



Subject: Notice of Sign Installation for JMG CPAS LLC

JMG CPAS has opened an office at 170 E Eerie St Blauvelt, NY. They would like to change out the name in the acrylic lightbox from Capri to JMG CPAS. They have a monument pylon sign out in the front of the building.

Warm regards,

**Greg Tkacz
99signs
greg@99signs.com
845-643-8000**

v

☐ 845-643-8000

✉ greg@99signs.com

👤 GREG TKACZ



Architectural & Community Appearance Board of Review

Date: 1/13/25 Section: 70.14 Block: 4 Lot: 10

Project Name: JMG CPA Pylon Sign

Project Address: 170 E Erie St Blauvelt NY 10913

Questions to be answered and returned to ACABOR with your completed application. Please state the Brand Name, Type, Style, Model and color numbers, etc. Actual material samples will need to be produced at the hearing.

1. Roof Shingles: _____

2. Siding Type: _____

3. Windows/Trim/Rail/etc: _____

4. Any stone or rock being used on the structure and/or walkway(s):

5. Facade color schemes: white background

6. Any other specific materials being used in the construction and/or renovation:
3/16" white acrylic

7. Do you have a landscape drawing attached? If not, please explain. (An explanation could be that the applicant is not changing the existing landscape.)

No change

8. Where will any exterior air conditioning units be placed?

9. What type of lighting will be used in this project? And where will the lighting be placed on the property? Please provide a description.

LED back lighting on existing sign

10. Other Important Site and/or Architectural Features:

Existing pylon sign, changing tenant, changing face 24" x 120"

Name of Municipality: TOWN OF ORANGETOWN Date Submitted: _____

LAND USE BOARD APPLICATION

Please check all that apply:

<input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Planning Board <input type="checkbox"/> Zoning Board of Appeals <input type="checkbox"/> Subdivision <input type="checkbox"/> Number of Lots <input type="checkbox"/> Site Plan <input type="checkbox"/> Conditional Use <input type="checkbox"/> Special Permit <input type="checkbox"/> Variance <input type="checkbox"/> Performance Standards Review <input type="checkbox"/> Use Variance <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Historical Board <input type="checkbox"/> Architectural Board <input type="checkbox"/> Consultation <input type="checkbox"/> Pre-Preliminary/Sketch <input type="checkbox"/> Preliminary <input type="checkbox"/> Final <input type="checkbox"/> Interpretation
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PERMIT#: _____
ASSIGNED _____
INSPECTOR: _____

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

Project Name: JMG CPA Pylon Sign

Street Address: 170 E Erie St Blauvelt NY 10913

Tax Map Designation:
Section: 70.14 Block: 4 Lot(s): 10
Section: _____ Block: _____ Lot(s): _____

Directional Location:
On the west side of route 303, approximately
30 feet north of the intersection of Erie St, in the
Town of ORANGETOWN in the hamlet/village of Blauvelt.

Acreage of Parcel _____ School District _____ Ambulance District _____ Water District _____	Zoning District <u>CS</u> Postal District _____ Fire District _____ Sewer District _____
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Project Description: *(If additional space required, please attach a narrative summary.)*
Existing white acrylic sign 24" x 120" on pylon to replace tenant Capri with JMG CPA

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.

Date: 1/15/25 Applicant's Signature: _____

APPLICATION REVIEW FORM

Applicant: JMG CPAS LLC Phone # 201-263-1333

Address: 170 E Erie St Blauvelt NY 10954
Street Name & Number (Post Office) City State Zip Code

Property Owner: 170 East Erie Street LLC Phone # 845-623-3884

Address: 170 Route 304 Bardonia NY 10954
Street Name & Number (Post Office) City State Zip Code

Engineer/Architect/Surveyor: 99signs Phone # 845-304-4199

Address: 376 Route 59 Nyack NY 10960
Street Name & Number (Post Office) City State Zip Code

Attorney: _____ Phone # _____

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

Contact Person: Greg Tkacz Phone # 845-304-4199

Address: 376 Route 59 Nyack NY 10960
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.

_____ State or County Road
_____ Long Path
_____ Municipal Boundary

_____ State or County Park
_____ County Stream
_____ County Facility

List name(s) of facility checked above:

Referral Agencies:

_____ RC Highway Department
_____ RC Drainage Agency
_____ NYS Dept. of Transportation
_____ NYS Thruway Authority
_____ Adjacent Municipality _____
_____ Other _____

_____ RC Division of Environmental Resources
_____ RC Dept. of Health
_____ NYS Dept. of Environmental Conservation
_____ Palisades Interstate Park Commission



OFFICE OF BUILDING, ZONING, PLANNING,
ADMINISTRATION AND ENFORCEMENT
TOWN OF ORANGETOWN

26 Orangeburg Road
Orangeburg, NY 10962



SCANNED

Jane Slavin, R.A.
Director

(845)359-8410

Fax: (845) 359-8526

**REFERRAL TO THE ARCHITECTURE AND COMMUNITY
APPEARANCE BOARD OF REVIEW**

Date: 1.9.25 Section: 70.14 Block: 4 Lot: 10

Applicant: 170 East Erie Street LLC / JMG CPAS LLC

Address: 179 East Erie St, Blauvelt, NY

RE: Application Made at: same

Chapter 2, Section 2-4(a)

Referred For: **§ 2-4 To review applications for building permits.**


A. Every application for a building permit for the construction, reconstruction or alteration of any structure in excess of 1,000 cubic feet of cubical contents proposed for construction, and every application for the development or subdivision of land, and any such application for a building permit, land use or any other development with the Town of Orangetown filed with the Town Board, Planning Board or Building Inspector shall be referred to the Architecture and Community Appearance Board of Review within seven days of the submission of the application, provided that it conforms in all respects to all other applicable laws and ordinances. This law shall not apply to an application for a single- or two-family residence or residential accessory structure on individual property, except that the Building Inspector, in his discretion, may refer such an application to the Board of Review if it appears, in the light of the standards set forth in § 2-5, that there is a need for such referral.


