

TOWN OF HAVERSTRAW ZONING BOARD OF APPEALS
ONE ROSMAN ROAD
GARNERVILLE, NY 10923
PHONE (845) 429-2200 FAX (845) 786-7647

JOSEPH BOCHNIK , CHAIRMAN
CHRISTIE ADDONA, ATTORNEY
ANNETTE HENDRIE, SECRETARY TO THE BOARDS

Zoning Board Meetings are scheduled for the second
Wednesday of the month at 7:00PM.

THIS APPLICATION INCLUDES THE FOLLOWING:

1. A Town of Haverstraw cover sheet
2. The NYS Department of Environmental Conservation list of informational & form websites
3. A Rockland County Dept. of Planning GML application
4. An Affidavit of Mailing

PLEASE BE ADVISED OF THE FOLLOWING:

The application MUST be submitted 3 (Three) Weeks prior to a scheduled ZBA Meeting.

The application Must include:

- a completed and notarized application
- a short narrative describing the proposed project
- a survey of the property
- a check made payable to the Town of Haverstraw in the amount of the required fee :

Residential - \$150.00

Vacant Land - \$300.00

Commercial - \$400.00

New York State Department of Environmental Conservation

SEQR Regulations

<http://www.dec.ny.gov/regs/4490.html>

“The SEQR Handbook”

http://www.dec.ny.gov/docs/permits_ej_operations_pdf/seqrhandbook.pdf

All Forms

<http://www.dec.ny.gov/permits/6191.html>

“SEQR Cookbook”

http://www.dec.ny.gov/docs/permits_ej_operations_pdf/cookbook1.pdf

“Local Official’s Guide to SEQR”

http://www.dec.ny.gov/docs/permits_ej_operations_pdf/seqrofficials.pdf

“SEQR Flow Chart and Time Frames”

http://www.dec.ny.gov/docs/permits_ej_operations_pdf/seqrflow2003.pdf

APPLICATION REVIEW FORM

PART II

Name of Municipality Town of Haverstraw Date 11/19/21

Please check all that apply:

<input checked="" type="checkbox"/> Planning Board	<input type="checkbox"/> Municipal Board
<input type="checkbox"/> Zoning Board of Appeals*	<input type="checkbox"/> Historical Board
<i>(Fill out Part II of this form)</i>	
<input type="checkbox"/> Subdivision <input type="checkbox"/> # of Lots	<input type="checkbox"/> Pre-preliminary/Sketch
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Preliminary
<input type="checkbox"/> Special Permit	<input type="checkbox"/> Final
<input type="checkbox"/> Conditional Use	
<input type="checkbox"/> Zoning Code Amendment	
<input type="checkbox"/> Zone Change	
<input type="checkbox"/> Variance	

Project Name: 91 West Runway Road LLC

Tax Map Designation:

Section 26.09 Block 04 Lot(s) 01
Section _____ Block _____ Lot(s) _____

Location: On the South side of Rt 202,
Corner feet of Modena Ct in the
town/village of Haverstraw

Street Address: 81 West Range Road

Acreage of Parcel .93 Zoning District C

School District North Rockland Postal District Carmenville

Fire District Dept 26 Thiel's Ambulance District Hilversum

Water District 502 Sewer District TRSD

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

Single Story Former Bank Building
Consisting of Approx 4,000 SF

APPLICATION REVIEW FORM

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? _____

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

Contact Information:

Applicant: 81 West Ramps Road LLC Phone # 917-566-8402

Address 22 Tchad Lane Annex Monsey NY
Street Name & Number (Post Office) State Zip code

Property Owner: 11 Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

Engineer/Architect/Surveyor: _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

Attorney: _____ Phone # _____

Address _____
Street Name & Number (Post Office) State Zip code

Contact Person: _____ Phone # _____

Address _____
Street Name & Number (Post Office) 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.

State or County Road
 Long Path
 Municipal Boundary

State or County Park
 County Stream
 County Facility

List name(s) of facility checked above. _____

Referral Agencies: (Please make sure that the appropriate agencies as needed received
copies of your application and plans for their review.)

