

Zoning Board of Appeals

Town of Orangetown Building Department
20 Greenbush Road, Orangeburg, New York 10962
(845) 359-8410, ex 4331, www.orangetown.com

2022 APPLICATION CHECKLIST:

THE FOLLOWING ITEMS ARE REQUIRED IN ORDER TO ACCEPT AN APPLICATION:

Date: 2/2/22 Section: 74.06 Block: 3 Lot: 4

Project Name: CALABRIA PIZZA / PIZZA Addition kitchen

Project Address: 479 WESTERN Hwy Orangeburg NY 10962

1. A signed and dated completed Part I and Part II of the Board Application.
2. A copy of the Building Permit Denial Application, signed by the Director of the Department. (*Zoning Board applications that are referred from the Planning Board or consultations do not require a Building Permit Denial.*)
3. Copy of Deed to present owner of property.
4. Agents must have written authorization from the owner to appear in front of the Board. Contract Purchaser may file a copy of the contract.
5. Complete Environmental Assessment form **if needed**.
6. List of Names/Addresses of all property owners within 200 feet of perimeter of site, obtained from the Land Use Board Office. *Application must include a map of tax lots noting 200 foot radius line as applicable, measuring from all points on property line, not from center of site, (excluding public roadways, right of ways, public utility or public entity). Names and addresses must be placed on stamped #10 envelopes, without return address. Do not use a postage meter.*
7. Two Copies of the survey plan, scale, (1 inch = 30 feet minimum) showing all zoning bulk, bulk chart and lot dimensions, size and use of all existing and proposed structures, north arrow and vicinity map. **Plans must be signed and sealed by a New York State Professional Engineer and/or Land Surveyor.**

Drawing Name: CALABRIA PIZZA / PIZZA kitchen Addition
HARRY GoldSTEIN Date: 2/2/22

Prepared by: HARRY GoldSTEIN



8. Two copies of architectural plans showing dimensions and height of existing and proposed construction. **Plans must be signed and sealed by a New York State Licensed Architect or Professional Engineer.**

Drawing Name Pizza Kitchen Addition Date: 2/2/22

Prepared by: HARRY GoldSTEIN

9. Provide **One Check**, for applicable fees, made payable to "Town of Orangetown" Please calculate the total amount, based on the list provided below:

Variance, or Special Permit Fee:

Variance: Residential District \$250.00 Other \$400.00

Special Permit: Residential District \$250.00 Other \$400.00

Geographic Information System Database Fee: \$65.00

¹ Legal Notice Advertisement Fee: \$150.00

(For each time an advertisement or re-advertisement has to be published):

¹Effective February 4th, 2015 as per Town Board Resolution No. 45, January 28, 2015

10. Submit completed application and fees to the Board Clerk to be processed.

SUBMITTED BY: _____ **DATE RECEIVED BY BOARD CLERK:** _____

By signing below, the applicant/agent agrees that they have completed and supplied all items listed above.

Print Name: Anthony Ripani Signature: A. Ripani

Email Address: CALABRIAP2@AOL.COM

ONCE DEEMED COMPLETE BY BUILDING INSPECTOR
APPLICANT SHALL SUBMIT THE FOLLOWING:

- 15 copies** of all Plans signed and sealed by the appropriate New York State Professional. (Same plans submitted and reviewed by the Building Inspector). List type of plans submitted.
- All drawings** shall be submitted in **PDF format** via email to DArbolino@orangetown.com

Once all items are received, project will then be assigned to the appropriate hearing date by the Board Clerk and the applicant will be notified.

Once scheduled for a meeting date, all applicants are required to erect signs containing information regarding the public hearing on every lot corner and once every 100 feet facing each public street on which the property abuts, see Chapters 21 and 21A of the Town of Orangetown Town Code. Such signs shall be obtained from the Zoning Board of Appeals Office. The Board Clerk will notify the applicant when signs are ready to be picked up from the ZBA office.

