1/8" = 1'-0"  
GRAPHIC SCALE: 1 inch = 8 feet



Revisions	
No.	Description



11/7/2025

**S-1.1**

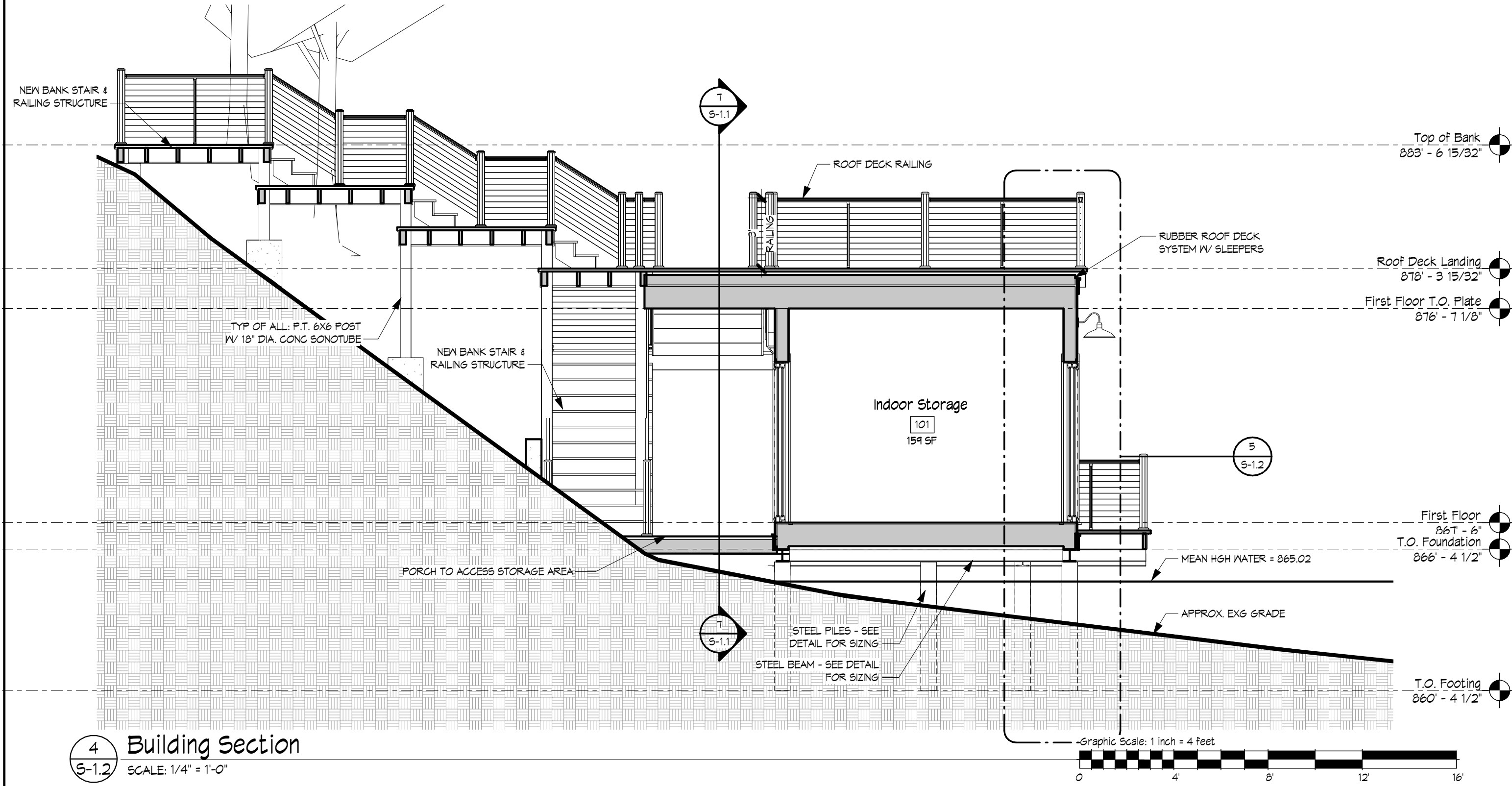
THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS AT THE SITE PRIOR TO THE COMPLETION OF ANY WORK AND PROMPTLY NOTIFY THE ARCHITECT IN WRITING OF ANY DISCREPANCIES FOUND.  
ALL DRAWINGS AND SPECIFICATIONS ARE THE PROPERTY OF THE ARCHITECT AND SHALL BE USED ONLY ON THE JOB DESIGNATED.

