

Name of Municipality: TOWN OF ORANGETOWN

Date Submitted: 3/23/21

2021 LAND USE BOARD APPLICATION

Please check all that apply:

Commercial
 Planning Board
 Zoning Board of Appeals

Residential
 Historical Board
 Architectural Board

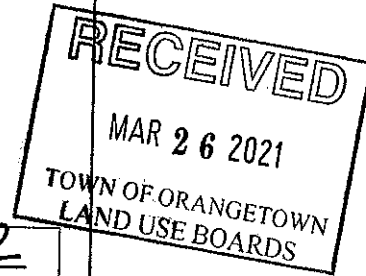
Subdivision
 Number of Lots
 Site Plan
 Conditional Use

Consultation
 Pre-Preliminary/Sketch
 Preliminary
 Final
 Interpretation

Special Permit
 Variance
 Performance Standards Review
 Use Variance
 Other (specify): _____

PERMIT#: 51212
 ASSIGNED _____
 INSPECTOR: m.m.

Referred from Planning Board: YES / NO
 if yes provide date of Planning Board meeting: _____



Project Name: Permanent Ramp Redden

Street Address: 63 Colonial Ct Pearl River, NY 10965

Tax Map Designation:
 Section: 69.13 Block: 2 Lot(s): 4
 Section: _____ Block: _____ Lot(s): _____

Directional Location:
 On the back side of house, approximately 7 feet of the intersection of property line, in the Town of ORANGETOWN in the hamlet/village of Pearl River.

Acreage of Parcel .29
 School District _____
 Ambulance District _____
 Water District _____

Zoning District _____
 Postal District _____
 Fire District _____
 Sewer District _____

Project Description: (If additional space required, please attach a narrative summary.)
make handicap ramp permanent

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.
 Date: 3/23/21 Applicant's Signature: [Signature]

APPLICATION REVIEW FORM

Applicant: Stephen Reddan Phone # 646489-3309

Address: 63 Colonial Ct Pearl River NY 10965
Street Name & Number (Post Office) City State Zip Code

Property Owner: Same as above Phone # same

Address: same as above
Street Name & Number (Post Office) City State Zip Code

Engineer/Architect/Surveyor: _____ Phone # _____

Address: _____
Street Name & Number (Post Office) City State Zip Code

Attorney: _____ Phone # _____

Address: _____
Street Name & Number (Post Office) City State Zip Code

Contact Person: Same as above Phone # _____

Address: _____
Street Name & Number (Post Office) City State Zip Code

GENERAL MUNICIPAL LAW REVIEW:

This property is within 500 feet of:
(Check all that apply)

IF ANY ITEM IS CHECKED, A REVIEW MUST BE DONE BY THE ROCKLAND COUNTY COMMISSIONER OF PLANNING UNDER THE STATE GENERAL MUNICIPAL LAW, SECTIONS 239 L, M, N, AND NN.

- | | |
|---|---|
| <input type="checkbox"/> State or County Road | <input type="checkbox"/> State or County Park |
| <input type="checkbox"/> Long Path | <input type="checkbox"/> County Stream |
| <input type="checkbox"/> Municipal Boundary | <input type="checkbox"/> County Facility |

List name(s) of facility checked above:

Referral Agencies:

- | | |
|--|--|
| <input type="checkbox"/> RC Highway Department | <input type="checkbox"/> RC Division of Environmental Resources |
| <input type="checkbox"/> RC Drainage Agency | <input type="checkbox"/> RC Dept. of Health |
| <input type="checkbox"/> NYS Dept. of Transportation | <input type="checkbox"/> NYS Dept. of Environmental Conservation |
| <input type="checkbox"/> NYS Thruway Authority | <input type="checkbox"/> Palisades Interstate Park Commission |
| <input type="checkbox"/> Adjacent Municipality _____ | |
| <input type="checkbox"/> Other _____ | |

APPLICATION REVIEW FORM

FILL IN WHERE APPLICABLE.