<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 Comm.
<input type="checkbox"/> Adjacent Municipality	
<input type="checkbox"/> Other	

APPLICATION REVIEW FORM

Applicant's Combined Affidavit and Certification

State of New York)

County of Rockland) ss.:

Town/Village of _____)

Ariel Jacobov,
Applicant's Name, being duly sworn, deposes and says:

I am the applicant in this matter. I make these statements to induce the Town/Village of
Haverstraw, its boards, commissions, officers, employees, and consultants, to entertain my application, knowing that the Town/Village will rely upon the statements made herein.

1. Verification of Facts. All statements contained in this application and in all documents, drawings, writings, and other communications submitted in connection with this application are true.

2. Consent to Enter. I 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.

3. Affidavit Pursuant to General Municipal Law Section 809. All the following statements and the statements contained in the papers submitted herewith are true and the nature and extent of any interests set forth are disclosed to the extent that they are known to the applicant.

A. I certify that I am the owner, officer, member or agent of owner, of all that certain lot, piece or parcel of land and/or building described in this application **and if not the owner that he 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 below set forth:

B. 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

APPLICATION REVIEW FORM

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.

C. 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

Haverstraw 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 Annetta J. Lewis None

b. Nature of interest Member

c. If stockholder, number of shares 1000

d. If officer or partner, nature of office and name of partnership _____

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. _____

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 Village of Montebello.

D. 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.

APPLICATION REVIEW FORM

4. Reimbursement for Professional Consulting Services. I understand that the Town/Village Board, Planning Board, Zoning Board of Appeals, and other municipal boards, 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 charges usually made for such services in the metropolitan New York region or pursuant to an existing contractual agreement between the town/village and each such consultant for the cost of such consultant services upon receipt of the bill.

***The following two paragraphs are optional to add if your municipality establishes escrow accounts:*

(I agree to establish an escrow account with the Town/Village of Haverstraw from which these consultants' fees will be paid. The escrow account will not draw interest, and will be replenished upon notification by the Town/Village. Any additional sums needed to pay the Town's/Village's consultants shall be paid prior to final action on the application. The Town/Village may suspend processing of the application if there is a deficiency in the escrow account.

Permits will not be issued and site plan or subdivision will not be signed until bill is paid in full. Any sums remaining in the escrow account after the consultants have been paid in full will be returned to the applicant. The applicant has the right to examine escrow and payment records upon prior written notice to the Town/Village.)

Applicant's Signature _____

Print Applicant's Name _____ Anish Jacobov

SWORN to before me this

03 day of November, 2021

Raquel Ventura

Notary Public

RAQUEL VENTURA

Notary Public, State of New York

No. 01VE6340753

Qualified in Rockland County

Commission Expires April 25, 2024

APPLICATION REVIEW FORM

Affidavit of Ownership/Owner's Consent

State of New York)

County of Rockland) SS.:

Town/Village of HAUERSTRAW)

I, Ariel Tacular being duly sworn, hereby
depose and say that I reside at: 7 Cobblestone Farm Ct
Suffern 10901
in the county of Rockland in the state of New York.

I am the (* Fee) owner in fee simple of premises located at:

described in a certain deed of said premises recorded in the Rockland County Clerk's
Office in Liber _____ of conveyances, page _____ or as Instrument ID # _____.

Said premises have been in my/its possession since 2020. Said premises are also
known and designated on the Town of _____ Tax Map as:
section _____ block _____ lot(s) _____.

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

Owner

81 West Ramapo Road LLC
22 Tokay Lane
Monsey NY

Mailing Address

SWORN to before this

03 day of November, 2021

Raquel Ventura

Notary Public

RAQUEL VENTURA
Notary Public, State of New York
No. 01VE6340753
Qualified in Rockland County
Commission Expires April 25, 2024

* If owner is a corporation or LLC, fill in the office held by deponent and name of
corporation or LLC, and provide a list of all directors, officers, and stockholders
owning more than 5% of any class of stock and all members having greater than 5%
beneficial interest.

