



CASE NO. 1519

DATE OF HEARING 10/16/25

Town of Aurora Zoning Board of Appeals  
575 Oakwood Avenue, East Aurora, New York 14052

### Zoning Board of Appeals Application Form

#### I. TYPE OF REQUEST

☒ AREA VARIANCE ☐ SPECIAL USE PERMIT ☐ USE VARIANCE ☐ INTERPRETATION

#### II. APPLICANT/PETITIONER

Applicant's Name Arthur + Maryann Koske  
Address 1711 Center St.  
City East Aurora State NY ZIP 14052  
Phone 716 N/A Email mkos er.com  
Interest in the (purchaser/developer) owner

#### III. PROPERTY OWNER INFORMATION (If different from applicant information.)

Property Owner(s) Name(s) SAME AS ABOVE  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

#### III. PROPERTY INFORMATION

Property Address 1711 Center St. East Aurora, NY  
SBL# 200.00-1-12  
Property size in acres 1.48 Acres Property Frontage in feet 152  
Zoning District RR Surrounding Zoning RR  
Current Use of Property Home / Personal

#### IV. REQUEST DETAIL

(check all that apply)

☒ Variance from Ordinance Section(s) # 116-18A(3)  
☐ Special Use Permit for: \_\_\_\_\_  
☐ Use Variance for: \_\_\_\_\_  
☐ Interpretation of \_\_\_\_\_

**V. SIGNATURES** (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. 5 )

Maryann L. Koske  
Signature of Applicant/Petitioner

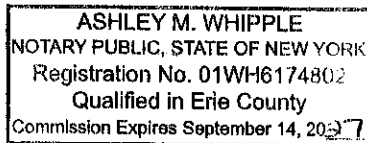
Maryann L. Koske  
Print name of Applicant/Petitioner

State of New York; County of Erie

On the 25 day of Aug in the year 2025 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.

Ashley M. Whipple  
Notary Public

(Notary stamp)



-----  
Office Use Only:      Date received: \_\_\_\_\_      Receipt #: \_\_\_\_\_

Application reviewed by: \_\_\_\_\_

ECDP ZR-1 form sent to EC: \_\_\_\_\_      Hearing publication date: \_\_\_\_\_

**PREVIOUS APPEAL(S):**

A previous appeal to the Zoning Board of Appeals ( ) has ( ) has not been made with respect to this property.

**Previous appeals:**

Date: \_\_\_\_\_ Type of Appeal: \_\_\_\_\_      Granted \_\_\_\_\_ Denied \_\_\_\_\_

Date: \_\_\_\_\_ Type of Appeal: \_\_\_\_\_      Granted \_\_\_\_\_ Denied \_\_\_\_\_

## PETITIONER'S LETTER OF INTENT

Please describe in detail the proposed project, reason the variance and/or special use permit is being requested and any additional information that may be helpful to the Zoning Board of Appeals in deciding this appeal: (attach additional pages if needed)

See attached description of proposed project.

### TO BE COMPLETED ONLY WHEN A USE VARIANCE IS BEING REQUESTED:

A Use Variance is requested because the applicable regulations and restrictions in the Zoning Code of the Town of Aurora have caused unnecessary hardship as demonstrated by the following:

- 1) I cannot realize a reasonable return on my property for each and every permitted use allowed in the current zoning classification as demonstrated by the accompanying financial evidence (provide financial evidence to support your argument).

Financial Evidence Provided Yes \_\_\_\_\_ No \_\_\_\_\_ (financial evidence is required per NYS Town Law)

- 2) Describe why your alleged hardship relating to the subject property is unique and does not apply to other properties in the zoning district or neighborhood: \_\_\_\_\_

- 3) Describe why you believe that the essential character of the neighborhood/community will not change if the Zoning Board of Appeals grants you a use variance: \_\_\_\_\_

- 4) Is your need for a use variance a result of you own actions (is your difficulty self-created)? Please explain: \_\_\_\_\_

(Attach additional pages if needed)

Arthur & Maryann Koske  
1711 Center Street  
East Aurora, NY 14052

Zoning Board of Appeals Application Form

Petitioner's Letter of Intent

Description of proposed project --

To construct a shed with a free-floating structure to house our snow plow out of season and other out of season garden equipment. We want the structure in the location as it will be easiest to access the plow when needed with easy access from our driveway. Location will not create a less-than esthetic view from the road.

Also, we chose the location so that the structure does not block our view of the back yard park-like setting.

Current location is 5' from the house foundation and it will be more than 10' from our property line. If the structure is located 10' from the house foundation, it will be less than 10' from the property line.