Comments: New partial signage on existing monument sign

Dear 170 East Erie Street LLC / JMG CPAS LLC

Please be advised that the Building Permit Application # 6523-25, which you submitted on 1.9.25, has been referred to the Orangetown Architecture and Community Appearance Board of Review, ACABOR. The Clerk to ACABOR, will assist you in the preparation necessary to appear before the board. Please call the office at 845-359-8410 ext. 4331 or email Gerard Chesterman gchesterman@orangetown.com

Sincerely,


1/9/25
Richard Oliver
Deputy Building Inspector


Signature of Director
NOTE: PLEASE KEEP FOR YOUR RECORDS
10-01-2024/cmd

1/10/25
Date
Gerard Chesterman
Elizabeth Decort
Cheryl Coopersmith

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

SM
1-9-25
SCANNED

ZONE: <u>OFFICIAL USE ONLY</u>	ACREAGE: _____
Inspector: <u>KEN</u>	Date App Received: <u>1/9/25</u>
Permit No.: <u>SIGN-6523-25</u>	Date Issued: _____
CO No.: _____	Date Issued: _____
Permit Fee: <u>150</u>	Ck#: <u>223</u>
GIS Fee: _____	Ck#: _____
Stream Maintenance Fee: <u>30</u>	Ck #: <u>223</u>
Additional Fee: _____	Ck#: _____
1st 6 mo. Ext.: _____	Ck #: _____
2nd 6 mo. Ext.: _____	Ck #: _____

RECEIVED

TOWN OF ORANGETOWN
BUILDING DEPARTMENT

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: 170 E Erie St Blauvelt NY 10913

Section: 70.14 **Block:** 4 **Lot:** 10

Property Owner: 170 EAST ERIE STREET, LLC

Mailing Address: 170 Route 304 Bardonia NY 10954

Email: DRIFKIN@DRIFKINCPA.COM **Phone #:** 845-623-3884

Lessee (Business Name): JMG CPAS LLC

Mailing Address: 170 E Erie St Blauvelt NY 10913

Email: egiliberti@jmg-cpas.com **Phone #:** 201-263-1333

Type of Business /Use: Office

Contact Person: Greg Tkacz **Relation to Project:** Sign contractor

Email: greg@99signs.com **Phone#:** 845-304-4199

Architect/Engineer: _____ **NYS Lic #:** _____

Address: _____ **Phone#:** _____

Builder/General Contractor: 99signs **RC Lic #:** NY-24-09

Address: 376 Route 59 Nyack, NY 10960 **Phone#:** 845-304-4199

Plumber: _____ **RC Lic #:** _____

Address: _____ **Phone#:** _____

Electrician: _____ **RC Lic #:** _____

Address: _____ **Phone#:** _____

Heat/Cooling: _____ **RC Lic#:** _____

Address: _____ **Phone#:** _____

Existing use of structure or land: Commercial

Proposed Project Description: existing white acrylic sign 24" x 120" to replace Capri with JMG CPAS

Proposed Square Footage: 20 **Estimated Construction Value (\$):** 500

BUILDING DEPARTMENT COMPLETES BELOW

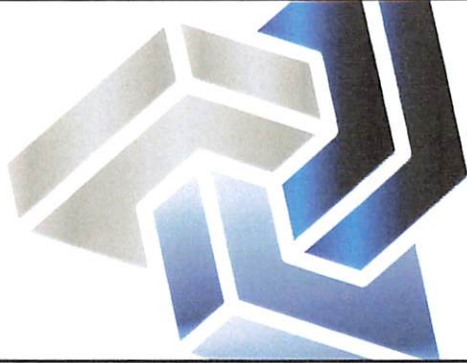
PLANS REVIEWED: _____

PERMIT REFERRED / DENIED FOR:
CHAPTER 2 SECTION 2-4(a) REQUIRES ACABOR APPROVAL

1-9-25
8-1-10-25

FOR OFFICE USE ONLY
SECTION
BLOCK
LOT
NAME
PERMIT#

120 inches



JMIG

CERTIFIED PUBLIC ACCOUNTANTS & ADVISORS

24 inches



24 H x 120 W Acrylic pylon sign for JMIG accounting

99 SIGNS

378 NY-59, NYACK, NY 10960
(845) 643-8000

This original drawing copy is submitted for your personal use ONLY in connection with a project we are planning for you. It is not to be copied, reproduced or exhibited o anyone outside of your organization without written permission from 99 Signs LLC.

RECEIVED
TOWN OF JMWGETOWN
LAND USE BOARDS