APPLICATION REVIEW FORM

Owners of Nearby Properties:

Abutting Properties

That the following are all of the owners of property _____ (*distance*) from the premises as to which this application is being taken.

SECTION/BLOCK/LOT

NAME

ADDRESS

(use additional paper if needed)

SWORN to before this

03 day of November, 2021

Raguel Ventura
Notary Public

Notary Public

RAQUEL VENTURA
Notary Public, State of New York

No. 01VE6340753

lified in Rockland Co.

Qualified in Rockland County, 24
Commission Expires April 25, 2024

Commission Expires April 25, 207

APPLICATION REVIEW FORM

PART II

Application before the Zoning Board of Appeals

Application, petition, or request is hereby submitted for:

() Area Variance from the requirement of Section _____;
() Use 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 and use of Professional office and office
of Delivery and Livery Company

Previous Appeal:

a. A previous appeal _____ has, or _____ has not, been made with respect to this property.
b. Such appeal was in the form of:
____ An AREA Variance; or
____ A USE Variance; or
____ Appeal from decision of Town Official or Officer; or
____ Interpretation of the Zoning Ordinance or Map; or
____ Other
c. The previous appeal described above was appeal number _____,
dated _____ and was _____ (Granted/Denied).

TO ALL APPLICANTS: Complete all relevant information by the section or sections pertaining to your appeal ONLY. You may also include extra pages to supplement this form with a narrative explanation. At the time of the hearing, you must present written documentation in support of all the statements made in this application. You must also substantiate all financial information supplied.

APPLICATION REVIEW FORM

A. AREA VARIANCE (This section to be completed only for an AREA variance. Use additional pages, if needed.)

This application seeks a variance from the provisions of Article _____, Section(s) _____. Specifically, the applicant seeks a variance from the requirements from:

Dimension*	Column	Required	Provided
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*e.g., front yard, side setback, FAR, etc.

1. Is the requested variance the minimum necessary to relieve the practical difficulty or economic injury? _____

Describe: _____

2. Is the variance substantial in relation to the zoning code? _____

Explain: _____

3. Will a substantial change be produced in the character of the neighborhood, or a substantial detriment to adjoining property owners be created, if this variance is granted? _____

Explain: _____

4. Can the alleged practical difficulty or economic injury be overcome by some method other than a variance? _____

Explain: _____

APPLICATION REVIEW FORM

5. Will the granting of this variance affect the health, safety, or welfare of the neighborhood or community? _____

Explain: _____

6. Will there be any affect on governmental facilities or services if this variance is granted? _____

Describe: _____

7. Other factors I/we wish the Board to consider in this case are

B. USE VARIANCE (*This section to be completed only for a USE variance. Use additional pages, if needed.*)

1. This property cannot be used for any uses currently permitted in this zone because:

2. The problem with this property is due to unique circumstances and not to the general conditions of the neighborhood in that:

3. The use requested by this variance will not alter the essential character of the neighborhood in that:

4. The amount paid for the entire parcel was: _____

5. The date of purchase of the property was: _____

6. The present value of the entire property is: _____

7. The monthly expenses attributed to normal and usual maintenance of the property are: _____

8. The annual taxes on the property are: _____

APPLICATION REVIEW FORM

9. The current income from the property is: _____

10. The amount of mortgages and other encumbrances on the property in question is:

- a. Date of mortgage: _____
- b. Scheduled maturity (payoff) date: _____
- c. Present monthly payment amount: _____
- d. Current principal balance: _____
- e. Current interest rate: _____

11. Other factors I/we wish the Board to consider in this case are:

C. APPEAL OF DECISION OF BUILDING INSPECTOR *(This section to be completed for an appeal, only. Use additional pages, if needed.)*

1. Name and position of official making the decision:

George Behn

2. Nature of decision:

3. The decision described above is hereby appealed because:

The Zoning Code does not allow for professional offices which are the uses being seeked in this Application

D. INTERPRETATION OF ZONING CODE *(This section to be completed for an interpretation, only. Use additional pages, if needed.)*

1. Section(s) to be interpreted: _____

2. An interpretation of the Zoning Code is requested because:
