# **Historical Areas Board of Review(HABR)**

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

PROPERTY ADDRESS: 65 Old Tappan M. Tappa NY (0983

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.

	COLOR	MATERIAL	MANUFACTURER
Roof:			
Siding:			
Decorative Siding:			
Soffits & Fascia:			
Gutters & Leaders:			
Windows:			
Trim:			
Shutters:			
Front Door:			
Back Door:			
Garage Door(s):			
Other Door(s):			
Lighting:			
Lighting:			
Stone or Rock being			
used on Structure:			
Stone or Rock being used on walkway(s):			
Other: Sign	Plany pantions	Itigh Density	

## Name of Municipality: <u>TOWN OF ORANGETOWN</u> Date Submitted:\_\_\_\_\_

## **2023 LAND USE BOARD APPLICATION**

	Please check all that Commercial Planning Board Zoning Board of Appeals  Subdivision Number of Lots Site Plan Conditional Use  Special Permit Variance Performance Standards Review Use Variance Other (specify): Styre	Residential
Project	Name: Moringa	
Street A	Address: 175 N. US-9 W Suite	12, Congers NY 10970
Direction	onal Location:	Lot(s):
 Town of	right side of Stowns Ln  3' feet Work of the intersection  Orangetown in the hamlet/village of	of <u>Stephens Ln</u> , in the Cappan.
S	Acreage of Parcel School District Ambulance District Vater District	Zoning District Postal District Fire District Sewer District
To Columbia Sign	Description: (If additional space required, pleasinstal Q 2.5' X 9.5' Carved or of letter (5 and boulonooma to be secured with Street S	sign to existing rack.

# APPLICATION REVIEW FORM

Applicant: Maile Shini	1	Phone	=# <u>845-7</u>	67-4111
Address: 175 N. US-9W Su	ork D st Office)	Conger3	State	/ 09Z O Zip Code
Property Owner: Ade Bione  Address: 15 Will Grele, Street Name & Number (Pos	<u>li</u>	Phon	e# <u>845-6</u>	523-3285
Address: / Street Name & Number (Pos	West-F st Office)	Nyach	N. Y. State	1099 Zip Code
Engineer/Architect/Surveyor:	/p		Phone #	
Address:Street Name & Number (Pos	st Office)	City	State	Zip Code
		Phone #		
Address: Street Name & Number (Pos	t Office)	City	State	Zip Code
Contact Person: Meute 8h Address: 175 N- V5-9W Street Name & Number (Po	nin Svitetz	_ Phone #	845-767- Ce18 NY	10920
GENERA	L MUNIC s property is	CIPAL LAW s within 500 feall that apply)	REVIEW:	Zip Code
IF ANY ITEM IS CHECKED, A REVIEW IN PLANNING UNDER THE STATE G	NUST BE DO ENERAL <b>M</b> U	NE BY THE ROUNICIPAL LAW	OCKLAND COUN , SECTIONS 239	TY COMMISSIONER OF L, M, N, AND NN.
State or County Road Long Path Municipal Boundary		Cou	e or County Par nty Stream nty Facility	k
List name(s) of facility checked above	: 	<u>/</u>		· · · · · · · · · · · · · · · · · · ·
Referral Agencies:		7		
RC Highway Department RC Drainage Agency NYS Dept. of Transportation NYS Thruway Authority Adjacent Municipality Other		RC Dept. of NYS Dept. o	of Environmenta Health of Environmental nterstate Park Co	Conservation

#### **APPLICATION REVIEW FORM**

# FILL IN WHERE APPLICABLE. (IF THE FOLLOWING DOES NOT APPLY PLEASE MOVE ON TO THE NEXT PAGE)

lf <b>subdivi</b>	sion:
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 pla	n.
1	) Existing square footage
2	) Existing square footage
3	Number of dwelling units
If <b>special</b>	permit, list special permit use and what the property will be used for.
Environn	nental Constraints:
and net area	opes greater than 25%? If yes, please indicate the amount and show the gross reams on the site? If yes, please provide the names.
Are there we	etlands on the site? If yes, please provide the names and type:
Project H	listory: ject ever been reviewed before?
	e 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.	NO
	•



