

Name of Municipality: TOWN OF ORANGETOWN Date Submitted: _____

2020 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"/> Historical Board
<input type="checkbox"/> Zoning Board of Appeals	<input type="checkbox"/> Architectural Board
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Consultation
<input type="checkbox"/> Number of Lots	<input type="checkbox"/> Pre-Preliminary/Sketch
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Preliminary
<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Final
<input checked="" type="checkbox"/> Special Permit	<input type="checkbox"/> Interpretation
<input type="checkbox"/> Variance	
<input type="checkbox"/> Performance Standards Review	
<input type="checkbox"/> Use Variance	
<input type="checkbox"/> Other (specify): _____	

PERMIT#: 49913
ASSIGNED: _____
INSPECTOR: Dom
Referred from Planning Board: YES / NO
If yes provide date of Planning Board meeting: _____

Project Name: Permit for pre-existing fence

Street Address: 3 S. Serven St
Pearl River NY 10465

Tax Map Designation:
Section: 68.14 Block: 4 Lot(s): 4
Section: _____ Block: _____ Lot(s): _____

Directional Location:
On the South side of Central Ave, approximately
0 feet West of the intersection of S. Serven St., in the
Town of ORANGETOWN in the hamlet/village of Pearl River.

Acreage of Parcel <u>0.24</u>	Zoning District _____
School District <u>PECSO</u>	Postal District _____
Ambulance District _____	Fire District _____
Water District _____	Sewer District _____

Project Description: (If additional space required, please attach a narrative summary.)
Permit for pre-existing non-conforming fence on north side of the lot.

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.
Date: 3/22/2020 Applicant's Signature: [Signature]

APPLICATION REVIEW FORM

Applicant: Fernando Cabrera Phone # 845-825-2762
Address: 3 S. Server St Pearl River NY 10965
Street Name & Number (Post Office) City State Zip Code

Property Owner: Fernando Cabrera Phone # 845-825-2762
Address: 3 S. Server St. Pearl River NY 10965
Street Name & Number (Post Office) City State Zip Code

Engineer/Architect/Surveyor: N/A Phone # _____
Address: _____
Street Name & Number (Post Office) City State Zip Code

Attorney: Teresa Kenny Phone # _____
Address: _____
Street Name & Number (Post Office) City State Zip Code

Contact Person: Fernando Cabrera Phone # 845-825-2762
Address: 3 S. Server ST Pearl River NY 10965
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"/> Palsades 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? _____
- 2) Is any open space being offered? ____ If so, what amount? _____
- 3) Is this a standard or average density subdivision? _____

If site plan:

- 1) Existing square footage _____
- 2) Total square footage _____
- 3) Number of dwelling units _____

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

Environmental Constraints:

Are there **slopes greater than 25%**? If yes, please indicate the amount and show the gross and net area _____

Are there **streams** on the site? If yes, please provide the names. _____

Are there **wetlands** on the site? If yes, please provide the names and type: _____

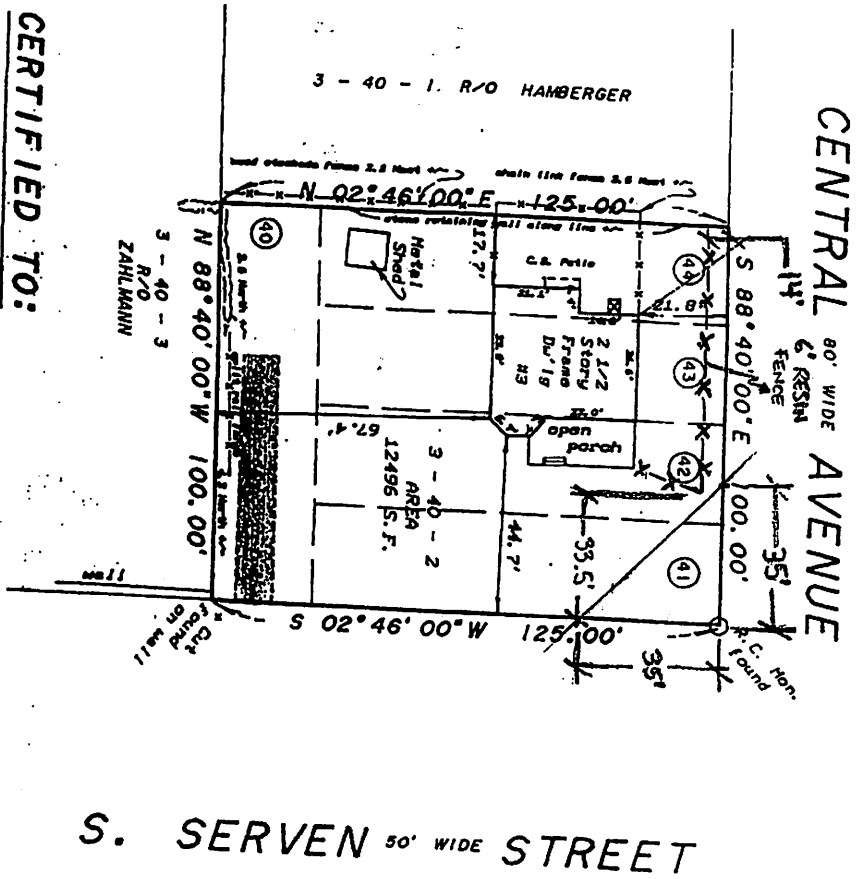
Project History:

Has this project ever been reviewed before? _____ **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.