(IF THE FOLLOWING DOES NOT APPLY PLEASE MOVE ON TO THE NEXT PAGE)

If subdivision:

- 1) Is any variance from the subdivision regulations required? no
- 2) Is any open space being offered? no If so, what amount? _____
- 3) Is this a standard or average density subdivision? no

If site plan:

- 1) Existing square footage no
- 2) Total square footage no
- 3) Number of dwelling units no

If **special permit**, list special permit use and what the property will be used for.

no

Environmental Constraints:

Are there **slopes greater than 25%**? If yes, please indicate the amount and show the gross and net area no

Are there **streams** on the site? If yes, please provide the names. no

Are there **wetlands** on the site? If yes, please provide the names and type: no

Project History:

Has this project ever been reviewed before? ~~no~~ no

If so, provide a narrative, including the list case number, name, date, and the board(s) you appeared before, and the status of any previous approvals.

List tax map section, block & lot numbers for all other abutting properties in the same ownership as this project.

69,13 2 4

SWIS	PRINT KEY	NAME	ADDRESS
392489	69.13-2-3	Catherine Callahan	53 Colonial Ct, Pearl River, NY 10965
392489	69.13-2-4	Thomas J Reddan	63 Colonial Ct, Pearl River, NY 10965
392489	69.13-2-5	William Garrison Jr	71 Colonial Ct, Pearl River, NY 10965
392489	69.13-2-6	Gerald O'Hare	85 Colonial Ct, Pearl River, NY 10965
392489	69.13-2-7	L&Z Partners LLC	176 N Main St, Spring Valley, NY 10977
392489	69.13-2-8	Maye T Gerard	262 Blauvelt Rd, Pearl River, NY 10965
392489	69.13-2-9	Constance A Racavich	266 Blauvelt Rd, Pearl River, NY 10965
392489	69.13-2-10	Mary A Driscoll	270 Blauvelt Rd, Pearl River, NY 10965
392489	69.13-2-63	Ruth F Matrisciani	72 Colonial Ct, Pearl River, NY 10965
392489	69.13-2-64	Michael C Gibbons	66 Colonial Ct, Pearl River, NY 10965
392489	69.13-2-65	Michael G Moran	58 Colonial Ct, Pearl River, NY 10965



OFFICE OF BUILDING, ZONING, PLANNING,
ADMINISTRATION AND ENFORCEMENT
TOWN OF ORANGETOWN
20 Greenbush Road
Orangeburg, N.Y. 10962

Jane Slavin, R.A.
Director

(845)359-8410

Fax: (845) 359-8526

DENIAL TO THE ZONING BOARD OF APPEALS

Date: March 23, 2021

Applicant: Reddan

Address: 63 Colonial Ct, Pearl Rvier, NY

RE: Application Made at: same

Chapter 43, Table 3.12, Column 1 R-15 District, Column 2 Group M, Column 3 SFR, Column 9 Required Side Yard 20' w/ 7' proposed. Column 10 Total Side Yard 50' with 35' proposed
Tow variances required

Section: 69.13

Block: 2

Lot: 4

Dear Reddan:

Please be advised that the Building Permit Application, which you submitted on March 16, 2021, has been denied. I have enclosed a Xerox copy of your application, where you will find at the bottom the reason for denial.

In Accordance with Zoning, Chapter 43 Section 10.322 the time to appeal a determination of a Building Inspector or Similar administrative office is thirty (30) days from the filing of such a determination with the Town Clerk.

The Clerk to the Zoning Board of Appeals, Debbie Arbolino, will assist you in the preparation necessary to appear before the board.

Sincerely,


Richard Oliver
Deputy Building Inspector

Signature of Director

NOTE: PLEASE KEEP FOR YOUR RECORDS
12-31-18-CCC


Date

3-23-2021
CC: Rosanna Sfraga
Liz Decort
Debbie Arbolino

PERMIT EXPIRES TWO (2) YEARS FROM DATE OF ISSUANCE.
TWO SIX (6) MONTH EXTENSIONS MAY BE GRANTED PRIOR TO EXPIRATION DATE.