Zoning Board of Appeals

Town of Orangetown Building Department
20 Greenbush Road, Orangeburg, New York 10962
(845) 359-8410, ex 4331, www.orangetown.com

2022 Information Sheet

NOTE THE FOLLOWING:

- **PLEASE BE AWARE THAT THE APPLICATION PROCESS TAKES APPROXIMATELY 40 DAYS FROM THE TIME OF SUBMISSION TO YOUR BOARD MEETING.**
- **APPLY EARLY IN THE YEAR IF YOU WANT TO HAVE YOUR POOL OR DECK FOR THE SPRING AND SUMMER MONTHS.**

Important Information

A building permit denial must be included with your application.
Please ask about the process to obtain abutting property owners.

2022 – ZONING BOARD OF APPEALS MEETING DATES

1ST & 3RD Wednesday of every month (unless otherwise noted), in the Greenbush Auditorium,
20 Greenbush Road, Orangeburg, New York. **All meetings start at 7:00 p.m.**

January 5

January 19

February 2

February 16

March 2

March 16

April 6

April 20

May 4

May 18

June 1

June 15

July 6

July 20

No meetings in August

September 7

September 21

October 5

October 19

November 2

November 16

December 7

(Only 1 meeting in December)

CONTACT PERSON INFORMATION SHEET:

NAME: Anthony Ripani

MAILING ADDRESS:

18 Bridge Lane
Street number (PO Box) Street Name

Haverstraw NY 10927
City State Zip Code

TELEPHONE #: 845 365-2300

CELL PHONE #: 845 304-2387

FAX #: _____

E-MAIL ADDRESS: Calabriapz@aol.com

Relation to project: OWNER

Name of Municipality: TOWN OF ORANGETOWN Date Submitted: _____

2021 LAND USE BOARD APPLICATION

Please check all that apply:

| | |
|---|---|
| <input checked="" type="checkbox"/> Commercial | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Planning Board | <input type="checkbox"/> Historical Board |
| <input checked="" 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 type="checkbox"/> Special Permit | <input type="checkbox"/> Interpretation |
| <input checked="" type="checkbox"/> Variance | |
| <input type="checkbox"/> Performance Standards Review | |
| <input type="checkbox"/> Use Variance | |
| <input type="checkbox"/> Other (specify): _____ | |

PERMIT#: BLDG-432-22
ASSIGNED
INSPECTOR: Glenn

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

Project Name: CALABRIA

Street Address: 479 WESTEN Hwy
ORangeburg NY 10962

Tax Map Designation: Section: 74-06 Block: 3 Lot(s): 4
Section: _____ Block: _____ Lot(s): _____

Directional Location: On the East side of Western Highway, approximately Zero feet _____ of the intersection of Mountainview Road, in the Town of ORANGETOWN in the hamlet/village of Orangeburg.

| | |
|-----------------------------|-----------------------------------|
| Acreage of Parcel _____ | Zoning District <u>R-15</u> |
| School District _____ | Postal District <u>ORangeburg</u> |
| Ambulance District _____ | Fire District <u>ORangeburg</u> |
| Water District <u>SUB 2</u> | Sewer District <u>ORangeburg</u> |

Project Description: (If additional space required, please attach a narrative summary.)
Take Down Existing Non conforming porch and
create an enclosed structure and create a
PIZZA KITCHEN

The undersigned agrees to an extension of the statutory time limit for scheduling a public hearing.
Date: 2/2/22 Applicant's Signature: [Signature]

APPLICATION REVIEW FORM

Applicant: Anthony Ripani Phone # 845 304-2387

Address: 18 Bridge 1A Haverstraw NY 10927
Street Name & Number (Post Office) City State Zip Code

Property Owner: Richard Miller Phone # _____

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

Engineer/Architect/Surveyor: Harry Goldstein Phone # 914-393-5787

Address: 4 Regina Road Monsey NY 10952
Street Name & Number (Post Office) City State Zip Code

Attorney: _____ Phone # _____

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

Contact Person: Anthony Ripani Phone # 845 304-2387

Address: 18 Bridge 1A Haverstraw NY 10927
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 _____

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.

APPLICATION REVIEW FORM

Applicant's Signature and Certification

State of New York)
County of Rockland) SS.:
Town/Village of Orange Town)

I, Anthony Ripani hereby depose and say that all the above statements contained in the papers submitted herewith are true.

Signature: [Handwritten Signature]

Mailing Address: 18 Bridge Ln
HAVERSTOWN NY 10927

SWORN to before this

1 day of February, 20 22
Gina Raymond
Notary Public

Gina M. Raymond
Notary Public, State of NY
No. 01RA6222832
Qualified in Rockland County
Commission Exp. June 1, 20 22

Owner/Applicant's Consent Form to Visit Property

I, Anthony Ripani, owner/applicant of the property described in the application submitted to the town/village board, planning board, zoning board of appeals and/or supporting staff, do hereby give permission to members of said boards and/or supporting staff to visit the property in question at a reasonable time during the day.

[Handwritten Signature]
Owner/Applicant Signature

SWORN to before this

1 day of February, 20 22
Gina Raymond
Notary Public

Gina M. Raymond
Notary Public, State of NY
No. 01RA6222832
Qualified in Rockland County
Commission Exp. June 1, 20

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APPLICATION REVIEW FORM

Affidavit of Ownership/Owner's Consent

State of New York)
County of Rockland) SS.:
Town/Village of ORANGETOWN

I, Richard F. Miller being duly sworn, hereby depose and say that I reside in the county of Rockland in the state of New York.

I am the (* Richard F. Miller) owner in the fee simple of premises located at: 479 Western Highway, Orangetown, N.Y. 10962
described in a certain deed of said premises recorded in the Rockland County Clerk's Office in Liber of conveyances, page

Said premises have been in my/its possession since 2012.
Said premises are also known and designated on the Town of ORANGETOWN.
Tax Map as: section: 74.06 block: 3 lot(s): 4

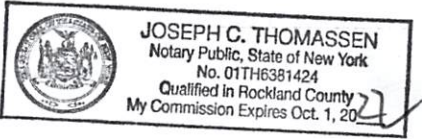
I hereby authorize the within application on my behalf and that the statement of fact contained in said application are true, and agree to be bound by the determination of the board.

Owner Signature: Richard F. Miller

Mailing Address: 57 Contempra Circle
Tappan NY 10983

SWORN to before this
4th day of February, 2022

[Signature]
Notary Public



*If owner is a corporation, fill in the office held by deponent and name of corporation, and provide a list of all directors, officers and stockholders owning more that 5% of any class of stock.

Handwritten text, possibly a signature or date, including "1883" and "1884".

JOSEPH C. THOMASSEN
Notary Public, State of New York
No. 01186, Tenth
District in Rockland County
My Commission Expires Oct. 1, 1884



APPLICATION REVIEW FORM

Affidavit Pursuant to Section 809 of the General Municipal Law

State of New York)

County of Rockland) SS.:

Town/Village of _____)

I, _____, being duly sworn, hereby depose and say that all the following statements and the statements contained in the papers submitted herewith are true and that the nature and extent of any interests set forth are disclosed to the extent that they are known to the applicant.

1. Print or type full name and post office address

Certifies that he/she is owner or agent of all that certain lot, piece or parcel of land and/or building described in this application and if not the owner that he/she has been duly and properly authorized to make this application and to assume responsibility for the owner in connection with this application for the relief set forth:

2. To the _____ of the Town/Village of _____, Rockland County, New York:

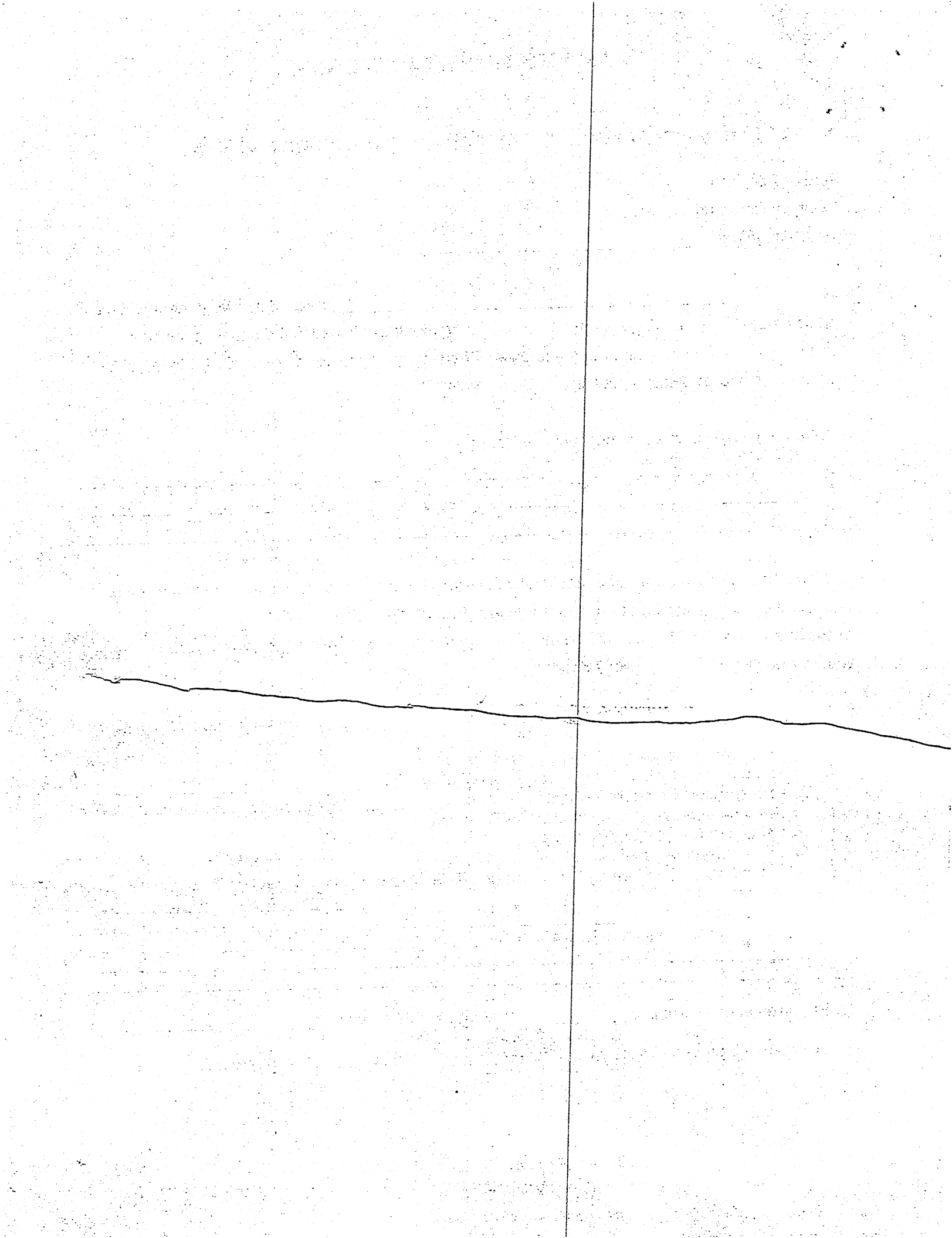
Application, petition or request is hereby submitted for:

- Variance or modification from the requirement of Section _____;
- Special permit per the requirements of Section _____;
- Review and approval of proposed subdivision plat;
- Exemption from a plat or official map;
- An order to issue a certificate, permit or license;
- An amendment to the Zoning Ordinance of Official Map or change thereof;
- Other (explain) _____;

To permit construction, maintenance and use of _____

3. Premises affected are in a _____ zone and from the Town of _____

Tax map, the property is known as Section _____, Block, _____, Lot(s) _____.



APPLICATION REVIEW FORM

4. There is no state officer, Rockland County officer or employee or town/village officer or employee nor his or her spouse, brother, sister, parent, child or grandchild, or a spouse of any of these relatives who is the applicant or who has an interest in the person, partnership or association making this application, petition or request, or is an officer, director, partner or employee of the applicant, or that such officer or employee, if this applicant is a corporation, legally or beneficially owns or controls any stock of the applicant in excess of 5% of the total of the corporation if its stock is listed on the New York or American Stock Exchanges; or is a member or partner of the applicant, if the applicant is an association or a partnership; nor that such town/village officer or employee nor any member of his family in any of the foregoing classes is a party to an agreement with the applicant, express or implied, whereby such officer or employee may receive any payment or other benefit, whether or not for service rendered, which is dependent or contingent upon the favorable approval of this application, petition or request.

5. To the extent that the same is known to your applicant, and to the owner of the subject premises **there is disclosed herewith** the interest of the following officer or employee of the State of New York or the County of Rockland or of the Town/Village of ORANGETOWN in the petition, request or application or in the property or subject matter to which it relates:

(IF NONE, SO STATE)

- a. Name and address of officer or employee NO
- b. Nature of interest NO
- c. If stockholder, number of shares NO
- d. If officer or partner, nature of office and name of partnership NO
- e. If a spouse or brother, sister, parent, child, grandchild or the spouse of any of these blood relatives of such state, county or town/village officer or employee, state name and address of such relative and nature of relationship to officer and employee and nature and extent of office, interest or participation or association having an interest in such ownership or in any business entity sharing in such ownership. NO
- f. in the event of corporate or limited liability company ownership: A list of all directors, officers and stockholders of each corporation or members of each limited liability company owning more than five (5%) percent of any class of stock or more than five (5%) percent beneficial interest, must be attached, if any of these are officers or employees of the State of New York, or of the County of Rockland, or of the Town of Orangetown.

6. I do hereby depose and say that all the above statements and statements contained in the papers submitted herewith are true, knowing that a person who knowingly and intentionally violates this section is guilty of a misdemeanor.

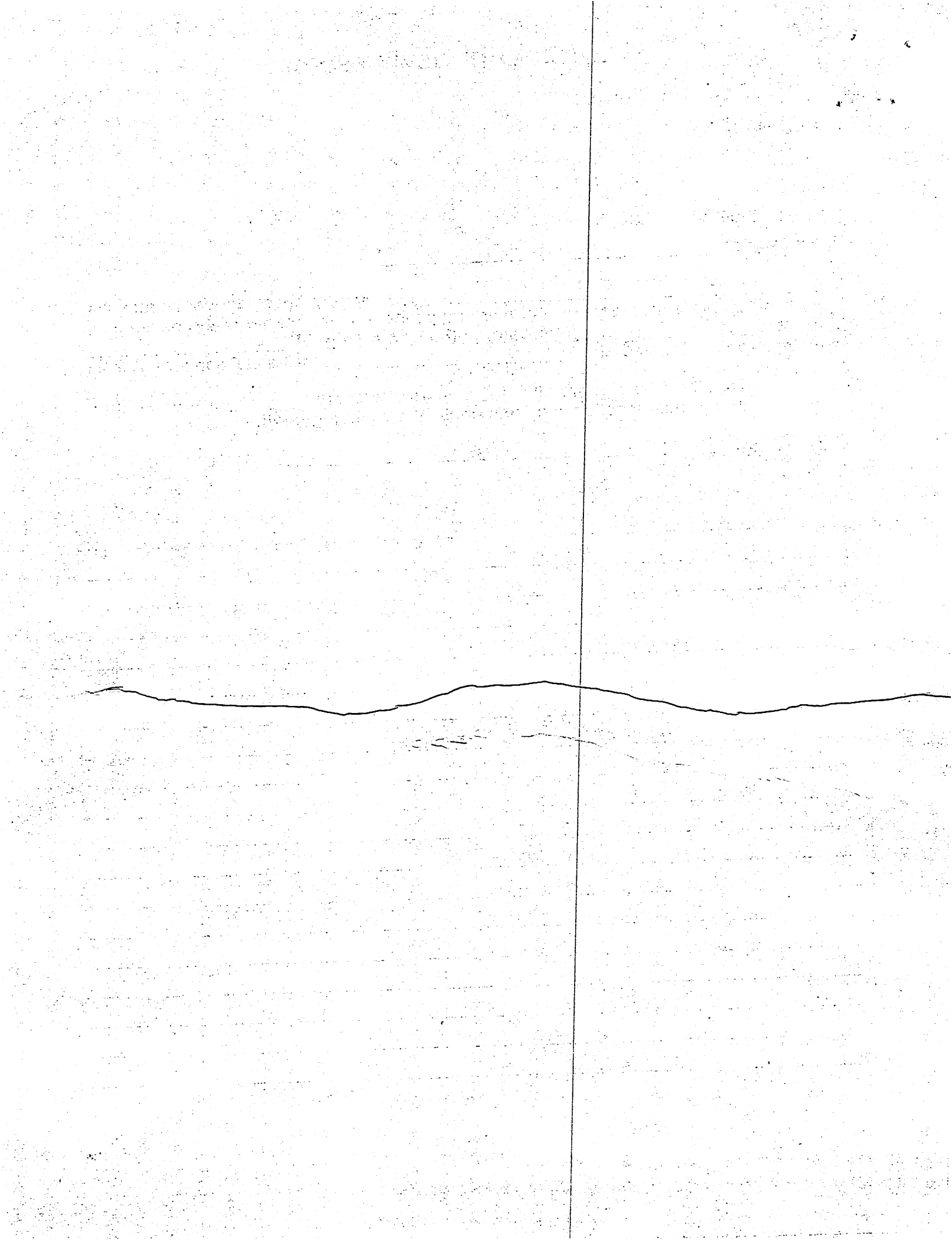
Signature: [Handwritten Signature]

Mailing Address: 18 Bridge LA
Haverstown NY 10927

SWORN to before this

1 day of February, 2022
[Handwritten Signature]
Notary Public

Gina M. Raymond
Notary Public, State of NY
No. 01RA6222832
Qualified in Rockland County 22
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APPLICATION REVIEW FORM

Reimbursement for Professional Consulting Services

The Town/Village Board, Planning Board and Zoning Board of Appeals in the review of any application described above, may refer any such application presented to it to such engineering, planning, environmental or other technical consultant as such Board shall deem reasonably necessary to enable it to review such application as required by law. The charges made by such consultants shall be in accord with such charges usually made for such services in the metropolitan New York region or pursuant to an existing contractual agreement between the town/village for the cost of such consultant services upon receipt of the bill. Such reimbursement shall be made prior to final action on the application.

Permits will not be issued and site plan or subdivision will not be signed until bill is paid in full.

Applicant's Signature: 

SWORN to before this

1 day of February, 2022
Gina Raymond
Notary Public

Gina M. Raymond
Notary Public, State of NY
No. 01RA6222832
Qualified in Rockland County
Commission Exp. June 1, 2022

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL DISTRICT OF FLORIDA
IN AND FOR THE COUNTY OF ALACHSA
Case No. 03-10000
STATE OF FLORIDA
vs.
JAMES EARL RAY, JR.
Defendant

APPLICATION REVIEW FORM

PART II

Application before the Zoning Board of Appeals

Application, petition or request is hereby submitted for:

- Variance from the requirement of Section _____
- Special permit per the requirements of Section _____
- Review of an administrative decision of the Building Inspector;
- An order to issue a Certificate of Occupancy;
- An order to issue a Building Permit;
- An interpretation of the Zoning Ordinance or Map;
- Certification of an existing non-conforming structure or use;
- Other (explain)

To permit construction, maintenance or use of

Porch Addition

If an area variance is required, please fill out below:

This application seeks a variance from the provisions of Article _____, Section(s)

_____. Specifically, the applicant seeks a _____

(side yard, lot area, height, etc.) of _____ (feet, height, floor area ratio, etc.)