



(585)428-9198

electric service

[www.DoctorElectricServices.com](http://www.DoctorElectricServices.com)



(585)494-7272

heating & cooling service

[www.UpstateAir.net](http://www.UpstateAir.net)

November 8, 2023

Town of Chili Building Department  
c/o Paul Wanzenried  
3333 Chili Avenue  
Rochester, NY 14624

Re: Letter of Intent, 3240 Chili Avenue, Suite C8

Dear Mr. Wanzenried,

Thank you for taking the time to speak with me about the space in Two Fronts Plaza. This letter is intended to explain what our business does, our intended use of the space and how this conforms to the Town of Chili 2030 Master Plan.

Doctor Electric and Upstate Air provide residential repair and installation services. We currently have ten full-time and two part-time employees. Doctor Electric has been serving residents of Monroe County since 2010. In 2021, we added a sister company, Upstate Air. Generally, our hours of operation are 8:00 am to 5:00 pm, Monday through Saturday. During these hours, we receive a couple of deliveries each day from local supply companies, usually with box-type delivery trucks. Occasionally, a delivery may arrive on a tractor trailer. In regards to our company service vans, they would leave the location each morning and return in the afternoon. We currently have five service vans that would be parked inside the garage space of this location each evening. The size of the space, about 4900 sq. ft., is such that it could allow us to grow by an additional 2-3 service vans, employing an additional 3-6 people.

Our intended use of the space includes some office areas for call taking, dispatching, and bookkeeping. Additionally, training is an important part of our business. This space will allow us to perform in-house technical training for our electricians and HVAC techs. This includes mock electrical and HVAC installation and diagnostics as well as new product and technology training.

On my personal time, I am a volunteer board member and supporter of the International Association of Electrical Inspectors (IAEI) Genesee Chapter. Our chapter promotes the training and education of those currently in the electrical trade as well as recruitment and support for those interested in entering the trade. The Genesee Chapter organizes and holds continuing education seminars periodically throughout the year. These seminars are in the evening for about three hours, and we have food brought in for the attendees. The space, parking and near-by food providers would be able to accommodate one of the small to mid-size seminars.

I'd like to address the 2030 Master Plan and how this proposed use offers a benefit. Two Fronts Plaza is located in the Town's General Business District. This zoning district is typically comprised of retail establishments

offering goods and services to the community. Although our business does not sell tangible products in the traditional "cash and carry" sense, we do provide many residents of Chili with our repair and installation services.

This location in Two Fronts Plaza offers an opportunity for Doctor Electric/Upstate Air to offer another form of services: extending our commitment to education to the residents of Chili. With the rapidly evolving push for "electrification" and "efficiency", there is a need more than ever to educate consumers and homeowners of new technologies. Electric Vehicle Chargers, stand-by generators and high efficiency heat pumps are a few of the things we receive inquiries about.

The training area in this space (see attached sketch) can be utilized for a "neighborhood" class just as well as a class for our technicians. Residents would be able to see some of these products in use and how they can benefit from them. There also is the opportunity to sponsor DIY or "how to" classes to promote safety and self-reliance. You would be surprised how many people don't know how to reset a circuit breaker or change the filter in their furnace! Being in a retail plaza, I would anticipate some walk-in traffic. With that in mind, our "store front" would have a customer lobby and product display area offering an inviting, neighborly presentation.

Sincerely,



Matt Coccia, president  
Doctor Electric & Upstate Air









204  
10/20/20

# 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>			
<div style="font-size: 1.2em; font-family: cursive;">Doctor Electric + Upstate Air</div>			
Name of Action or Project:			
<div style="font-size: 1.2em; font-family: cursive;">Special Use Permit</div>			
Project Location (describe, and attach a location map):			
<div style="font-size: 1.2em; font-family: cursive;">3240 Chili Ave Suite C-8</div>			
Brief Description of Proposed Action:			
<div style="font-size: 1.2em; font-family: cursive;">Special use permit for operation of Doctor Electric and Upstate Air, an electrical/HVAC contractor.</div>			
Name of Applicant or Sponsor:		Telephone: <div style="font-size: 1.2em; font-family: cursive;">(585) 451-0500</div>	
<div style="font-size: 1.2em; font-family: cursive;">MATTHEW COCCIA</div>		E-Mail: <div style="font-size: 1.2em; font-family: cursive;">matt@doctorelectric</div>	
Address:		<div style="font-size: 1.2em; font-family: cursive;">services.com</div>	
<div style="font-size: 1.2em; font-family: cursive;">117 STOTTLE Road</div>			
City/PO:		State:	Zip Code:
<div style="font-size: 1.2em; font-family: cursive;">Churchville</div>		<div style="font-size: 1.2em; font-family: cursive;">NY</div>	<div style="font-size: 1.2em; font-family: cursive;">14428</div>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
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.			YES
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO
If Yes, list agency(s) name and permit or approval:			YES
3. a. Total acreage of the site of the proposed action?			< 1.0
b. Total acreage to be physically disturbed?			0
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?			< 1.0
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input 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 checked="" type="checkbox"/>	<input 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?		NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Are public transportation services available at or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Does the proposed action meet or exceed the state energy code requirements?		NO	YES
If the proposed action will exceed requirements, describe design features and technologies: <u>UNKNOWN</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?		NO	YES
If No, describe method for providing potable water: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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?		NO	YES
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<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?		NO	YES
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			
_____			
_____			

