

AUG 16 2021

# Historical Areas Board of Review(HABR)

Town of Orangetown Building Department  
20 Greenbush Road, Orangeburg, New York 10962

TOWN OF ORANGETOWN  
BUILDING DEPARTMENT

PROPERTY ADDRESS: \_\_\_\_\_ Section/Block/Lot: \_\_\_\_\_

1. Provide a narrative summary explaining the project and including any facts pertaining to this project which applicant feels would be of interest to the Board;
2. Architectural Plans;
3. It is preferable to the HABR if the Architect would appear at the meeting with the Applicant.
4. Please bring SAMPLES of building materials to the meeting.
5. Materials checklist: (please provide the brand name, type, style, model and color numbers):

	COLOR	MATERIAL	MANUFACTURER
Roof:	Charcoal	Fiberglass asphalt	Timberline HDZ Shingles
Siding:	Victorian Gray	Mill-Creek Double 4-incl	PLY-GEM
Decorative Siding:	White	Vinyl	PLY-GEM
Soffits & Fascia:	White	PLY GEM TRIPLE 4" F	PLY-GEM
Gutters & Leaders:	White	Aluminum alloy	Existing
Windows:	White	Vinyl - V600 WELDED I	All Seasons Door & Window, MFG.
Trim:	White	Aluminum	Spectra Metals
Shutters:	Black	Polypropylene copolymer	Builders Edge
Front Door:	White	Steel Prehung	Steves & Sons
Back Door:			
Garage Door(s):			
Other Door(s):	White	Full composite sliding do	MP Doors
Lighting:			
Lighting:			
Stone or Rock being used on Structure:			
Stone or Rock being used on walkway(s):			
Other:			

Name of Municipality: TOWN OF ORANGETOWN Date Submitted: \_\_\_\_\_

### 2021 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 checked="" type="checkbox"/> Residential <input checked="" 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#: 51596  
 ASSIGNED \_\_\_\_\_  
 INSPECTOR: Dom  
 Referred from Planning Board: YES / NO  
 If yes provide date of Planning Board meeting: \_\_\_\_\_

Project Name: LUCEVIC RESIDENCE

Street Address: 587 PIERMONT AVE  
197 KINGS HIGHWAY TAPPAN NY 10983

Tax Map Designation:  
Section: 77.07 Block: 1 Lot(s): 21  
Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot(s): \_\_\_\_\_

Directional Location:  
On the EAST side of KINGS HIGHWAY, approximately  
106 feet NORTH of the intersection of BABCOCK LANE, in the  
Town of Orangetown in the hamlet/village of TAPPAN.

Acreage of Parcel <u>.344</u>	Zoning District <u>R-15</u>
School District <u>SOC SD</u>	Postal District <u>Tappan</u>
Ambulance District <u>SoAC</u>	Fire District <u>Tappan</u>
Water District <u>Suez</u>	Sewer District <u>Orangetown</u>

Project Description: (If additional space required, please attach a narrative summary.)  
replace siding, replace roofing, replace windows and doors , renovate kitchen and baths,  
add new rear deck. Enclose existing garage to family room

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.  
Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

**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? ~~Yes~~ **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.

Building permit application has been reviewed and we were referred to the HARB

\_\_\_\_\_

\_\_\_\_\_

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

n/a

\_\_\_\_\_

\_\_\_\_\_



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

**HISTORICAL AREAS BOARD OF REVIEW REFERRAL LETTER**

Date: June 17, 2021

Applicant: Lucevic

Address: 197 Kings Highway, Tappan, NY

RE: Application Made at: same

Subject Referral for: Chapter 12 Section 12-4 Paragraph A requires HABR Approval

Section: 77.07 Block: 1 Lot: 21


Dear Lucevic:


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

June 11, 2021, has been referred to appear before the H.A.B.R. I have enclosed a copy of your application, where you will find at the bottom the reason for denial.

