

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"/> 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"/> Residential <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
--	--

PERMIT#: 50066
 ASSIGNED _____
 INSPECTOR: Dm
 Referred from Planning Board: YES / NO
 if yes provide date of Planning Board meeting: _____

Project Name: Shen Fitzpatrick

Street Address: 65 Moison Rd N
Blauvelt, NY 10913

Tax Map Designation:
Section: 70.10 Block: 2 Lot(s): 19
Section: _____ Block: _____ Lot(s): _____

Directional Location:
On the left side of Moison Rd N, approximately 6 houses feet N of the intersection of Elie St., in the Town of ORANGETOWN in the hamlet/village of Blauvelt.

Acreage of Parcel <u>.3</u>	Zoning District <u>R-15</u>
School District <u>South Orangetown</u>	Postal District <u>Blauvelt</u>
Ambulance District <u>South Orangetown</u>	Fire District <u>Blauvelt.</u>
Water District <u>Suez</u>	Sewer District <u>Orangetown.</u>

Project Description: (If additional space required, please attach a narrative summary.)
Aboveground pool.

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.
Date: 6/1/2020 Applicant's Signature: [Signature]

APPLICATION REVIEW FORM

Applicant: Sheri Fitzpatrick Phone # 516 456-7756

Address: 65 Morson Rd N Blauvelt NY 10913
Street Name & Number (Post Office) City State Zip Code

Property Owner: Same. Phone # _____

Address: _____
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: Sheri Fitzpatrick Phone # 516 456-7756

Address: 65 Morson Rd N Blauvelt NY 10913
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? _____
- 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 _____

NO

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.



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: May 29, 2020

Applicant: Fitzpatrick

Address: 65 Moison Rd, Blauvelt, NY

RE: Application Made at: same

Chapter 43, Table 3.12 Columns 1,2, &3 = R-15 District, Group M, SFR

Column 9 Required Side Yard 20' with 10.5' prospected, column 10 Req'd Total Side Yard 50' w/ 30.75' proposed

Section: 70.10

Block: 2

Lot: 19

Dear Fitzpatrick:

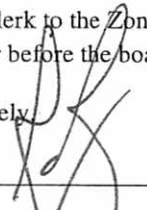
Please be advised that the Building Permit Application, which you submitted on

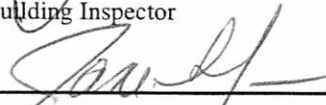
May 27, 2020, has been denied. I have enclosed a Xerox copy of your application, where you will find at the bottom the reason for denial.

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,


Richard Oliver
Deputy Building Inspector


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

5-29-2020
Date
CC: Rosanna Sfraga
Liz Decort
Debbie Arbolino

SWIS	PRINT KEY	NAME	ADDRESS
392489	70.10-2-17	Robert S Manganiello	79 N Moison Rd,Blauvelt, NY 10913
392489	70.10-2-18	Deborah Di Bernardo	73 N Moison Rd,Blauvelt, NY 10913
392489	70.10-2-19	Michael Fitzpatrick	65 N Moison Rd,Blauvelt, NY 10913
392489	70.10-2-20	Thomas Wanamaker	59 N Moison Rd,Blauvelt, NY 10913
392489	70.10-2-21	Charles E Ryan Jr	P.O. Box 151,Park Ridge, NJ 07656
392489	70.10-2-25	Elizabeth J Chambers	6 Tygert Rd,Blauvelt, NY 10913
392489	70.10-2-26	James H Stevenson	10 Tygert Rd,Blauvelt, NY 10913
392489	70.10-2-27	John S Ouderkirk	14 Tygert Rd,Blauvelt, NY 10913
392489	70.10-2-37	Louise Talijan	11 Tygert Rd,Blauvelt, NY 10913
392489	70.10-2-38	Stephen Mingione	7 Tygert Rd,Blauvelt, NY 10913
392489	70.10-3-23	Rosaleen Murphy	60 Moison Rd N,Blauvelt, NY 10913
392489	70.10-3-24	Steven Pandofelli	66 Moison Rd N,Blauvelt, NY 10913
392489	70.10-3-25	Michael Caputo	72 N Moison Rd,Blauvelt, NY 10913
392489	70.10-3-26	Mary Begley	78 N Moison Rd,Blauvelt, NY 10913