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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, <div style="margin-left: 20px;">           a. Will storm water discharges flow to adjacent properties?            b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?         </div> If Yes, briefly describe:	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input 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>Matthew Coia MATTHEW COCCIA</u> Date: <u>11/30/23</u> Signature: <u>Matthew Coia</u> Title: <u>president</u>		



# TOWN OF CHILI

3333 Chili Avenue, Rochester, NY 14624

Tel: 889-6143 Fax: 889-8710

[www.townofchili.org](http://www.townofchili.org)

Email: [krogers@townofchili.org](mailto:krogers@townofchili.org)

## PLANNING BOARD APPLICATION

Hearing Date: 1/9/2024

A licensed State of New York Engineer, Architect, or Surveyor MUST prepare all plans. ALL applicable items MUST be shown on said drawing. The required number of copies of all maps, drawings and plans must be FOLDED to approximately 8.5" x 11" with project name shown and be accompanied by the appropriate number of copies of this application. Any exception to these requirements must receive prior approval from the building inspector.

Project Name <u>Doctor Electric/Upstate Air</u>	Project Location <u>3240 Chili Ave Suite C-8</u>
Tax Account # <u>146.09-2-20</u>	Present Zoning <u>General Business</u>
Engineer Name / Address / ZIP <u>N/A</u>	
Phone <u>(585) 889-0890</u>	Email

Owner Name <u>Chili ME LLC</u>	Applicant Name <u>MATTHEW COCCIA</u>
Street Address <u>4300 E Broad St, Ste A</u>	Street Address <u>117 Stottle Rd</u>
City / State / ZIP <u>Columbus, Ohio, 43213</u>	City / State / ZIP <u>Churchville, NY 14428</u>
Phone/ Email <u>614-285-6505 / Retail@mereign.com</u>	Phone/ Email <u>(585) 889-0890 / Matt@doctorelectricservices.com</u>

### Reason for Appearing:

	# of Proposed Lots	Copies Req'd
<input type="checkbox"/> Subdivision Sketch Plan	_____	16
<input type="checkbox"/> Subdivision Preliminary	_____	22
<input type="checkbox"/> Subdivision Final	_____	16
<small>(fee to be paid at preliminary stage if requesting final to be waived)</small>		
<input type="checkbox"/> Resubdivision	_____	22
<input type="checkbox"/> Preliminary Site Plan	_____	22
<input type="checkbox"/> Final Site Plan	_____	16
<small>(fee to be paid at preliminary stage if requesting final to be waived)</small>		
<input checked="" type="checkbox"/> Special Use Permit	<input type="checkbox"/> Special Use Permit Renewal	16
<input type="checkbox"/> Rezoning From _____ to _____		22
<input type="checkbox"/> Informal Discussion		16

(A letter of intent is required with each application with copies as indicated.)

**Interest Disclosure:** Does any officer or employee of this State, County, or Town have any interest in this application pursuant to the provisions of Section 809 of the General Municipal Law? If "YES", on a separate sheet of paper indicate the Name(s), Address and the nature and extent of the interest in the application. ☐ YES ☒ NO

**Notarized Signature of Property Owner(s) If Not Applicant:**

Signature: See attached Date: \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

### Additional Submissions:

<input checked="" type="checkbox"/> Environmental Assessment Form (same quantity as application/plans)
<input type="checkbox"/> Subdivision Drainage Review Checklist (4 copies)
<input type="checkbox"/> Plans in electronic DWG/PDF format (1 Flash Drive/USB - Required)
<input type="checkbox"/> Misc.

### Additional Information:

	YES	NO
Have stamped landscaping plans been submitted? (stamped by Licensed Landscape Architect)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is the property located in a flood plain or wetland?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "YES" the limits are defined by whom? ( ) USA Corps of Eng. ( ) NYSDEC ( ) Both		
Is the property in an Agriculture District?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Size of parcel acreage <u>17.98</u>		

**Ownership Intentions:** What is the intent of the applicant with this property's application?

☐ OWN ☒ LEASE

**Signature of Applicant:**

Signature: Matthew Coccia Date: 11/30/23

**FOR OFFICE USE ONLY:** Fees Paid: Preliminary: \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_ Final: \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_



Company: Chili ME LLC

By: [Signature]

Name: Benjamin Collier

Title: Authorized Signatory

Date: 12/1/2023

For use with attached  
Planning Board Application  
for Doctor Electric to the  
Town of Chili, New York.

