TOWN OF WALES
APPLICATION FOR SPECIAL USE PERMIT

Application is hereby made for approval of a Special Use Permit hereinafter and particularly described as follows:

1) Name of Identifying Title: Ya Qoob Goban
2) Applicant's Name: 117 Stoney Street Lackawanna NY 14218
   Address: 6549 Olean Road S. Wales Phone:
3) Name of present owner (if other from #2 above) Joseph T. Macaluso
   Address: 6701 Seneca Street Elma, NY Phone: 716-583-1539
4) Interest of Applicant if other than owner:
5) Location for Special Use Permit: 6549 Olean Road South Wales
   (Street Address)

   Tax Map/SBL #:
6) Number of existing lot(s): Number of proposed lot(s)
7) Acreage of entire tract: Portion being used/subdivided:
8) Current Zoning District Classification:
9) Intended use for Special Use Permit:
10) Deed restrictions or protective covenants that apply or are contemplated:
    (If no restrictions, state "none"; If there are restrictions, attach copy)
11) List proposed improvements, utilities and intentions to install or post performance guarantee Prior to approval of Special Use Permit:

	Improvement	Intention
1)		
2)		
3)		
4)		

12) List of maps and other material accompanying application and number each document:

	Item	Document#
1)		
2)		
3)		
4)		

(Additional sheets as necessary)

13) Name of Engineer or Architect for Special Use Permit:
    Name:
    Address:
14) The undersigned hereby requests approval by the Wales Town Board of the identified Special Use Permit

Signature: Ya Qoob Date: 10/27/2020

Do Not Write Below This Line

Date Received by Town Clerk: Fee Paid: Initials:
Date of Acceptance by the Town Board:

Changes Required:

Approved: Disapproved: Date:

Conditions for Approval:

location * 6549 Oleankoach
S. Wales, NY
14169

TOWN OF WALES

AGRICULTURAL DATA STATEMENT

Changes in NYS Agricultural Markets Law requires submission of an agricultural data statement by an applicant to the municipality for a rezone, special use permit, site plan approval, use variance, or subdivision of parcel(s) in an agricultural district or within 500 feet of a farm operation located in an agricultural district.

Applicant's Name & Address:

YaQoob Goban
117 ~~Stony~~ Stoney St.
Lackawanna NY
14218

Owners Name & Address
(if different from applicant)
Joseph T. MaCaluso
6201 Seneca Street
Elma, NY 14059

Type of Application:
___Subdivision approval
____Re-Zone/Map Change
____Use Variance
__X__Special Use Permit
_____Site Plan Approval

Project Name/Location and Description of Proposed Project:

– See attached –

Tax Map Number: _____
Number of total acres involved with the project: 1.29
Current use of site: old Subway Vacant Building/Store Front
* Previously Bakery was approved – Did not open due to economy issues.

Will there be any toxic hazardous, chemicals substances or combination thereof, stored or used on the premises? If yes, indentify each and include all MSDS (Material Safety Data Sheets) NO

Are there any drainage ways or features (ditches ,tiles, streams, gullies) located on this site?

____YES ___X___NO

If yes, will this project alter existing drainage patterns? If yes, please describe

YaQoob
Applicant's Signature: _____
Owner's Signature: _____
Date: 10/15/2026

617.20

Appendix C
State Environmental Quality Review
SHORT ENVIRONMENTAL ASSESSMENT FORM
For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR: Yaqoob Goban

2. PROJECT NAME: unsure of store Name right now

3. PROJECT LOCATION: 6549 Olean Road
Municipality _____ County Erie

4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)
6549 Olean Road
South Wales, NY 14169

5. PROPOSED ACTION IS:
☒ New ☐ Expansion ☐ Modification/alteration

6. DESCRIBE PROJECT BRIEFLY:
Small Convient Store

7. AMOUNT OF LAND AFFECTED:
Initially _____ acres None Ultimately _____ acres

8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS?
☒ Yes ☐ No If No, describe briefly

9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT?
☒ Residential ☐ Industrial ☒ Commercial ☐ Agriculture ☐ Park/Forest/Open Space ☐ Other
Describe: House next door 6531 Olean Rd.