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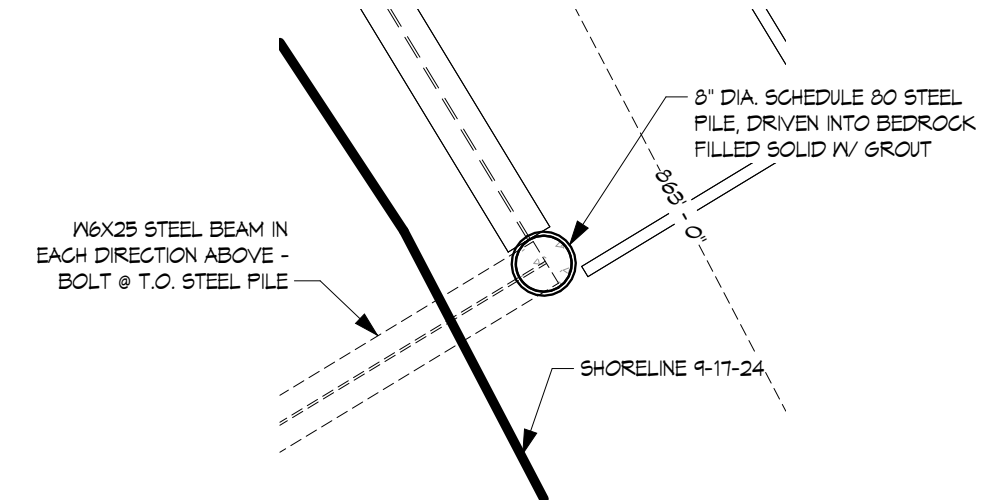
Project Number:	2025-15	Drawn by:	Author
Date:	xx/xx/24	Checked by:	Checker
Scale:	As indicated		