#### 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
	E HISTORICAL AREA	S BOARD OF REVIEW
Date: 5.10.23 s Applicant: Morninga R	Section: 77.10 Block: 3	B Lot: 18
Address: 65 Old Tapp	// N N N N N N N N N N N N N N N N N N	
RE: Application Made at:		
		equires HABR approval
Comments: sign		10 1 12022 -
		LAND STADARDS
Dear <b>Morninga</b> :		
3.23.23 , has been referr	ed to the Historical Areas Board Arbolino, can assist you in the pre	975 , which you submitted on of Review. The Clerk to the Historical eparation necessary to appear before the @orangetown.com
Sincerely,  Richard Oliver Deputy Building Inspector	10/03	

Signature of Director

NOTE: PLEASE KEEP FOR YOUR RECORDS 1-30-2023 JSA

Date CC:

Liz DeCort

Debbie Arbolino

20 Greenbush Road

# 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

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NAME

77.10-2-17 Tappan Reformed Church Jacole Galperin 77.10-2-26 77.10-2-27 80 Old Tappan Road LLC 2489 77.10-2-28 Rose Bucci 2489 77.10-3-16 87 Old Tappan Road Liç. 2489 77.10-3-17 DKK Realty LLC 2489 77.10-3-18 61-67 Old Tappan Road LLC 2489 77.10-3-19 U S Postal Service 2489 77.10-3-20 U S Postal Service KTW Ent Inc 2489 77.10-3-21 2489 77.10-3-22 Gerald Hahn 2489 77.10-3-23 Patrick Mc Kenna 2489 77.10-3-24 Margaret Anne Thomsen 2489 77.10-3-34 Daejin Nam 2489 77.10-3-35 Victoria H Baron 2489 77.10-3-36 Bernadette O'Donnett 2489 77.10-3-49 Bruno Biondi 2489 77.10-3-50 Ted N Baker 2489 77.10-3-51 Altagrace G Richardson 2489 77.10-3-52 Erick Hoovis

32 Old Tappan Rd, Tappan, NY 10983 17 Grand Av, Tappan, NY 10983 80 Old Tappan Rd, Tappan, NY 10983 ₹ 88 Old Tappan Rd, Tappan, NY 10983 V 5 Park St, Montvale, NJ 07645 P.O. Box 1047, Pearl River, NY 10965 15 Wolfe Cir, W Nyack, NY 10994 6 Griffin Rd No, Windsor, CT 06006-0120 6 Griffin Rd No, Windsor, CT 06006-0120 109 Newport Ave, Tappan, NY 10983 43 Old Tappan Rd, Tappan, NY 10983 39 Old Tappan Rd, Tappan, NY 10983 10 Brandt Ave, Tappan, NY 10983 45 Charles St, Tappan, NY 10983 37 Charles St, Tappan, NY 10983 ~ 52 Charles St; Tappan, NY 10983 V 15 Wolfe Cir,W Nyack, NY 10994 V 11 Stephens Rd, Tappan, NY 10983 ~ 19 Stephens Ln, Tappan, NY 10983 154 Farmingdale Rd, Chester, NY 10918

#### TOWN OF ORANGETOWN

Office of Building, Zoning, Planning Administration and Enforcement (OBZPAE)

20 Greenbush Road Orangeburg, New York 10962

Tel: (845) 359-8410

Website: www.orangetown.com

Tenant

THIS FORM MUST ACCOMPANY ALL LAND USE APPLICATIONS SUBMITTED BY AN ENTITY AS DEFINED IN CHAPTER 43, ARTICLE 16 OF THE TOWN CODE OF THE TOWN OF ORANGETOWN.

PROJECT NAME:	Carred	Sign				
PROPERTY ADDRESS:	:65 Old	Tappan Rd,	Toppan,	NY 109 83		
TAX LOT ID:		•				
NAME OF APPLICANT:						
OWNER OF PROPERTY:	61-67	Old Tappa	food L	C.		
Land Use Application/Brie	f Description o	f Project: des	taurant			

#### PART ONE:

- Pursuant to Section Chapter 43, Article 16 of the Town Code, the disclosure of the names and address of all
  persons or entities owning any interest or controlling position of any limited liability company, limited liability
  partnership, general or limited partnership, professional corporation, joint venture, doing business as name or
  venture, association, business trust, or non-publically traded corporation, (hereinafter referred to as the "Entity") is
  required when filing a land-use application.
- 2. Set forth the names of <u>all</u> members, officers, shareholders, directors, partners or other authorized persons of the Entity for the past year from the date of filing of any land-use board application.
- 3. Attach a copy of <u>all</u> Entity documents filed with the NYS Secretary of State, or in any other State of formation, including:
  - a. All records regarding membership interests in the Entity;
  - b. Records regarding the transfer of membership interests since the date of formation.
- 4. If a member of the Entity is <u>not</u> a natural person, please provide the name(s) and address(es) for the of the non-natural person member of that Entity, and provide the formation filing documents for such Entity.
- 5. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Entity:	•
	Moringa Bodian Carry house-
Address:	Moringa Budian Gerry house. 65. Old Tappen Rand. Orange hung.
Telephone Number:	
	845 680 6240
E-Mail Address:	
	Moringaintian Curry house @ gmail. com
State/Date of Formation:	
Contact Person:	
	SIVARAMAN CIURUSAMY 201-895-8934

#### PART TWO:

- 6. Please list <u>all</u> persons, officers, limited or general partners, directors, members, shareholders, managers, authorized persons, beneficial owners, and any others with <u>any</u> interest in or with the above referenced entity.
- 7. Please NOTE that an "authorized person" means an individual or entity, whether or not a shareholder, member, officer or director, or person identified by any other title, who is authorized to act, solely or in conjunction with others, on behalf of or for the Entity.
- 8. List <u>all</u> persons with a membership or voting interest or controlling position in the Entity. Please provide that parties' business or personal address and telephone number, email address and other contact information.
- 9. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Individual	Address	Telephone	Email	Interest or Role in Entity
1. SIVARAMAN	95 Lincoln Ave			
Gurusamy		j l	SIVAS 32 Of mail.on.	
2. James bond	20, Garber 89, C8	404:369	Jemesbond Paramonanda	
Para manawakn	20, Garber 59, C8 Ridgewood - 1VI-07450	9937	@ gmail (com	
3.	:		,	
4.		•,	•	
5.				
6.				,

#### PART THREE:

- 10. Is any person identified in Part TWO currently employed by or hold a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? Please circle:

  YES

  NO
- 11. Is any person identified in PART TWO the spouse, sibling, parent, child, or grandchild of any individual who is employed by or holds a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? Please circle:
- 12. Does any person identified in PART TWO perform services for or have a contract, or employed by an entity that has a contract to perform services for the Town of Orangetown? Please circle: YES NO
- 13. If the answer is "YES" to any of the above, please provide a supplement sheet and list every Board, Department, Office, agency or other position with the Town of Orangetown in which the party has a position, paid or unpaid, or provides services for, and identify the agency, title and date of hire,

#### PART FOUR:

- 14. The information contained herein shall be updated with the Clerk of the Boards no later than THIRTY (30) DAYS after <u>any</u> change in information.
- 15. NOTE: Any person who (a) provides false or fraudulent beneficial ownership information; (b) willfully fails to provide complete or updated information; or (c) during the application process, fails to obtain or maintain credible, legible and updated beneficial ownership information shall be subject to suspension of any pending application by the applicant entity, or a "stop work" order on any work relating to the application, or both, in addition to any other applicable penalties under the Town Code, or State and Federal Statute, or both.

STATE OF RENT TORK	·
Bergen ) ss.:  COUNTY OF ROCKLAND )	
I, Daway Daway Daway An active or a business duly authorized by law to do bus Affidavit are true, accurate and complete. I upon the health, safety and general welfar Town Board is required to be certain that a land use approval or permission must have NYS General Municipal Law, and that th authorized persons, beneficial owners, ar membership or voting interest in the entity is	, being duly sworn, deposes and says that I am (Title) qualified member of the
	\ \frac{1}{2} \land \frac{1}{2

Signature

Sworn to and subscribed in my presence

This 25 day of February, 2023

NOTARY PUBLIC

BRAYAN S. ROSARIO-ORTEGA

	The second secon	
Clerk of Boards Review:  Date: Initials:	ENTITY DISCLOSURE FORM	Building Dept. (Accepted By): Date:Initials:
	ERITT DISCLOSURE LOUIS	
Office	TOWN OF ORANGETOWN of Building, Zoning, Planning Administration and Enforce 20 Greenbush Road Orangeburg, New York 10962 Tel: (845) 359-8410 Website: www.orangetown.com	ement (OBZPAE)
THIS FORM MUST ACCO CHAPTER 43, ARTICLE 1	OMPANY ALL LAND USE APPLICATIONS SUBMITT 16 OF THE TOWN CODE OF THE TOWN OF ORANGE	ed by an entity as defined in Town.
PROJECT NAME:	Corved Sign	
PROPERTY ADDRESS:	65 Old Tappan Rd. Tappen, NY: 1098	33

#### PART ONE:

TAX LOT ID:

OWNER OF PROPERTY:

Land Use Application/Brief Description of Project:

- Pursuant to Section Chapter 43, Article 16 of the Town Code, the disclosure of the names and address of all persons or entities owning <u>any</u> interest or controlling position of any limited liability company, limited liability partnership, general or limited partnership, professional corporation, joint venture, doing business as name or venture, association, business trust, or non-publically traded corporation, (hereinafter referred to as the "Entity") is required when filing a land-use application.
- 2. Set forth the names of <u>all</u> members, officers, shareholders, directors, partners or other authorized persons of the Entity for the past year from the date of filing of any land-use board application.
- 3. Attach a copy of <u>all</u> Entity documents filed with the NYS Secretary of State, or in any other State of formation, including:

a. All records regarding membership interests in the Entity;

- b. Records regarding the transfer of membership interests since the date of formation.
- 4. If a member of the Entity is <u>not</u> a natural person, please provide the name(s) and address(es) for the of the non-natural person member of that Entity, and provide the formation filing documents for such Entity.
- 5. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Entity:	31-67 Old Tappan Road LLC
Address:	15 Wolfe Girde
Telephone Number:	West Myork, NY 10994 845-623-32CS 781-985-1321
E-Mail Address:	eric O biondi com
State/Date of Formation:	
Contact Person:	Eric Biondi

#### PART TWO:

- 6. Please list <u>all</u> persons, officers, limited or general partners, directors, members, shareholders, managers, authorized persons, beneficial owners, and any others with <u>any</u> interest in or with the above referenced entity.
- 7. Please NOTE that an "authorized person" means an individual or entity, whether or not a shareholder, member, officer or director, or person identified by any other title, who is authorized to act, solely or in conjunction with others, on behalf of or for the Entity.
- 8. List <u>all</u> persons with a membership or voting interest or controlling position in the Entity. Please provide that parties' business or personal address and telephone number, email address and other contact information.
- 9. Provide supplemental sheets if the information does not fit below; (kindly label the supplemental sheets).

Name of Individual	Address	Telephone	<u>Email</u>	Interest or Role in Entity
1. Ada Biordi	15 Walfe Circle West Nyask N/ 10994	945- 673-32\$S	admastradoria.com	Manager, owner
Eric Biondi	15 Wolfe Circle West Nyack N/ 10994 26 Hampton Rd Swaron, MA 02067	751-985 1321	eric@bioidi.com	Mannger
3.				
4.				
5.				
6.				