14 letters

Fitzpatrick
Hbn list

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>.36</u>
Inspector: <u>Dave</u>	Date App Received: <u>5/27/2020</u>	Received By: <u>drop box</u>
Permit No. <u>50066</u>	Date Issued: _____	
CO No. _____	Date Issued: _____	
Permit Fee: <u>\$348</u>	Ck# <u>578</u>	Paid By <u>Fitzpatrick</u>
GIS Fee: <u>\$20</u>	Ck# <u>576</u>	Paid By _____
Stream Maintenance Fee	Ck # _____	Paid By _____
Additional Fee: _____	Ck# _____	Date Paid _____ Paid By _____
1st 6 mo. Ext.: _____	Ck # _____	Exp. Date: _____ Paid By _____
2nd 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: 65 Moison Rd N Blauvelt, NY 10913

Section: 70.10 **Block:** 2 **Lot:** 19

Property Owner: Michael + Sheri Fitzpatrick

Mailing Address: 65 Moison Rd N Blauvelt, NY 10913

Email: fitzdreams@hotmail.com **Phone #:** 516-456-7756

Lessee (Business Name): _____

Mailing Address: _____

Email: _____ **Phone #:** _____

Type of Business /Use: _____

Contact Person: Sheri Fitzpatrick **Relation to Project:** Owner

Email: fitzdreams@hotmail.com **Phone#:** 516-456-7756.

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

Address: _____ **Phone#:** _____

Builder/General Contractor: Royal Pools + Spas Inc. **RC Lic #** H-07451

Address: PO Box 363 New Hampton, NY 10958 **Phone#:** 845-374-3969

Plumber: _____ **RC Lic #** _____

Address: _____ **Phone#:** _____

Electrician: Massey Electric. **RC Lic #:** 590

Address: 4 Parkway Drive W Nyack, NY 10994 **Phone#:** 845-215-9112

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

Address: _____ **Phone#:** _____

Existing use of structure or land: personal home

Proposed Project Description: above ground pool

Proposed Square Footage: _____ **Estimated Construction Value (\$):** ~~1880~~ 12,000.05

BUILDING DEPARTMENT COMPLETES BELOW

PLANS REVIEWED: _____

PERMIT REFERRED / DENIED FOR:

Chapter 43, R-15 District Table 3.12, Column 1, 2 & 3 = R-15, Group M, S & R
Column 9 Required side yard 20' w/ 10.5' proposed, Column 11 Req'd Total
side yard 50' w/ 30.75' proposed.