SURVEY NO. 3154



CERTIFIED TO:
 ELIZABETH CONFORTI
 WILLIAM G. CONFORTI
 LAWYERS TITLE INSURANCE CORP.

08181 8.3.21

CONTINGENTS INDICATED HERON SIGHTLY
 THE SURVEY WAS PREPARED IN ACCORDANCE
 WITH THE SURVEYING CODE OF PRACTICE FOR LAND
 SURVEYING BY THE NEW YORK STATE BOARD
 OF PROFESSIONAL LAND SURVEYORS.

UNATTENDED ATTENTION OR ADOPTION
 THIS MAP IS A VIOLATION OF REGISTRATION IN
 THE NEW YORK STATE EDUCATION LAW CODED BY
 THE LAND SURVEYING THE SURVEYED SHALL BE
 GUARANTEED ON CERTAIN NOT BE VALUE
 IN RESPECT TO ADJACENT DISTRICTS

S. SERVEN 50' WIDE STREET

REFERENCE

Lands of Sarah O.
 filed in the Record
 Map No. 238 Book 16
 Liber 2 Page 2897

BEING KNOWN

ORANGETOWN TAX MAP
 LOTS 40, 41, 42, 43, 44

SUR

ELIZABETH &

TOWN OF ORANGE

SCALE: 1" = 30'

ROBERT R. RAHN

Professional L.
 32 So. Middletown Road

ALL RIGHTS RESERVED



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

APPEAL TO ZONING BOARD OF APPEALS

Date: March 18, 2020

Applicant: Fernando Cabrera

Address: 3 S. Serven St, Pearl River, NY 10965

RE: Application Made at: same

Chapter 43, Article V, Section 5.226; Fences permitted in front yard not more than 4 1/2 feet in height, with 6 foot existing.

Section: 68.19 Block: 4 Lot: 4

Dear Mr. Cabrera;

Please be advised that the Building Permit Application, which you submitted on

March 11, 2020, 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,

3-18-2020

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

Date
CC: Rosanna Sfraga
Liz Decort
Debbie Arbolino

* CORRECTED PLOT PLAN - TO SCALE
MUST BE SUBMITTED AS PART OF
ZBA APPLICATION - 3-18-2020 (SEE ATTACHED IN HRKUR)

**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>LG</u>	OFFICIAL USE ONLY	ACREAGE: _____
Inspector: <u>DOM</u>	Date App Received: <u>3-11-2020</u>	Received By: <u>LAZ</u>
Permit No. <u>49913</u>	Date Issued: _____	
CO No. _____	Date Issued: _____	
Permit Fee: <u>\$150</u>	Ck# <u>786</u>	Paid By <u>Cabrera</u>
GIS Fee: <u>\$70</u>	Ck# <u>785</u>	Paid By _____
Stream Maintenance Fee	Ck # _____	Paid By _____
Additional Fee: _____	Ck# _____	Date Paid _____ Paid By _____
1 st 6 mo. Ext.: _____	Ck # _____	Exp. Date: _____ Paid By _____
2 nd 6 mo. Ext.: _____	Ck # _____	Exp. Date: _____ Paid By _____

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: 3 S. Seven St. Pearl River

Section: 108.19 Block: 4 Lot: 4

Property Owner: Fernando Cabrera

Mailing Address: 3 S. Seven St Pearl River NY 10965

Email: fcabrerausa@yahoo.com Phone #: 845-825-2762

Lessee (Business Name): _____

Mailing Address: _____

Email: _____ Phone #: _____

Type of Business /Use: _____

Contact Person: Fernando Cabrera Relation to Project: OWNER

Email: fcabrera usa @ Yahoo.com Phone#: 845-825-2762

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: Single family residence

Proposed Project Description: legalize existing fence in front yard (corner lot)

Proposed Square Footage: _____ Estimated Construction Value (\$): \$1,000

BUILDING DEPARTMENT COMPLETES BELOW

PLANS REVIEWED: _____

PERMIT REFERRED / DENIED FOR: Chapter 43, ARTICLE V, SECTION 5.226; FENCES PERMITTED IN FRONT YARD NOT MORE THAN 4 1/2 FT IN HEIGHT W/ 6 FOOT EXISTING.

3-18-2020

FOR OFFICE USE ONLY SECTION _____ BLOCK _____ LOT _____ NAME _____ PERMIT# _____