10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)?
☐ Yes ☒ No If Yes, list agency(s) name and permit/approvals:

11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL?
☒ Yes ☐ No If Yes, list agency(s) name and permit/approvals:

12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION?
☐ Yes ☒ No

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: Yaqoob Goban Date: 10/28/2026

Signature: Yaqoob Goban

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

Reset

PART II - IMPACT ASSESSMENT (To be completed by Lead Agency)

A. DOES ACTION EXCEED ANY TYPE I THRESHOLD IN 6 NYCRR, PART 617.4? If yes, coordinate the review process and use the FULL EAF.
☐ Yes ☒ No

B. WILL ACTION RECEIVE COORDINATED REVIEW AS PROVIDED FOR UNLISTED ACTIONS IN 6 NYCRR, PART 617.6? If No, a negative declaration may be superseded by another involved agency.
☐ Yes ☒ No

C. COULD ACTION RESULT IN **ANY** ADVERSE EFFECTS ASSOCIATED WITH THE FOLLOWING: (Answers may be handwritten, if legible)

C1. Existing air quality, surface or groundwater quality or quantity, noise levels, existing traffic pattern, solid waste production or disposal, potential for erosion, drainage or flooding problems? Explain briefly:

NO

C2. Aesthetic, agricultural, archaeological, historic, or other natural or cultural resources; or community or neighborhood character? Explain briefly:

NO

C3. Vegetation or fauna, fish, shellfish or wildlife species, significant habitats, or threatened or endangered species? Explain briefly:

NO

C4. A community's existing plans or goals as officially adopted, or a change in use or intensity of use of land or other natural resources? Explain briefly:

NO

C5. Growth, subsequent development, or related activities likely to be induced by the proposed action? Explain briefly:

NO

C6. Long term, short term, cumulative, or other effects not identified in C1-C5? Explain briefly:

NO

C7. Other impacts (including changes in use of either quantity or type of energy)? Explain briefly:

NO

D. WILL THE PROJECT HAVE AN IMPACT ON THE ENVIRONMENTAL CHARACTERISTICS THAT CAUSED THE ESTABLISHMENT OF A CRITICAL ENVIRONMENTAL AREA (CEA)?
☐ Yes ☒ No If Yes, explain briefly:

E. IS THERE, OR IS THERE LIKELY TO BE, CONTROVERSY RELATED TO POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS?
☐ Yes ☒ No If Yes, explain briefly:

PART III - DETERMINATION OF SIGNIFICANCE (To be completed by Agency)

INSTRUCTIONS: For each adverse effect identified above, determine whether it is substantial, large, important or otherwise significant. Each effect should be assessed in connection with its (a) setting (i.e. urban or rural); (b) probability of occurring; (c) duration; (d) irreversibility; (e) geographic scope; and (f) magnitude. If necessary, add attachments or reference supporting materials. Ensure that explanations contain sufficient detail to show that all relevant adverse impacts have been identified and adequately addressed. If question D of Part II was checked yes, the determination of significance must evaluate the potential impact of the proposed action on the environmental characteristics of the CEA.

☐ Check this box if you have identified one or more potentially large or significant adverse impacts which **MAY** occur. Then proceed directly to the FULL EAF and/or prepare a positive declaration.

☐ Check this box if you have determined, based on the information and analysis above and any supporting documentation, that the proposed action **WILL NOT** result in any significant adverse environmental impacts **AND** provide, on attachments as necessary, the reasons supporting this determination.

Name of Lead Agency	Date
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
Signature of Responsible Officer in Lead Agency	Signature of Preparer (If different from responsible officer)

Reset

Dear Town Board Members,

I am writing to explain the purpose of our application and how we propose to accomplish our goal of establishing a small convenience grocery store at the proposed location.

The business will offer everyday essentials such as milk, bread, snacks, beverages, and other basic household necessities. The store will also feature a small coffee bar where customers can purchase coffee and other beverages. Our goal is to serve the local community by providing convenient access to essential grocery items and refreshments.

This will be our second store location. Our first location, at 5385 Main Street, Williamsville, New York, recently opened during the week of October 19, 2026. We have attached photographs showing the building during construction and the grand opening of our Williamsville location to provide the Town Board with a better understanding of our business concept and operations.

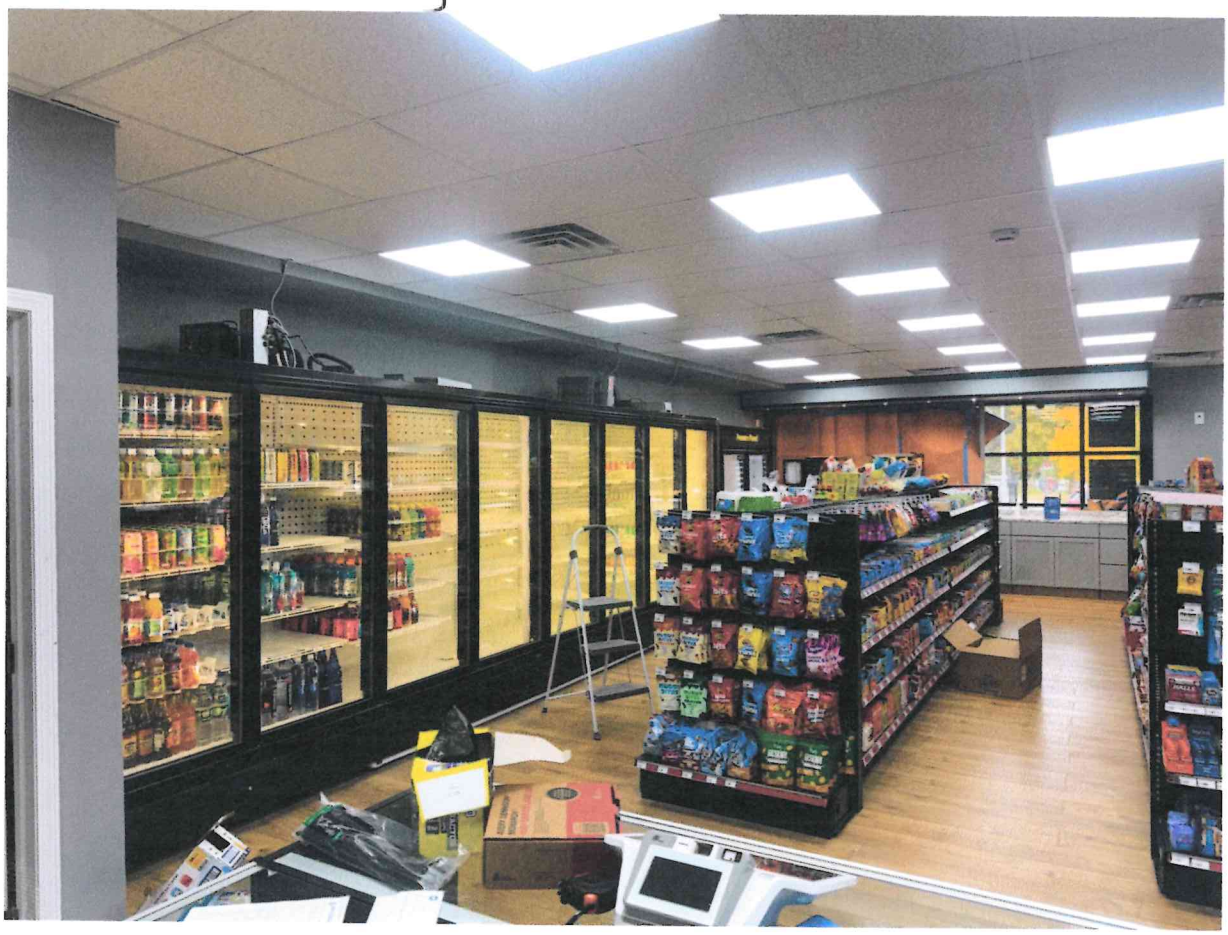
We intend to establish and operate the proposed location in a similar manner, providing a clean, welcoming, and convenient place for local residents to purchase everyday necessities and beverages. We believe this type of business will be a valuable addition to the community by offering a convenient shopping option for nearby residents.

Thank you for your time and consideration of our application. We appreciate the opportunity to present our proposal and look forward to working with the Town Board throughout the application process.

