



4/13/24 PB Approved w/ cdn operation
end @ 11pm

Town of Aurora Town Board
300 Gleed Avenue, East Aurora, New York 14052

Special Use Permit Application Form

I. PROJECT INFORMATION (Applicant/Petitioner):

Business/Project Name: EA Golf Barn
Business/Project Address: 600 Olean Rd, East Aurora, NY 14052
Applicant Name: Harrison Kelly
Mailing Address: 174 Main Street #101
City East Aurora State NY ZIP 14052
Phone 716-867-5047 Fax - Email EAGolfBarn@gmail.com
Interest in the property (ex: owner/purchaser/developer) Owner

II. PROPERTY OWNER INFORMATION (If different than Applicant AND the Owner does not sign below, please submit and original, notarized "Owner Authorization" form - attached):

Property Owner(s) Name(s) Olean LLC
If a corporate, please name a responsible party/designated officer: Harrison Kelly III
Address 2040 Grover Rd
City West Falls State NY ZIP 14170
Phone 7168675047 Fax - Email hkellyiii@gmail.com

III. SPECIAL USE AND PROPERTY INFORMATION:

Property Address 600 Olean Road, East Aurora, NY 14052
SBL# 176.00-4-25.1

Describe Special Use requested (use additional pages if needed): Family-friendly,
indoor golf simulation and indoor miniature golf course with a quick serve restaurant and bar

Property size in acres 14.4 Property Frontage in feet 791
Zoning District C-2 Surrounding Zoning C-2, RR, Ag
Current Use of Property Vacant Land
Size of existing building(s): N/A sf Size of proposed building(s) 20,000 sf
Present/Prior tenant/use: Vacant land
Parking spaces: Existing: 0 Proposed additional spaces: 80 Total #: 80

4/19/24 - working group CS, JM to discuss screening, hours, construction hours etc

Proposed water service: X public _____ private (well) _____ n/a Is this existing Y/N
 Proposed sanitary sewer: _____ public X private (septic) _____ n/a Is this existing Y/N

Hours of operation (if applicable):

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	By Appt.
Hours	12	12.	12	13	13	13	8	X

Peak hours: Weekends
 Number of employees (if applicable): Full-time 4 Part-time 6 Seasonal X

Upon approval of this application, the applicant intends to apply for: (Check all that apply)
 a. Building Permit X
 b. Sign Permit X

IV. SIGNATURE (*This application must be signed by the applicant/petitioner. If the applicant is not the owner of the property, a separate owner authorization form must be submitted – see pg. 4*)

[Signature]
 Signature of Applicant/Petitioner

Harrison Kelly III
 Print name of Applicant/Petitioner

State of New York; County of Erie

On the 6th day of March in the year 2024 before me, the above individual appeared, personally known to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same for the purposes therein stated.

[Signature]
 Notary Public

(Notary stamp) **KARIN L. DOJNIK**
 Notary Public, State of New York
 Reg. # 01DO6445148
 Qualified in Erie County
 Commission Expires December 12, 2026

Office Use Only: Date received: _____ Receipt #: _____
 Application reviewed by: _____