#### PART THREE:

- 10. Is any person identified in Part TWO currently employed by or hold a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? Please circle: YES NO
- 11. Is any person identified in PART TWO the spouse, sibling, parent, child, or grandchild of any individual who is employed by or holds a paid or unpaid position with a department, agency or land use board of the Town of Orangetown? Please circle:

  YES

  NO
- 12. Does any person identified in PART TWO perform services for or have a contract, or employed by an entity that has a contract to perform services for the Town of Orangetown? Please circle:

  YES

  NO
- 13. If the answer is "YES" to any of the above, please provide a supplement sheet and list every Board, Department, Office, agency or other position with the Town of Orangetown in which the party has a position, paid or unpaid or provides services for, and identify the agency, title and date of hire.

#### PART FOUR:

- 14. The information contained herein shall be updated with the Clerk of the Boards no later than THIRTY (30) DAYS after any change in information.
- 15. NOTE: Any person who (a) provides false or fraudulent beneficial ownership information; (b) willfully falls to provide complete or updated information; or (c) during the application process, falls to obtain or maintain credible, legible and updated beneficial ownership information shall be subject to suspension of any pending application by the applicant entity, or a "stop work" order on any work relating to the application, or both, in addition to any other applicable penalties under the Town Code, or State and Federal Statute, or both.

STATE OF NEW YORK COUNTY OF ROCKLAND	)				
COUNTY OF ROCKLAND	)				
I. Adda authorized by Affidavit are true, accurate a upon the health, safety and Fown Board is required to be and use approval or permissive General Municipal Lauthorized persons, benefic nembership or voting interest rom the Town, to be certain ake place.	y law to do business in a not complete. I further a general welfare of the e certain that anyone wision must have no conflux, and that the disclostial owners, any other at in the entity is require	the State of New Younderstand that Land Town of Orangetow ith an interest or cor- lict of interest as that sure of any officers controlling parties d to be made in any exists and without the	rk, and that the stard Use Applications on and its inhabitant rolling position of term is described on the transfer members and use application and use applications.	tements made may have a some some of the control of	e in the foregoing significant impact ors; and that the to applies for any a Law, as well as Iders, managers, persons with a trip for any approvaling conflict cannot

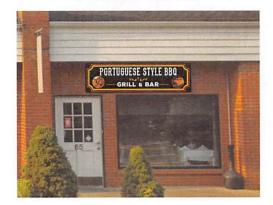
Sworn to and subscribed in my presence

his day of

207.5

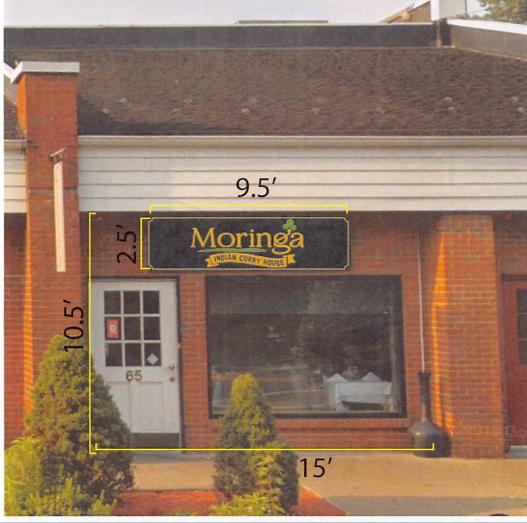
Jason P. Mitrani
Notary Public; State of New York
Reg. No. 01Ml6421997
Qualified in Rockland County
Commission Expires Sept. 13, 29