Sincerely,

Yaqoob Goban

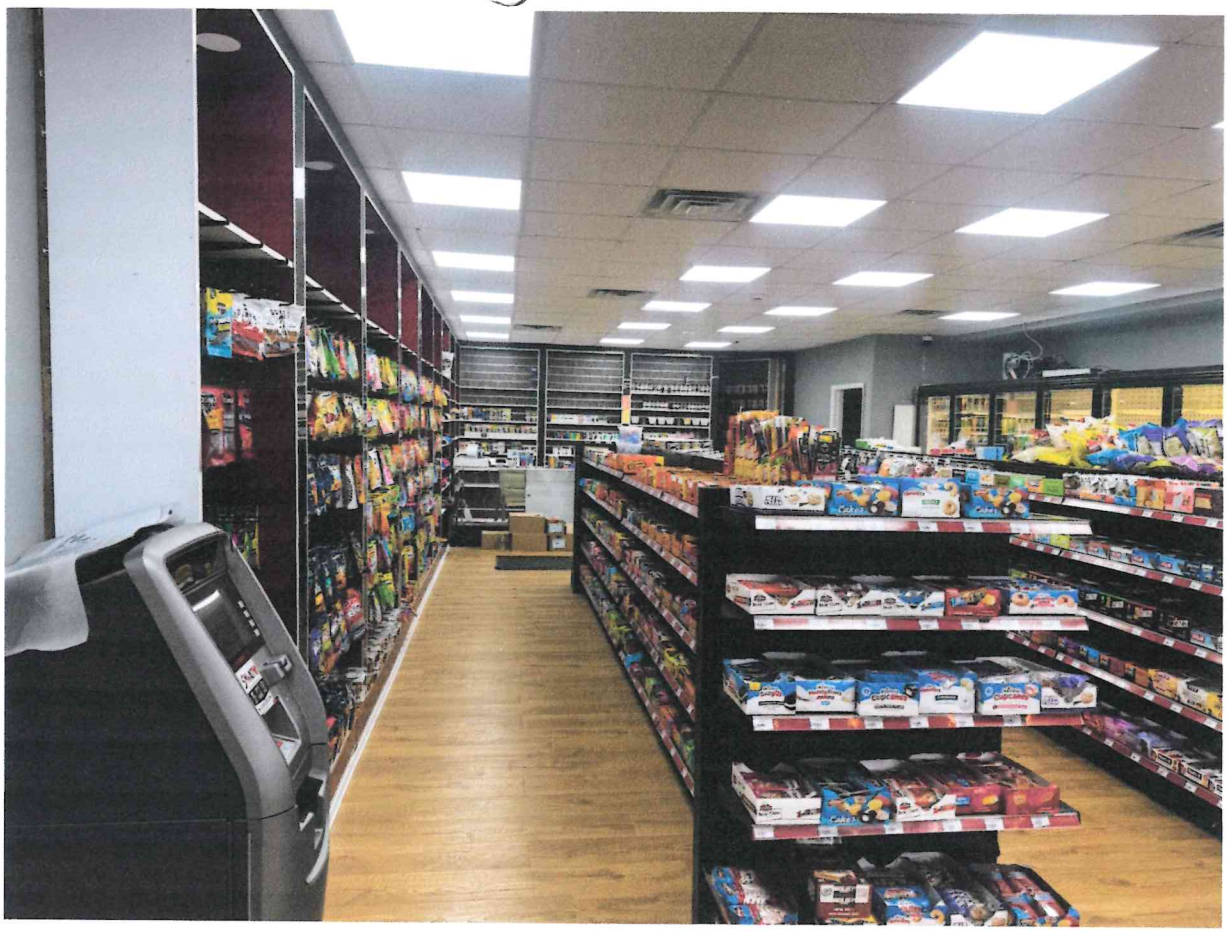
During Construction



During Construction



During Construction

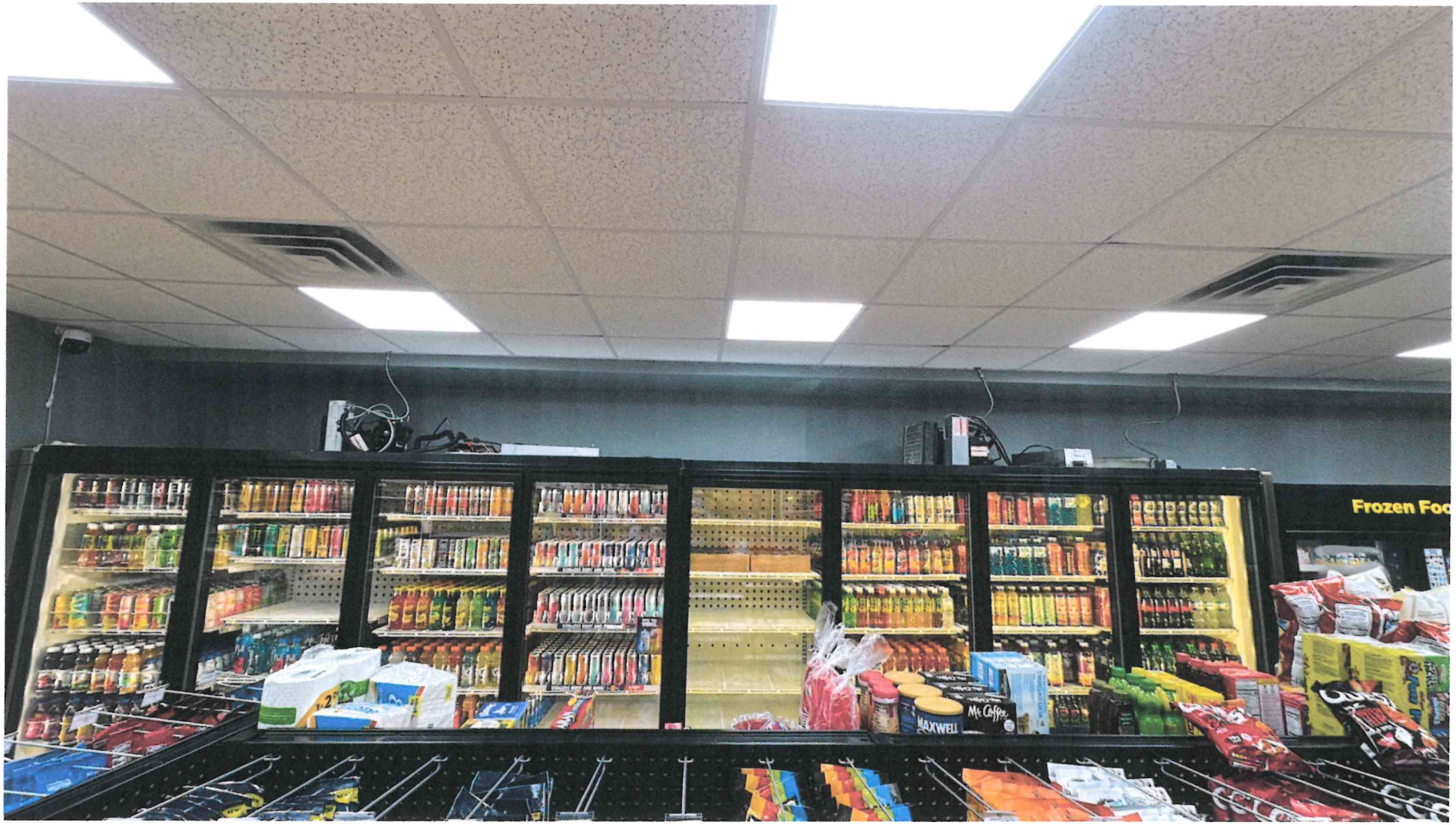



Frozen Food
DOUBLE DECKER
OREO
Chocolate Cupcakes
SWISS ROLLS
Honey Buns
Zebra
Chips Ahoy!
MUFFINS

Open Store



Open Store



Open Store

The proposed business will be a small convenience grocery store offering everyday essentials such as milk, bread, snacks, beverages, and other basic household necessities. The store will also include a small coffee bar for customers to purchase coffee and other beverages. The business will serve the local community by providing convenient access to everyday grocery items and refreshments.

After speaking to the Erie County of Health Department Joseph Macaluso was told:

The Property Transfer inspection that was done at the time of purchase.What the town is looking for is an evaluation from a septic professional ensuring the septic system is functioning properly. I believe this property is also on a private well. For that you would contact a private well company for evaluation.

So we are assuming we need to have a private evaluation done for the well and septic. The well and septic are currently being used by the tenants located in the same building.

The bathroom will not be for public use, strictly for employees.

Please see the attached photos of our first location, which is currently under construction in Williamsville.

October 28, 2026

RE: Septic System Inspection

Property Address: 6549 Olean Road, South Wales, NY 14169

Town of Wales:

This letter is to confirm that the septic system located at 6549 Olean Road South Wales, NY 14169 has been inspected.

The septic system has been pumped out and visually inspected. At the time of inspection, the system appeared to be in good condition, and no issues or apparent deficiencies were observed.

Any questions, please call me at (716) 480-0665.

Thank you,

Rich Boone

LM White Septic, Inc.
8243 Vermont Hill
Holland, NY 14080
(716) 465-0822



TOTAL AREA
1.291±ACRES

Grass
71'
13
12
11
10
9
45'
8
7
6
5
4
3
2
1
95'
15 Parking Spaces
Building
Dean Road
150'
14
15
27'
Road


Google Maps


Google Maps




Google Maps