**SITE PLAN OR ZONING REFERRAL TO COUNTY OF ERIE, N.Y.  
AND REPLY TO MUNICIPALITY**

Submit this form with full statement of proposed action (as described in GML 239-m(c)) at www.Erie.gov/IRonline, OR mail a hard copy (retain a copy for your files) to: Erie County Division of Planning, 95 Franklin Street, Room 1053, Buffalo, N.Y., 14202

DO NOT WRITE IN THIS SPACE

Case No.: 571-ZR-25

Postmark/Delivery Date: 9/17/25

The proposed action described herein is referred in accordance with the provisions of NYS General Municipal Law §239 l - nn.  
A Municipal Referral Map is available to help determine whether an applicable action is subject to referral.

**Description of Proposed Action**

**1. Name of Municipality:** Town of Aurora

§239-m(4)(b) provides that the county shall have 30 days after receipt of a full statement of the proposed action to reply.

If the county fails to reply within such period, the referring body may take final action.

However, any county reply received after 30 days but 2 or more days prior to final action by the referring body shall be subject to §239-m(5).

The referring body shall file a report of its final action with the county within 30 days per §239-m(6).

**2. Hearing Schedule:**      **Date** 10/16/2025      **Time** 7:00pm      **Location** 575 Oakwood Ave., East Aurora

**3. Action is before:**      ☐ Legislative Body      ☒ Board of Appeals      ☐ Planning Board

**4. Action consists of:**      ☐ New Ordinance      ☐ Rezone/Map Change      ☐ Ordinance Amendment

☐ Site Plan      ☒ Variance      ☐ Special Use Permit      ☐ Other: \_\_\_\_\_

**5. Location of Property:**      ☐ Entire Municipality      ☒ Address: 1711 Center St

**5a. S.B.L. of Property:** 200.00-1-12

**6. Referral required as site is within 500' of:**      ☐ State or County Property/Institution      ☐ Municipal Boundary      ☐ Farm Operation located in an Agricultural District

☐ Expressway      ☒ County Road      ☐ State Highway      ☐ Proposed State or County Road, Property, Building/Institution, Drainageway

**7. Proposed change or use:**      Proposed accessory building (shed) closer to residence than allowed by  
(specify the action, such as the scope of variances or site plans)      Town Code

**8. Other remarks:** \_\_\_\_\_

**9. Submitted by:** Martha Libroek, Town Clerk      Email: townclerk@townofaurora.com

**10. Return Address:** 575 Oakwood Ave., East Aurora, NY 14052

**Reply to Municipality by Erie County Division of Planning**

Receipt of the above-described proposed action is acknowledged on 9/17/25. The Division herewith submits its review and reply under the provisions of applicable state and local law, based on the information submitted with this referral.

1. ☐ The proposed action is not subject to review under the law.
2. ☐ Comment on proposed action is attached hereto.
3. ☐ The proposed action is subject to review; Recommendation on Proposed Action is attached hereto.
4. ☒ No Recommendation; proposed action has been reviewed and determined to be of local concern.

By the Division of Planning:

Collette McDaniel

Date: 9/19/25

SUPERVISOR  
Charles D. Snyder  
(716) 652-7590  
[csnyder@townofaurora.com](mailto:csnyder@townofaurora.com)



TOWN CLERK  
Martha L. Librock  
(716) 652-3280  
[townclerk@townofaurora.com](mailto:townclerk@townofaurora.com)

## TOWN OF AURORA

Aurora Municipal Center  
575 Oakwood Avenue, East Aurora, NY 14052  
[www.townofaurora.com](http://www.townofaurora.com)

### TOWN COUNCIL MEMBERS

Luke Wochensky  
[lwochensky@townofaurora.com](mailto:lwochensky@townofaurora.com)

James F. Granville  
[jgranville@townofaurora.com](mailto:jgranville@townofaurora.com)

Joseph M. McCann  
[jmccann@townofaurora.com](mailto:jmccann@townofaurora.com)

Raymond M. Wrazen  
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SUPT. OF HIGHWAYS  
David M. Gunner  
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ASSESSOR  
Stephen R. Pigeon  
[assessor@townofaurora.com](mailto:assessor@townofaurora.com)  
(716) 652-0011

DIR. OF RECREATION  
Christopher Musshafen  
(716) 652-8866  
[chris@townofaurora.com](mailto:chris@townofaurora.com)