APPLICATION FOR BUILDING / DEMOLITION PERMIT

TOWN OF ORANGETOWN

20 Greenbush Road, Orangeburg, NY 10962 Phone: (845) 359-8410 Fax: (845) 359-8526

ZONE: <u>R-15</u>	OFFICIAL USE ONLY	ACREAGE: <u>.29</u>
Inspector: <u>Mike</u>	Date App Received: <u>3-16-2021</u>	Received By: <u>[Signature]</u>
Permit No. <u>51212</u>	Date Issued: _____	
CO No. _____	Date Issued: _____	
Permit Fee: <u>150.-</u>	Ck# <u>302</u>	Paid By <u>Reddan</u>
GIS Fee: <u>20.-</u>	Ck# <u>CASH</u>	Paid By <u>Reddan</u>
Stream Maintenance Fee	Ck # _____	Paid By _____
Additional Fee: _____	Ck# _____	Date Paid _____
1 st 6 mo. Ext.: _____	Ck # _____	Exp. Date: _____
2 nd 6 mo. Ext.: _____	Ck # _____	Exp. Date: _____

APPLICANT COMPLETES:

Note: See inside for instructions for completing this application,
PAGES 2, 3 and PAGE 4 must be reviewed and PAGES 3 & 4 must signed by the applicant.

Property Location: 163 Colonial Court Pearl River NY 10965
 Section: 6913 Block: 2 Lot: 4
 Property Owner: STEPHEN F REDDAN
 Mailing Address: 63 Colonial Ct Pearl River NY 10965
 Email: psreddan@yahoo.com Phone #: 646 489 3309
 Lessee (Business Name): _____
 Mailing Address: _____
 Email: _____ Phone #: _____
 Type of Business /Use: _____
 Contact Person: STEPHEN REDDAN Relation to Project: Home Owner
 Email: psreddan@yahoo.com Phone#: 646-489-3309
 Architect/Engineer: _____ NYS Lic # _____
 Address: _____ Phone#: _____
 Builder/General Contractor: _____ RC Lic # _____
 Address: _____ Phone#: _____
 Plumber: _____ RC Lic # _____
 Address: _____ Phone#: _____
 Electrician: _____ RC Lic #: _____
 Address: _____ Phone#: _____
 Heat/Cooling: _____ RC Lic#: _____
 Address: _____ Phone#: _____
 Existing use of structure or land: _____
 Proposed Project Description: HANDICAP Ramp up to TEAR DECK Existing
Ramp width 4meters p/1m width
 Proposed Square Footage: _____ Estimated Construction Value (\$): _____

BUILDING DEPARTMENT COMPLETES BELOW

PLANS REVIEWED: _____

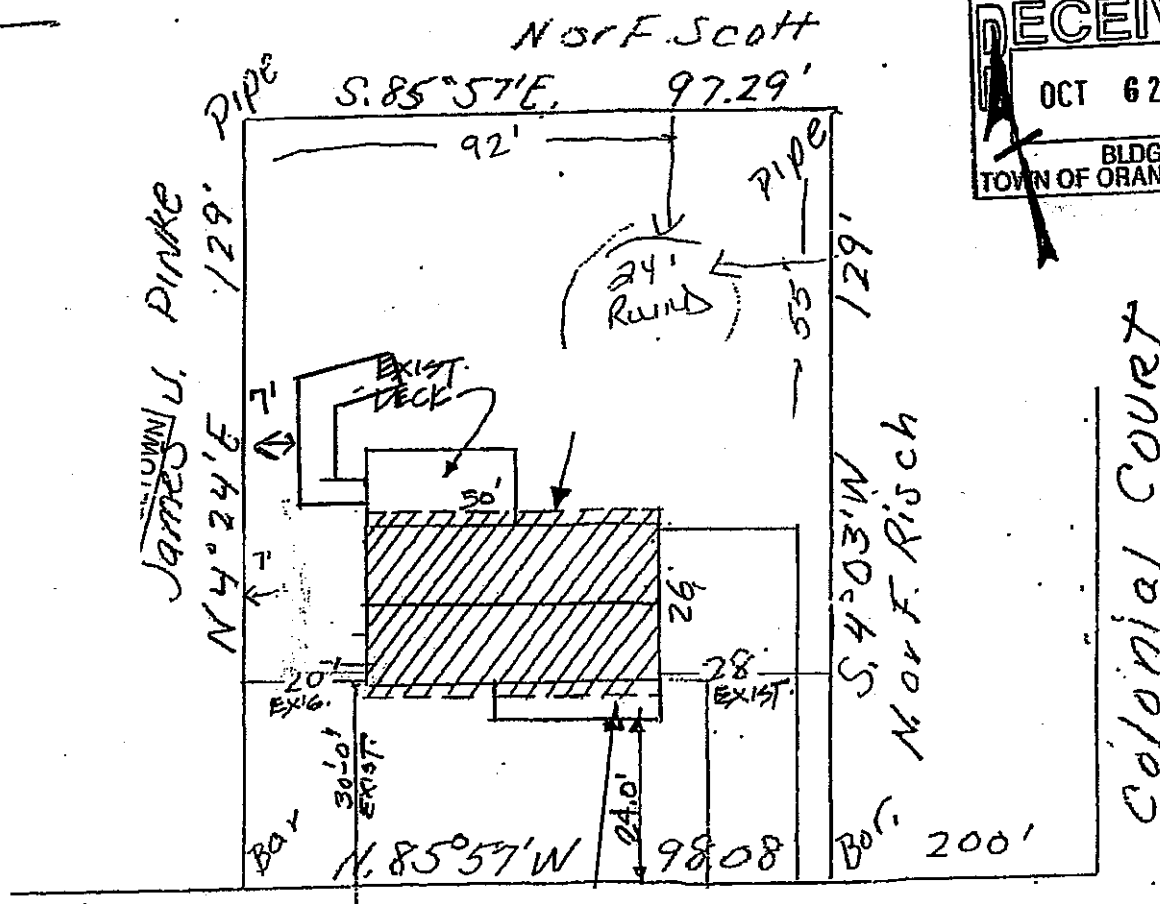
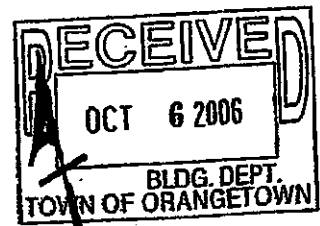
PERMIT REFERRED / DENIED FOR:

Article 43, Title 312, Column 1 R-15 District, Column 2 Geny. M., Column 3 SRP
Column 9 Side Yd 20' w/ 7' proposed, Column 10 Total Side Yd 50' w/ 31' proposed
Two Variations Required

RS Deputy 3.23.2021

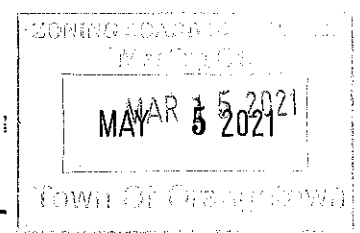
FOR OFFICE USE ONLY SECTION BLOCK LOT NAME PERMIT#

69.13-2-4



50'

Colonial Court



PLOT PLAN

SCALE: 1" = 30'

NOTE:

INFORMATION TAKEN FROM SURVEY BY
E.C. GETTY, P.E., L.S., CONGERS, NY
DATED MAY, 1981

SECTION 69.13
BLOCK 2
LOT 4

BULK REGULATIONS

DISTRICT R-15 - EXISTING NON-CONFORMING LOT

	REGULATION	EXISTING	PROPOSED
LOT WIDTH	100'	98.08'	—
FRONT YARD	30'	30'	26.0'
SIDE YARD	20'	20'/28'	—
TOTAL S.Y.	60'	48'	—
REAR YARD	35'	6'	—
FLOOR AREA	3,000	1,800	2,996
LOT AREA	15,000	12,600	—
FAR	20	10	23

STEPHEN F REDDAN 3/14/2021

Reddan
63 colonial ct pr
69.13-2-4
10/6/06