2 Variances Required

5/29/2020

5-29-2020

FOR OFFICE
USE ONLY

SECTION

70.10 BLOCK

2 LOT

19

NAME

Fitzpatrick

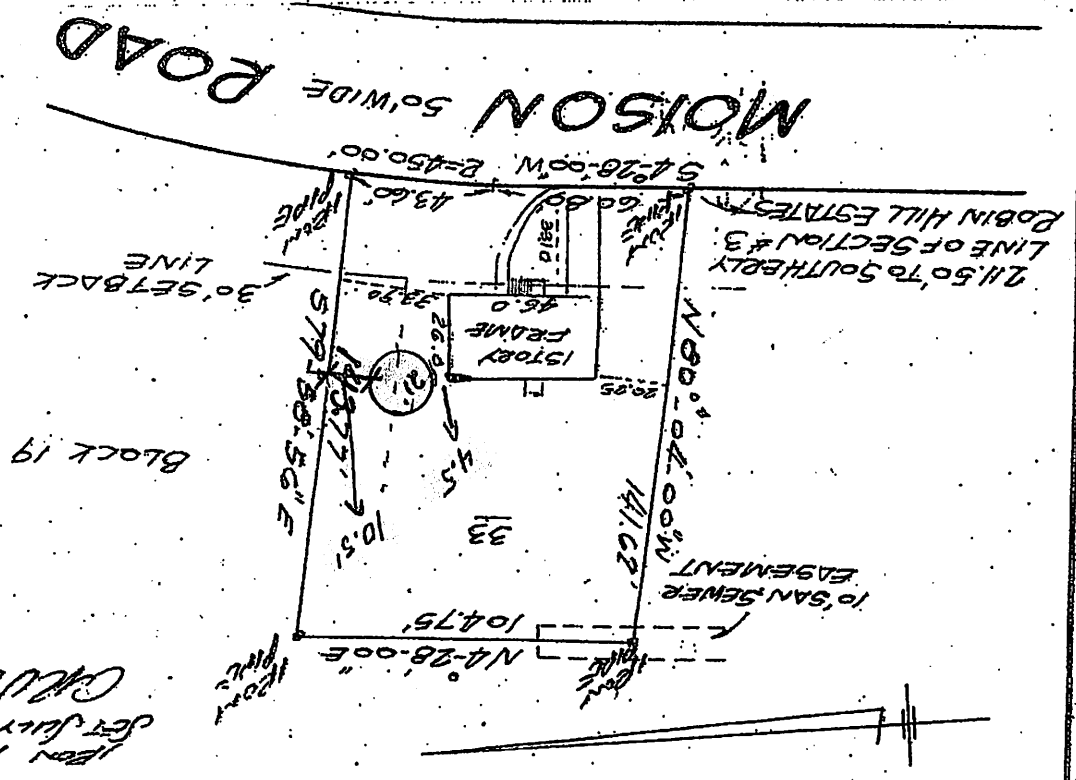
PERMIT#

50066

TOWN: ORANGETOWN
STREET: MOISON BL
DATE: AUG 16 1963
REVISED OCT 8 1963
FINAL SURVEY 1-10-64

SURVEY OF LANDS OF ROBIN HILL ESTATES AT BLAUVELT TOWN OF ORANGETOWN ROCKLAND COUNTY, NY

FROM PLATS
DET SURV 14 1964
C.M.D.



THIS IS A PLOT PLN
BASED ON A SURVEY
DONE BY ALFRED VOGT
DATED 1-10-1964

Scale:
1" = 60'