TOWN ATTORNEY  
Brigid M. Maloney

TOWN JUSTICE  
Jeffrey P. Markello  
Anthony DiFilippo IV

HISTORIAN  
Robert L. Goller  
(716) 652-7944  
[historian@townofaurora.com](mailto:historian@townofaurora.com)

FAX: (716) 652-3507

September 8, 2025

Arthur and Maryann Koske  
1711 Center Street  
East Aurora, NY 14052

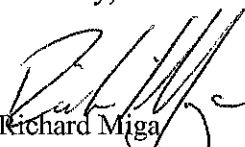
Mr. and Mrs. Koske:

The Building Department has reviewed your request to construct *an accessory structure (shed) at 1711 Center Street. (SBL 200.00-1-12)*. The request has been denied because it fails to meet the requirement for *an accessory building/structure setback from the dwelling*.

*Sections 116-18A(3): Accessory Building/Structures in R Districts*  
*Required: Nearer than 10 feet to any dwelling unless attached thereto and considered part thereof for purposes of yard measurements.*  
*Requested: 5' from dwelling on the south side.*  
*Variance: 5'*

This letter serves as notice that we have received the application and fee for the Zoning Board of Appeals. You will receive notification from the Town Clerk with the date and time of the next available hearing. If you have any questions, please contact our office at 652-7591.

Sincerely,

  
Richard Miga  
Assistant Code Enforcement Officer

# Short Environmental Assessment Form

## Part 1 - Project Information

### Instructions for Completing

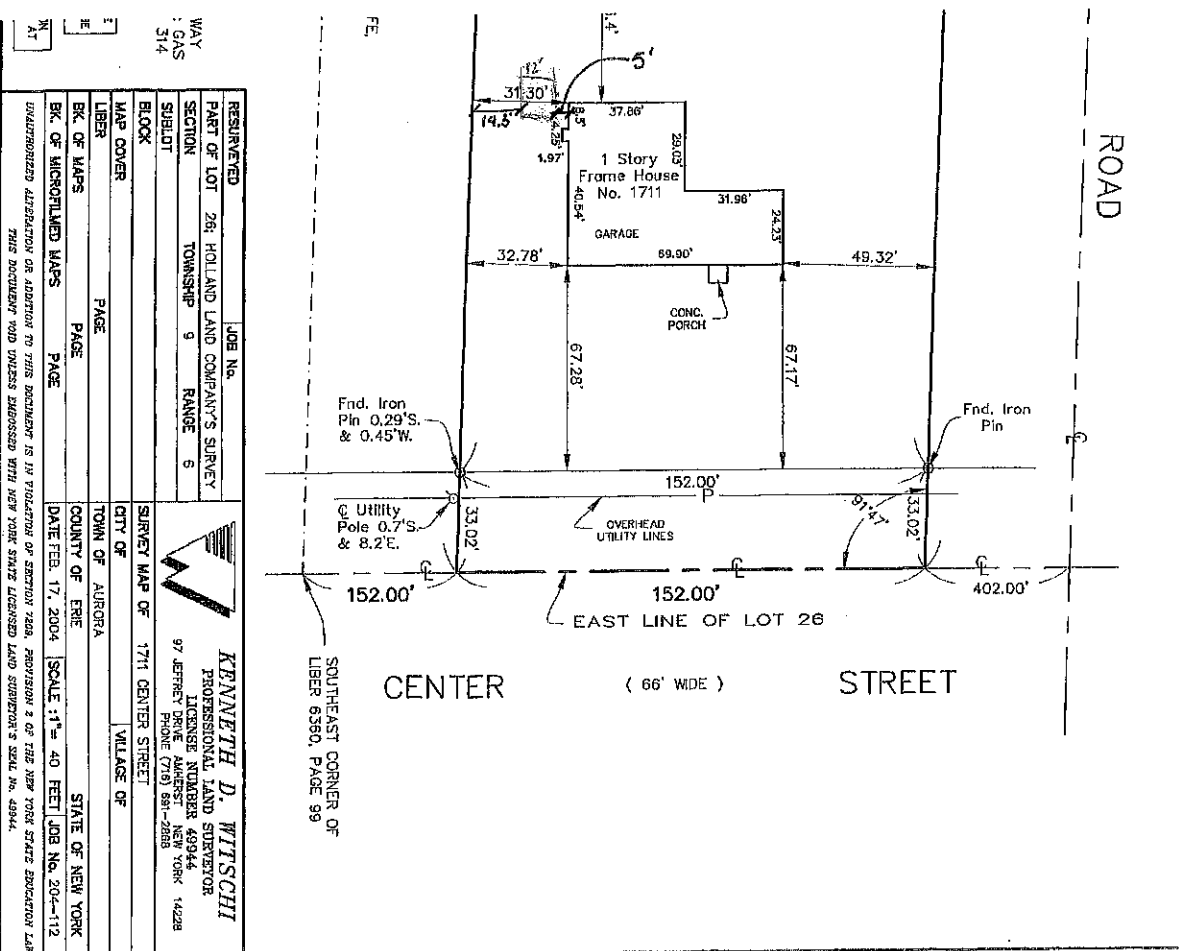
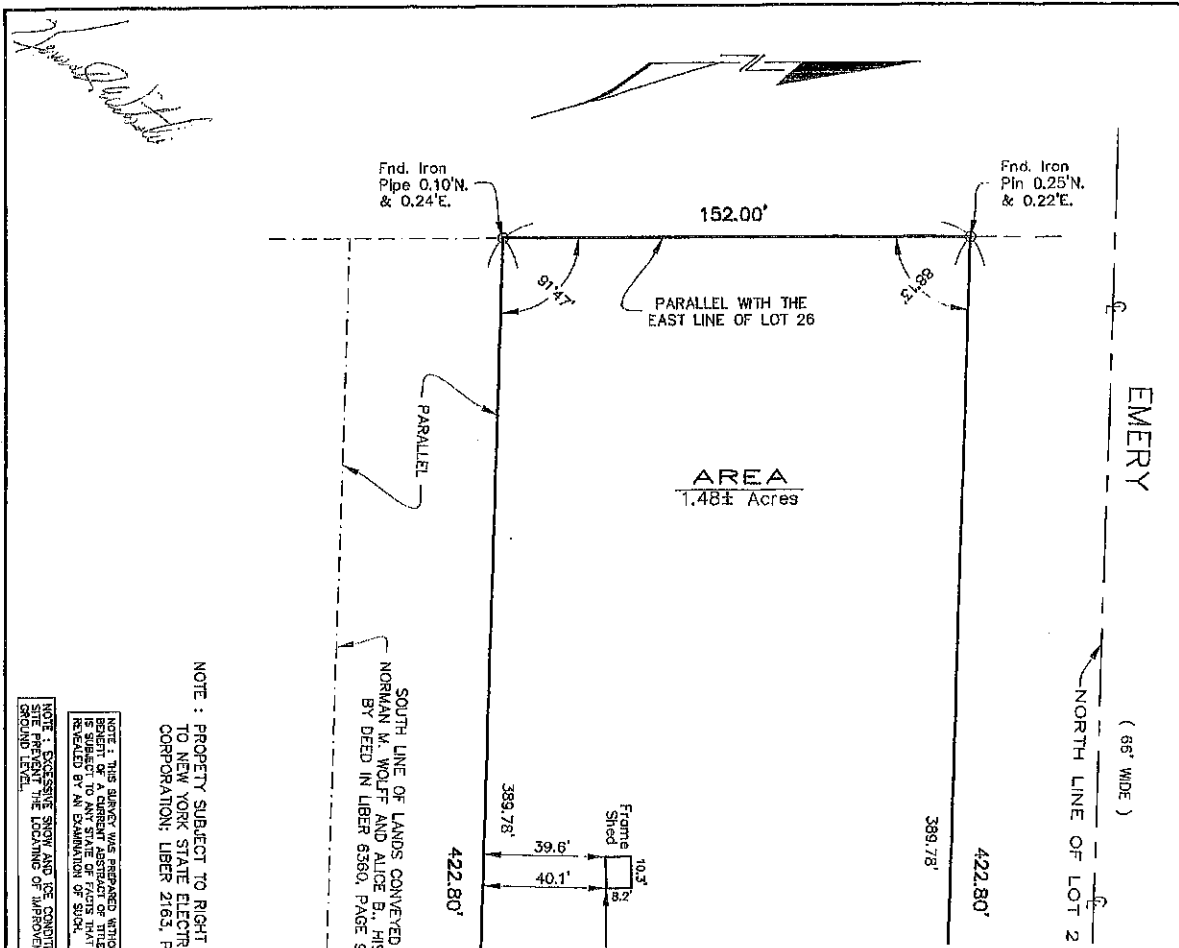
**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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:<br><b>Accessory Structure</b>                                                                                                                                                                                                                                                                                                                                                  |  |                                     |                           |
| Project Location (describe, and attach a location map):<br><b>1711 Center St., Southwest of frame house - see attached survey</b>                                                                                                                                                                                                                                                                         |  |                                     |                           |
| Brief Description of Proposed Action:<br><b>Shed</b>                                                                                                                                                                                                                                                                                                                                                      |  |                                     |                           |
| Name of Applicant or Sponsor:<br><b>Arthur Maryann Koske</b>                                                                                                                                                                                                                                                                                                                                              |  | Telephone:<br>E-Mail: <b>mk</b>     |                           |
| Address:<br><b>1711 Center St.</b>                                                                                                                                                                                                                                                                                                                                                                        |  |                                     |                           |
| City/PO:<br><b>East Aurora</b>                                                                                                                                                                                                                                                                                                                                                                            |  | State:<br><b>NY</b>                 | Zip Code:<br><b>14052</b> |
| 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 checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/>  |
| 3. a. Total acreage of the site of the proposed action?                                                                                                                                                                                                                                                                                                                                                   |  | <b>1.48</b> acres                   |                           |
| b. Total acreage to be physically disturbed?                                                                                                                                                                                                                                                                                                                                                              |  | <b>.003</b> acres                   |                           |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?                                                                                                                                                                                                                                                                                    |  | <b>1.48</b> acres                   |                           |
| 4. Check all land uses that occur on, are adjoining or 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)<br><input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):<br><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?                                                                                                                                                                                                                                                                      | NO                                  | YES                                 |                          |
|                                                                                                                                                                                                                                                                                                                                                                                      | <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 type="checkbox"/>            |                          |
| b. Are public transportation services available at or near the site of the proposed action?                                                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                          |
| c. Are any pedestrian accommodations or bicycle routes available on or near the 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?                                                                                                                                                                                                                                                                                                       | NO                                  | YES                                 |                          |
| If the proposed action will exceed requirements, describe design features and technologies:<br>_____<br>_____                                                                                                                                                                                                                                                                        | <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: _____<br>_____                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                          |
| 11. Will the proposed action connect to existing wastewater utilities?                                                                                                                                                                                                                                                                                                               | NO                                  | YES                                 |                          |
| If No, describe method for providing wastewater treatment: _____<br>_____                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <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? | NO                                  | YES                                 |                          |
|                                                                                                                                                                                                                                                                                                                                                                                      | <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"/>            |                          |
| 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 type="checkbox"/>            |                          |
| 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: _____<br>_____<br>_____                                                                                                                                                                                                                                                                 |                                     |                                     |                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                   |                                     |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:<br><input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional<br><input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" 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?<br>If Yes,                                                                                                                                                                                                                                                                                                     | NO                                  | YES                      |
| 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)?<br>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)?<br>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?<br>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?<br>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><br><br>Applicant/sponsor/name: <u>Maryann Koske</u> Date: <u>9/4/25</u><br>Signature: <u>Maryann Koske</u> Title: <u>Owner</u>                                                                                                                                                                              |                                     |                          |