The Clerk to the Historical Areas Board of Review, Debbie Arbolino, can assist you in the preparation necessary to appear before the board. Please contact her at 845-359-8410 ext. 4331 or [darbolino@orangerown.com](mailto:darbolino@orangerown.com)

Sincerely,

  
Richard Oliver  
Deputy Building Inspector

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

6.17.21  
Date  
CC: Rosanna Sfraga  
Liz Decort  
Debbie Arbolino

S	PRINT KEY	NAME	ADDRESS
89	77.07-1-14	Rosa Henry De La	59 Delo Dr, Tappan, NY 10983
89	77.07-1-15	Johny Joseph	51 Delo Dr, Tappan, NY 10983
89	77.07-1-16	Diane Bozzetto	41 Delo Dr, Tappan, NY 10983
89	77.07-1-17	Cira Calabrese	31 Delo Dr, Tappan, NY 10983
89	77.07-1-20	Lee Ann Levine	209 Kings Hwy, Tappan, NY 10983
89	77.07-1-21	Adis Lucevic	197 Kings Hwy, Tappan, NY 10983
89	77.11-1-14	Joseph A Napoli	179 Kings Hwy, Tappan, NY 10983

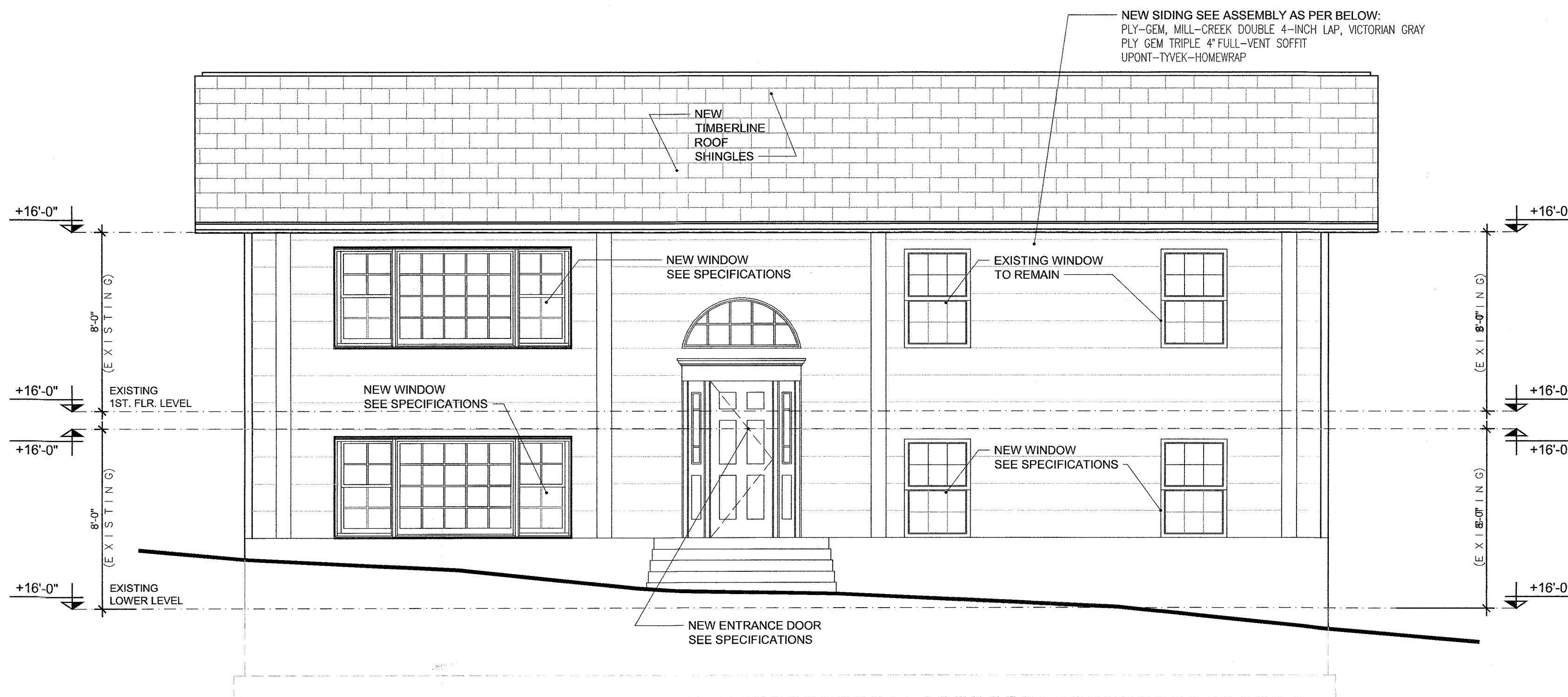
RECEIVED

AUG 6 2011

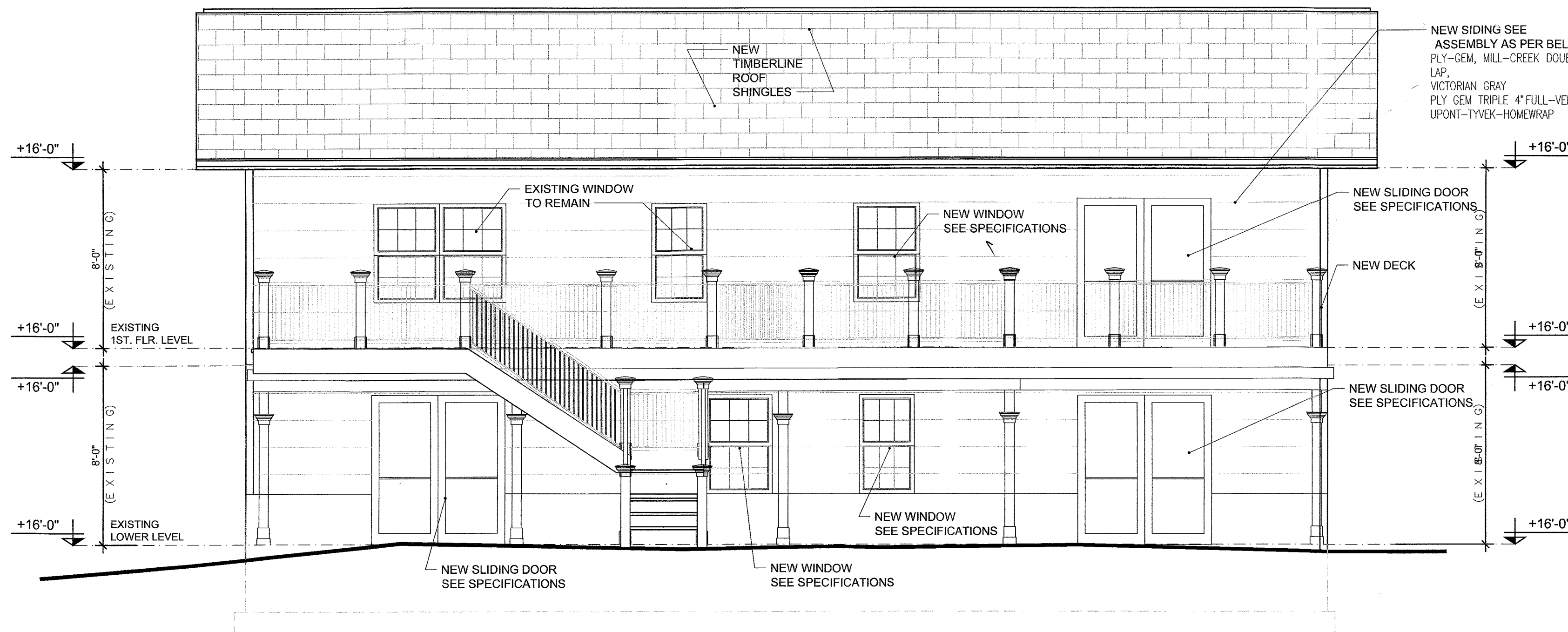
TOWN OF ORANGETOWN  
BUILDING DEPARTMENT



## NOTES



FRONT ELEVATION  
1  
A-200  
1/4"=1'-0"



FRONT ELEVATION  
2  
A-200  
1/4"=1'-0"

02/18/21 ISSUED FOR REVIEW  
DATE SUBMISSIONS / REVISIONS

## ELEVATIONS

OCT 12 2021

RECEIVED

AUG 16 2021

TOWN OF ORANGETOWN  
BUILDING DEPARTMENT

A-200.00