The foregoing instrument was acknowledged before me on the 1<sup>ST</sup> day of December 20 23 (date) by Benjamin Collier (name of person acknowledging), on behalf of Chili ME LLC.



MELINDA N MCKNIGHT  
Notary Public, State of Ohio  
My Commission Expires 09-09-2024

Notary Public

Melinda McKnight

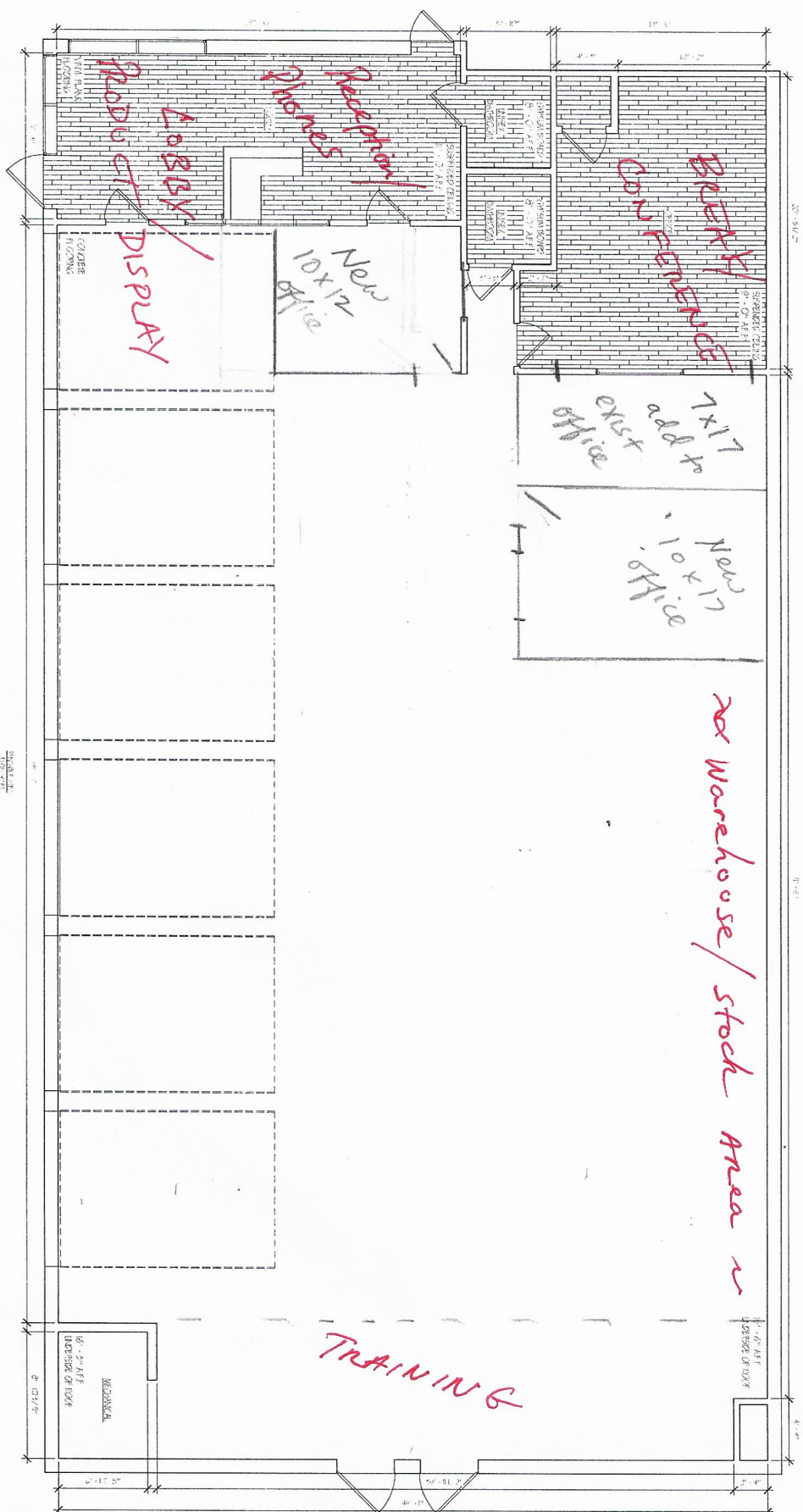
My commission expires on 9-9-24

Existing:  
 Office 615 sg'  
 Bathrooms 72 sg'

New:  
 Office 409 sg'

Training:  
 320 sg'

Trucks/warehouse:  
 ~ 3400



① Shop/Garage C-8  
 1/4" = 1'-0"