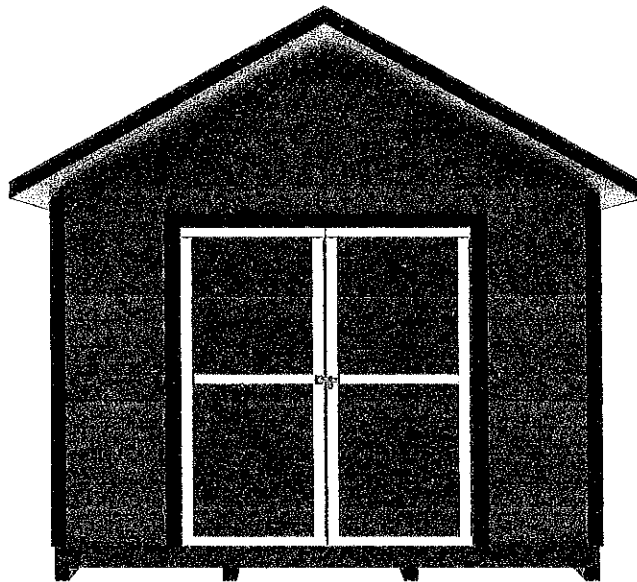
| RESERVED                                                                                                                               | JOB No.                               |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| PART OF LOT 26, HOLLAND LAND COMPANY'S SURVEY                                                                                          |                                       |
| SECTION 9                                                                                                                              | RANGE 5                               |
| SUBDIVISION                                                                                                                            |                                       |
| BLOCK                                                                                                                                  |                                       |
| MAP COVER                                                                                                                              |                                       |
| LIBER                                                                                                                                  |                                       |
| BK. OF MAPS                                                                                                                            | PAGE                                  |
| BK. OF MICROFILMED MAPS                                                                                                                | PAGE                                  |
| DATE FEB. 17, 2004                                                                                                                     | SCALE: 1" = 40 FEET (JOB No. 204-112) |
| UNAUTHORIZED ALTERATION OR ADDITION TO THIS DOCUMENT IS IN VIOLATION OF SECTION 160A, PROVISION 2 OF THE NEW YORK STATE EDUCATION LAW. |                                       |
| THIS DOCUMENT VOID UNLESS EMPLOYED WITH NEW YORK STATE LICENSED LAND SURVEYOR'S SEAL No. 49944.                                        |                                       |