Site Plan

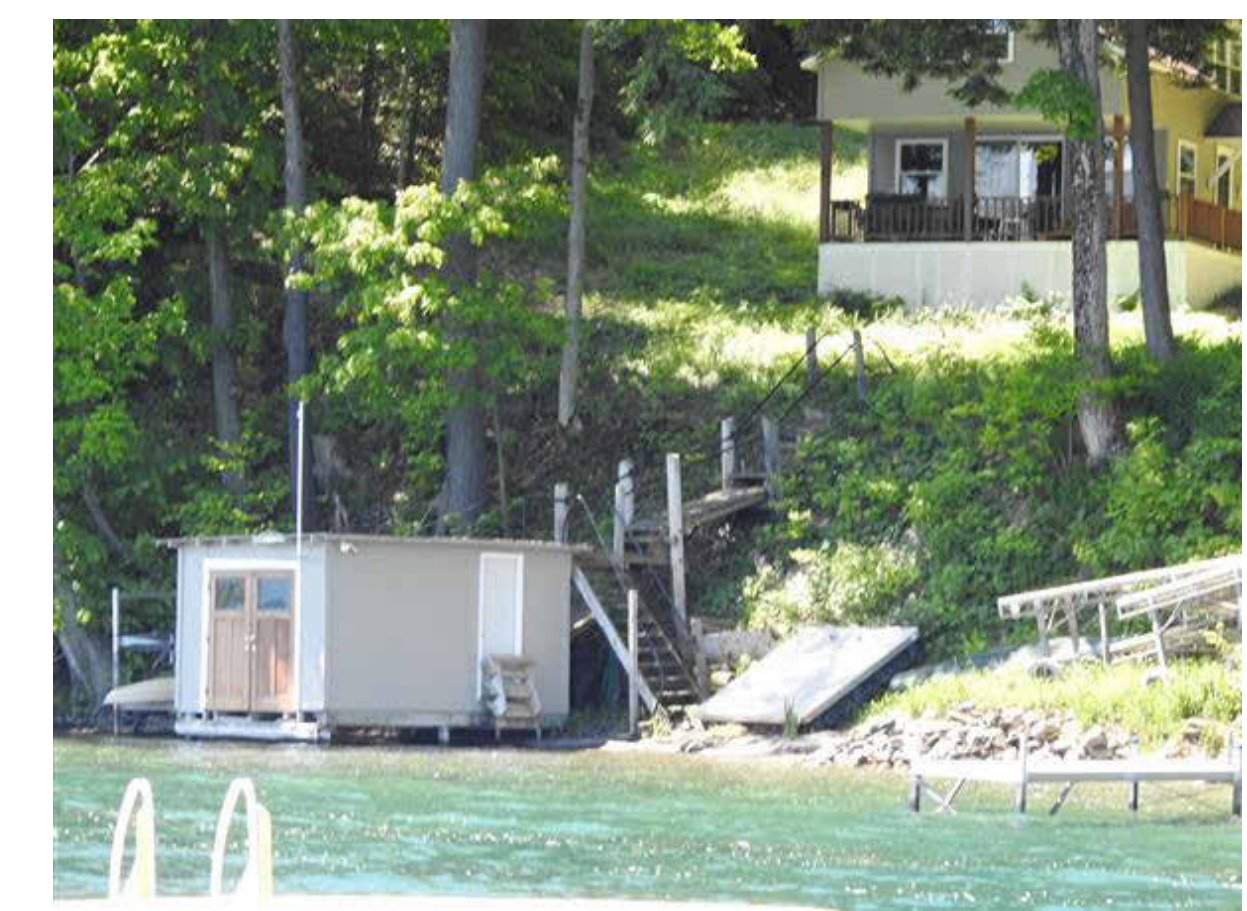




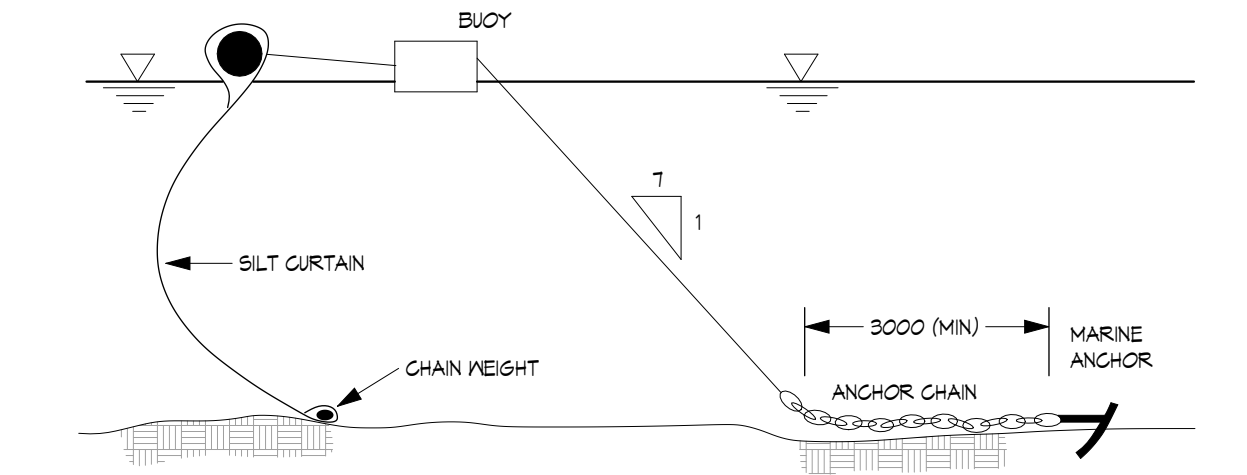
Location Plan



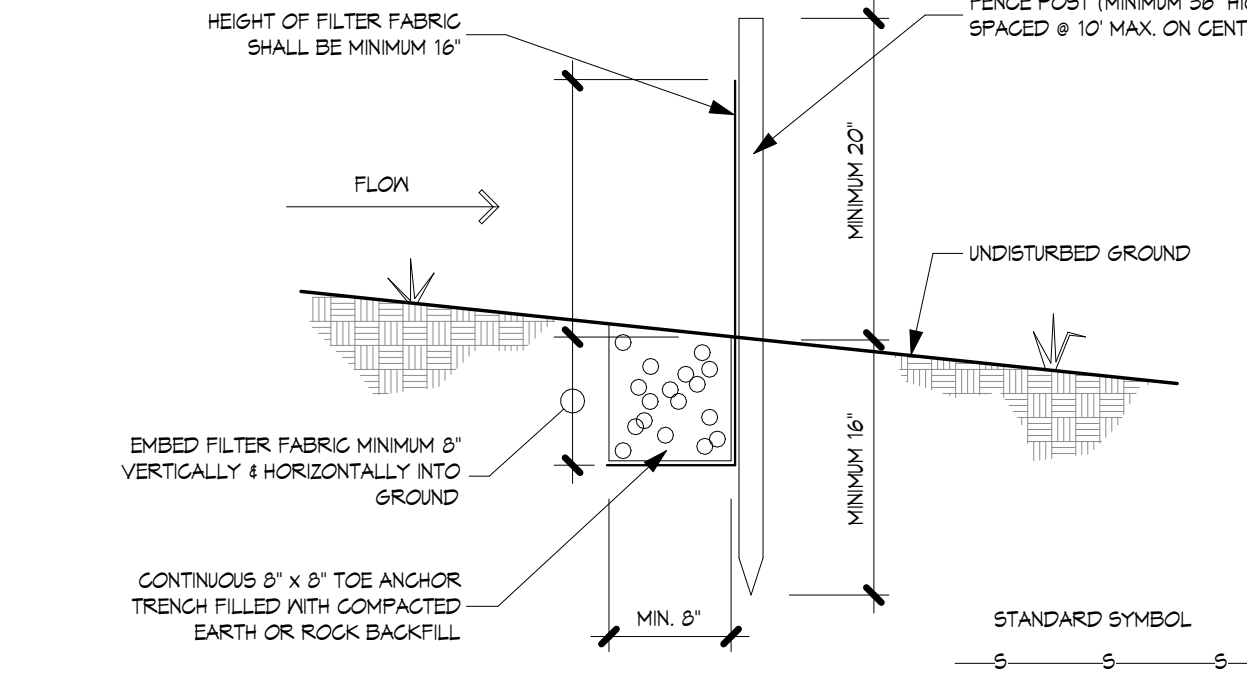
Typical Steel Pile Plan Detail



Existing Site Photos

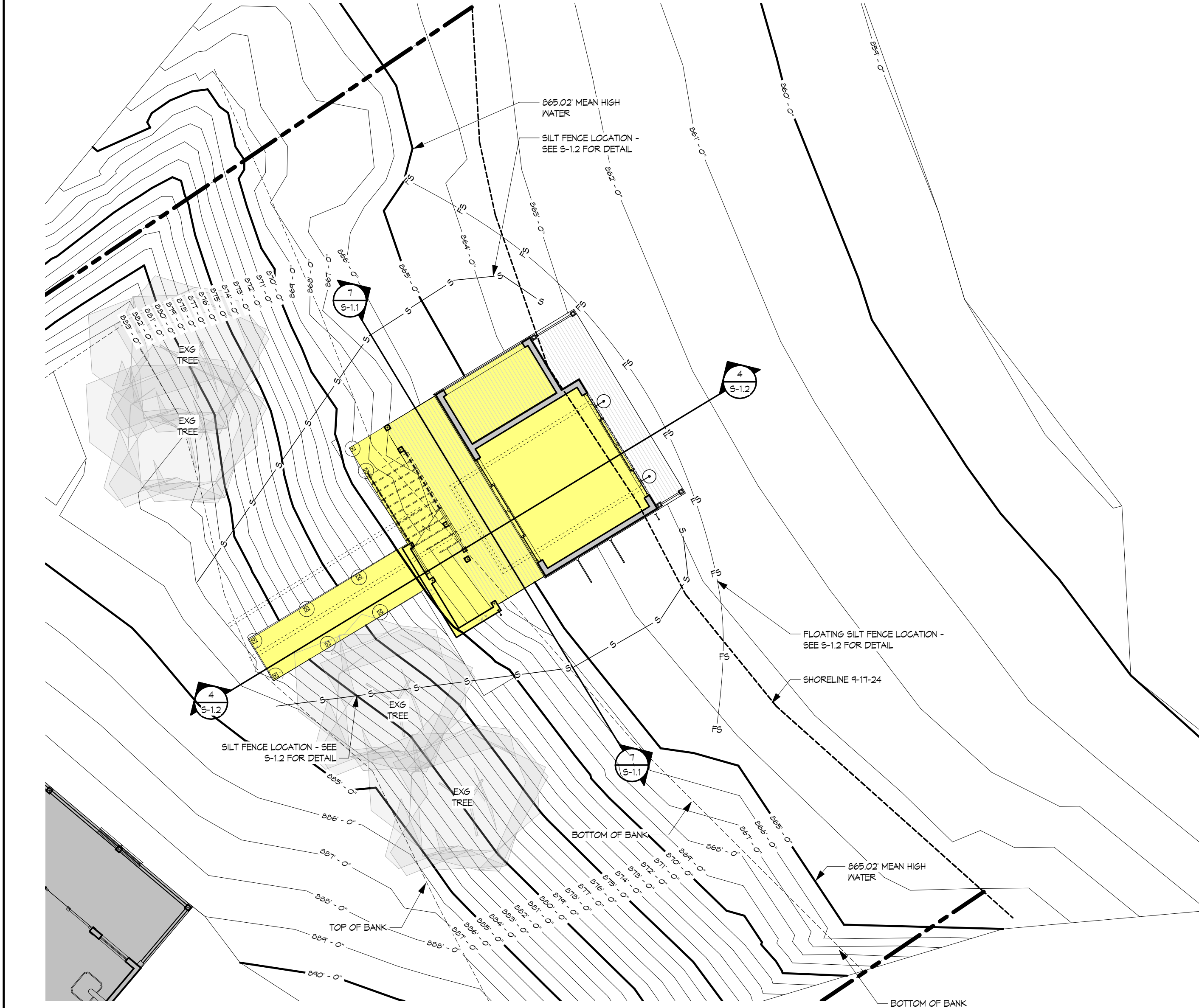


Floating Silt Fence Detail



Typical Steel Pile Detail Section

Silt Fence Detail



Soil, Sediment, Erosion, and Containment Plan

CONSTRUCTION NOTES FOR FABRICATING SILT FENCE

- NOVEN WIRE FENCE TO BE FASTENED SECURELY TO FENCE POSTS WITH WIRE TIES OR STAPLES.
  - FILTER FABRIC TO BE FASTENED SECURELY TO NOVEN WIRE FENCE WITH TIES SPACED AT EVERY 24" ON CENTER (AT TOP AND MID-SECTION).
  - WHEN TWO SECTIONS OF FILTER FABRIC ADJOIN EACH OTHER, THEY SHALL BE OVERLAPPED BY SIX (6) INCHES AND FOLDED.
  - MAINTENANCE SHALL BE PERFORMED AS NEEDED AND MATERIAL REMOVED WHEN "BULGES" DEVELOP IN SILT FENCE.
- |                     |   |
|---------------------|---|
| POSTS:              | 2" HARDWOOD OR STEEL (EITHER "T" OR "U" TYPE) |
| FENCE:              | NOVEN WIRE, 14 GA. (6" MAXIMUM MESH OPENINGS) |
| FILTER FABRIC:      | MIRAFI 100X OR APPROVED EQUAL                 |
| PREFABRICATED UNIT: | MIRAFI ENV/ROFENCE OR APPROVED EQUAL          |