## **EXISTING**





# PROPOSED: CARVED HDU SIGN



#### SIGN TYPE

- ☐ SINGLE FACE
- ☐ HANGING
- CARVED SIGN
- ☐ WALL

#### **SPECIFICATIONS**

- MATERIALS: HIGH DENSITY URETHANE
- DIMENSIONS: 9.5'W X 2.5'H X 2"D
- METHOD: CARVED LETTERING, SIGN TO BE SECURED TO EXISTING RACK
  - WITH STAINLESS STEEL SCREWS
- COLORS: BACKGROUND COLOR: BLACK BACKGROUND LETTERS COLOR: GOLD
  - LEAF: GREEN

CUSTOMER NAME: MORINGA INDIAN CURRY HOUSE

DATE: 03/21/2023



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Unauthorized usage is prohibited by law.





3.4" 3.2" INDIAN CURRY HOUSE

#### SIGN TYPE

☐ SINGLE FACE

☐ HANGING

CARVED SIGN

☐ WALL

#### **SPECIFICATIONS**

**MATERIALS:** HIGH DENSITY URETHANE

DIMENSIONS: 10'W X 2.5'H X 2"D

METHOD: CARVED LETTERING, SIGN TO BE SECURED TO EXISTING RACK

WITH STAINLESS STEEL SCREWS

COLORS: BACKGROUND COLOR: BLACK BACKGROUND • LETTERS COLOR: GOLD

LEAF: GREEN

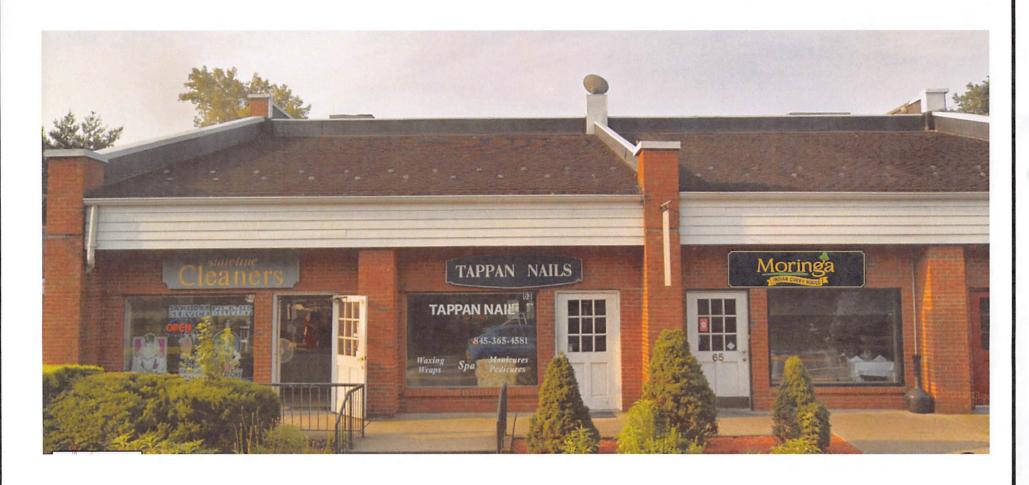
**CUSTOMER NAME: MORINGA INDIAN CURRY HOUSE** 

DATE: 03/21/2023

Garcia Enterprises Inc. DBA

175 US-9W NORTH, SUITE 12 CONGERS, NY 10920 OFFICE: 845-767-4111 MANAGER: 845-746-0050

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# SIGN TYPE SPECIFICATIONS MATERIALS: HIGH DENSITY URETHANE DIMENSIONS: 10'W X 2.5'H X 2"D METHOD: CARVED LETTERING, SIGN TO BE SECURED TO EXISTING RACK WITH STAINLESS STEEL SCREWS COLORS: BACKGROUND COLOR: BLACK BACKGROUND • LETTERS COLOR: GOLD LEAF: GREEN

DATE: 03/21/2023

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Garcia Enterprises Inc. DBA

175 US-9W NORTH, SUITE 12 CONGERS, NY 10920

OFFICE: 845-767-4111 MANAGER: 845-746-0050

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