**KENNETH D. WITSCHI**  
 PROFESSIONAL LAND SURVEYOR  
 LICENSE NUMBER 69944  
 97 JEFFREY DRIVE, MANHATTAN, NEW YORK 10428  
 PHONE (718) 881-2200



# 12X12 GABLE SHED PLAN

**FULL VERSION**



Supported & Recommended by our Friends & Partners:

**wikiHow**

**MOVOTO**

**eHow**

Sarah x Sarah

'BOUT HOME

**DESCRIPTION****ADDITIONAL INFORMATION****Shed Type:****Storage**

Roof Shape:

Gable

**Depth (ft.):****12'**

Width( ft.):

12'

**Depth (in.):****144"**

Height (in.):

142 3/4"

**Width (in.):****144"**

Exact Depth x Width:

12' 1" x 12' 8"

**Sidewall Height (in.):****94 1/2"**

Number of Doors:

1

**Door Type:****Double**

Door Opening Height (in.):

82"

**Door Opening Width (in.):****78"**

Door Opening Height (ft.):

6' 10"

**Floor Options:****0.75" Tongue and Groove Plywood**

Number of Windows:

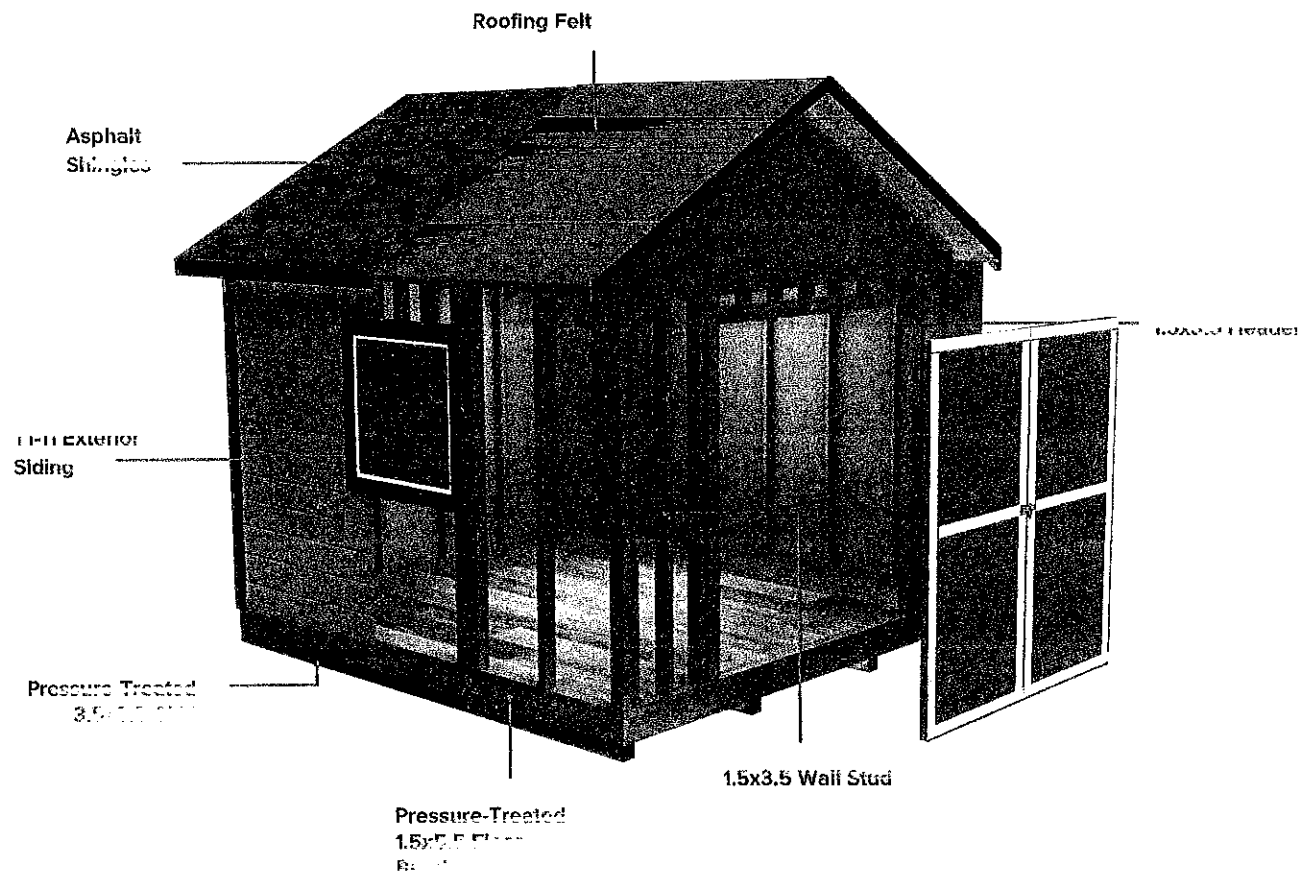
1

Recommend Roofing Material:

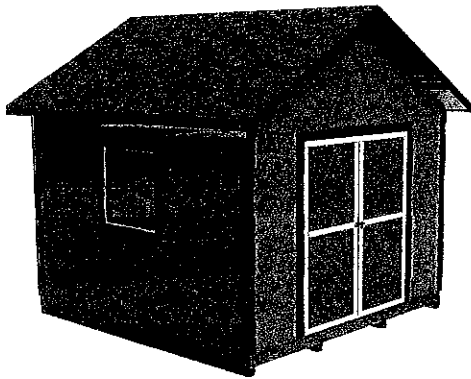
7/16 OSB Sheet Board

# MATERIALS

In the illustration you can see how the different sections of the shoe come together. Keep this sheet handy to help you determine your ideal shoe length and the right build.



## OVERVIEW AND DIMENSIONS

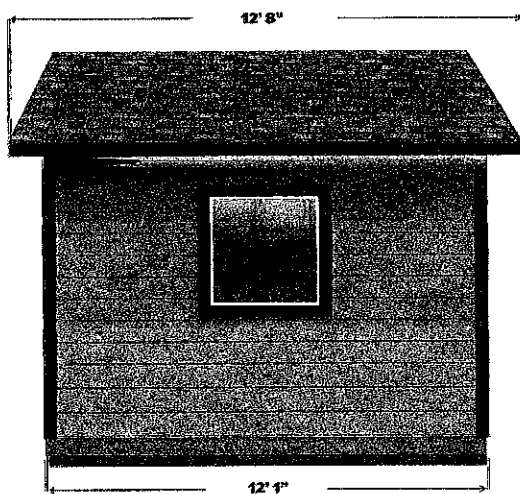
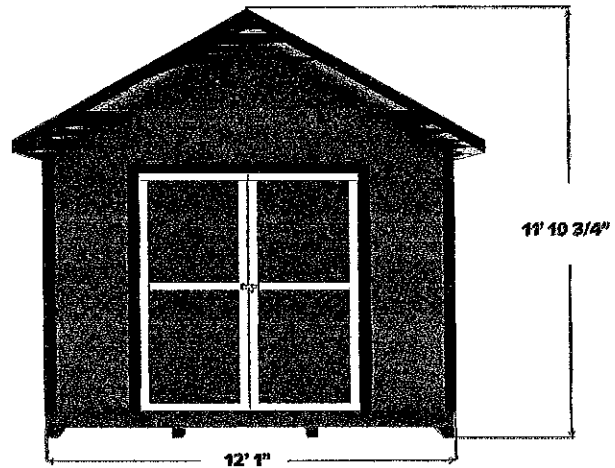


### 12'x12' Gable Shed

The simple to follow instructions makes building this shed effortless. Instructions for door, window and installing shingles also included. You can paint your shed how you like. We will start by building the foundation first before moving onto the walls. The most time-intensive part of this build is building the roof, however all aspects of this build are straightforward with this shed plan.

### Front View

The front of the 12'x12' gable shed is home to a 6' 10" high and 6' 6" wide garage door. The front of the shed measures 12' 1" wide. The total height of this shed is 11' 10 3/4"

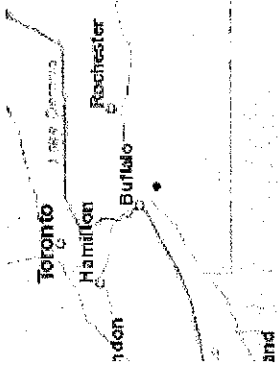


### Right-Side View

The right side of the shed is home to a window for natural light. The length of the shed measured from the trim is 12' 1" while the length of the shed measured from the roof including overhang is 12' 8".

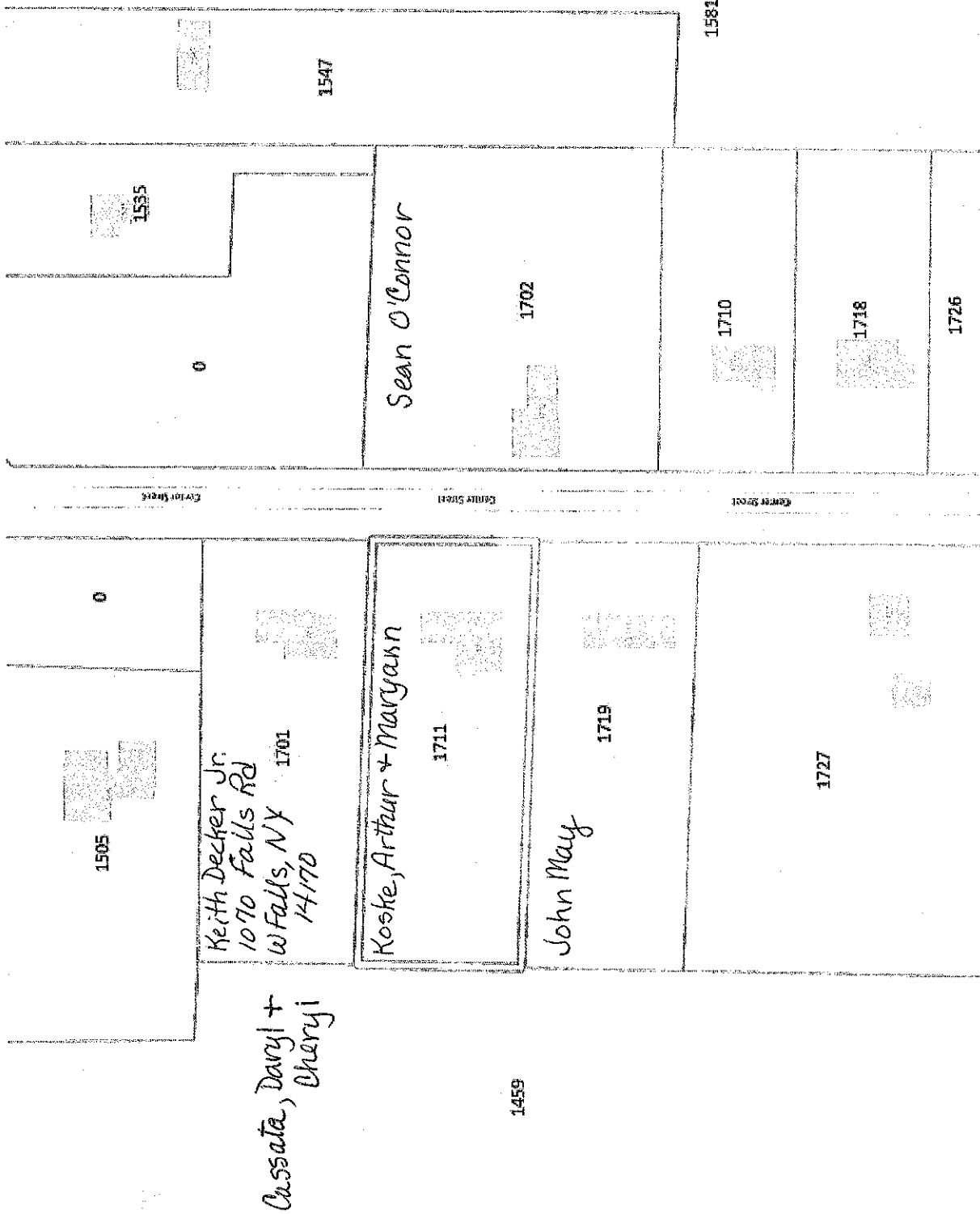


# Erie County On-Line Mapping Application



## Legend

Parcels



0 0.04 0.1 Miles

WGS 1984 Web Mercator Auxiliary Sphere  
THIS MAP IS NOT TO BE USED FOR NAVIGATION

ERIE COUNTY  
DEPARTMENT OF ENVIRONMENT & PLANNING  
OFFICE OF GIS

This map is a user generated static output from an Internet mapping site and is for reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.

1: 2,257