34
21
13

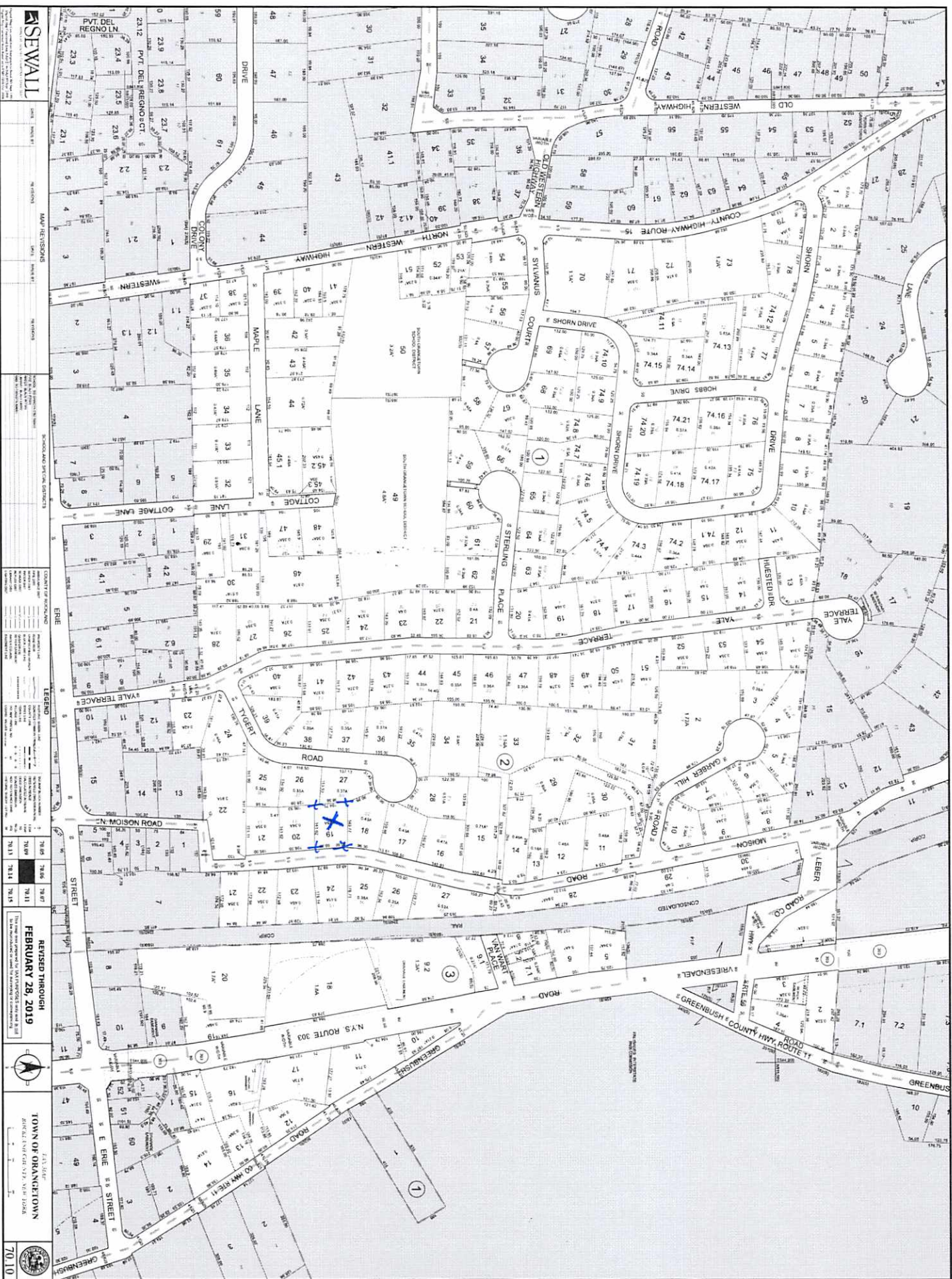
PLAN INFORMATION
Owner Name: ~~ETERNAL~~
Address: ~~105 N MOISON BL~~
Blauvelt
Sec-Bk-Lot: 70.10 - 2 - 19
Prepared By: ~~Michael Fitzpatrick~~
Date: ~~5/27/2020~~

36
21
13
45
101

TOWN
MENT

D

FINISHED: DEV II 5 PM
SURVEYED: DEV II 5 PM
DRAWN: AM
CHECKED: BMR



SEWALL
 1000 S. STATE ST. SUITE 200
 OGDENBURG, NY 13622
 TEL: 518.486.1111
 FAX: 518.486.1112
 WWW.SEWALL.COM

DATE: 1/28/19
 SHEET: 70.10
 MAP REVISIONS:
 1. 1/28/19: ORIGINAL PLAT
 2. 2/28/19: CORRECTED PLAT

PROJECT: SEWALL
 PROPERTY: 1000 S. STATE ST. SUITE 200
 OGDENBURG, NY 13622
 PROJECT NO.: 19-001
 DATE: 1/28/19

CONTRACT NO.: 19-001
 PROJECT NO.: 19-001
 DATE: 1/28/19

LEGEND
 LOT LINES
 EASEMENTS
 UTILITY LINES
 CONVEYANCE LINES
 UNCONVEYED LINES
 UNRECORDED LINES
 UNRECORDED EASEMENTS
 UNRECORDED UTILITY LINES
 UNRECORDED CONVEYANCE LINES
 UNRECORDED UNCONVEYED LINES
 UNRECORDED UNRECORDED EASEMENTS
 UNRECORDED UNRECORDED UTILITY LINES
 UNRECORDED UNRECORDED CONVEYANCE LINES

REVISED THROUGH
FEBRUARY 28, 2019
 TOWN OF OGDENBURG
 1000 S. STATE ST. SUITE 200
 OGDENBURG, NY 13622
 TEL: 518.486.1111
 FAX: 518.486.1112
 WWW.SEWALL.COM
 70.10