

VILLAGE OF WAPPINGERS FALLS
Offices of Planning/Zoning
2582 South Avenue Wappingers Falls, NY 12590
(845) 297-5277 Fax: (845) 296-0379

AGENDA OF THE PLANNING BOARD

November 10, 2022

The Planning Board of the Village of Wappingers Falls will hold a meeting at the American Legion Hall, 7 Spring Street, Wappingers Falls, on November 10, 2022, beginning at 7 p.m. There are two public hearings scheduled for this meeting.

The agenda is as follows:

ROLL CALL

APPROVAL OF OCTOBER 6, 2022 MINUTES

CONTINUED PUBLIC HEARING

CENTER FOR PHYSICAL THERAPY

2 Delavergne Avenue, Grid #6158-10-268607 – Campilii-Snyder Fmly Farm LLC (Owner and Applicant) – Christian Paggi, PE (Engineer) - Site Plan.

This property is located in the Village Mixed (VM) zoning district. The applicant is proposing constructing an addition to the existing structure.

PUBLIC HEARING

2731 W MAIN STREET

2731 W Main Street (Grid #6158-13-240434) – Dylan Aguado (Owner and Applicant) – William H. Povall, III, P.E., Povall Engineering, PLLC (Engineer) – Site Plan.

This property is located in the Village Mixed (VM) zoning district. The applicant is proposing constructing a new two-family structure on the parcel.

NEW APPLICATIONS

40 CLAPP AVE

40 Clapp Avenue (Grid #6158-17-240071) – Marco Quezada (Owner) – Hilda Duque, Architect (Applicant) – Site Plan.

This property is located in the Village Residential (VR) zoning district. The applicant is proposing two dwelling units on a new second level.

KENNEDY FRIED CHICKEN

2667 E Main Street (Grid #6158-14-302265) – Greenacre Holdings LLC (Owner) – Joe Potocki, Rayex Design Group (Applicant) – Roy A. Fredriksen, Rayex Design Group (Architect) – Site Plan.

This property is located in the Village Commercial (VC) zoning district. The applicant is proposing operating a take-out restaurant. The applicant is also proposing one wall sign and one projecting sign.

SARA'S MEDITERRANEAN GRILL

1572 Route 9 (Grid #6158-19-575182) – Imperial Improvements (Owner) – Murat Gunes (Applicant) – Michael Gillespie (Engineer) – Site Plan.

This property is located in the Commercial Mixed Use (CMU) zoning district. The applicant is proposing operating a restaurant. The applicant is also proposing one wall sign and one window sign.

ROOTED YOGA

2701 W Main Street (Grid #6158-14-276356) – Anthony Hardisty, West Main Lofts LLC (Owner) – Kate Baumann (Applicant) – New Sign.

This property is located in the Village Commercial (VC) zoning district. The applicant is proposing one projecting sign.

November 1, 2022

Tom Morris, Chairperson
Village of Wappingers Falls
2582 South Avenue
Wappingers Falls, NY 12590

Re: 2 Delavergne Avenue
Amended Site Plan Application
Tax Grid No.: 134601-6158-10-268607

Dear Chairman Morris and Members of the Board:

Please find enclosed seven (7) copies of the following information relative to the above referenced Site Plan Application:

1. Amended Site Plan, Sheet C100, dated 6/8/22, last revised 11/1/22
2. Stormwater Management Plan, Sheet C200, dated 8/16/22, last revised 11/1/22
3. Utility and Grading Plan, Sheet L300, dated 6/6/22, last revised 10/27/22
4. Planting Plan, Sheet L400, dated 6/6/22, last revised 10/27/22
5. Planting Plan with Plant Descriptions, Sheet L401, dated 6/6/22, last revised 10/27/22
6. Proposed Building Renderings, 8.5" x11"
7. Existing first floor plan, 8.5"x11"
8. Digital Copy (CD)

The above information has been revised to address comments received from the Board and its consultants at the July 7th Board Meeting. Responses to each of the comments received is provided below:

Village Engineer, JRFA – August 29, 2022 Comment Letter

1. *Comment: Electric and natural gas lines may be affected by the new sunroom. Applicant to coordinate with the utilities to ensure if new infrastructure or movement of infrastructure is required, details, profiles and types of materials proposed are provided.*

Response: Comment acknowledged. It is requested that this information be provided as a condition of approval.

2. *Comment: The building should be revised to reflect a two-story frame building on sheets L-300 and L-400.*

Response: The referenced plans have been corrected.

3. *Comment: Soil testing to validate the stormwater design shall be witnessed by the Village Engineer during the building process.*

Response: Comment acknowledged.

Comments 1-4 Acknowledged. No response required.

5. Comment: *Landscaping*

- a. *The proposed landscaping has been shown on the Planting Plan and the photosimulations. The Planning Board should discuss the potential for larger plantings to provide more screening on the north side of the proposed sunroom.*

Response: A revised planting plan is provided with this submission.

- b. *A landscape maintenance note should be included on the plan stating, “The owner of record shall maintain all landscaping as shown on the Site Plan throughout the duration of the use.”*

Response: The requested note shall be added to the plan on subsequent submissions.

6. Comment: *Existing Building Height. Sheets L-300 and L-400 should be revised to refer to a two-story frame building.*

Response: The referenced plans have been corrected.

7. Comment: *Planning Board Signature Block. The Planning Board signature block should be included on all Sheets of the Site Plan.*

Response: The Owner Signature Block will be affixed to each plan sheet on the final plans.

Verbal Comments Received from Planning Board and Village Planner on September, 2022

- The grading plan has been revised to indicate existing and proposed grades in the vicinity of the proposed Pergola structure. The renderings have also been revised to reflect the proposed grading and landscaping revisions.

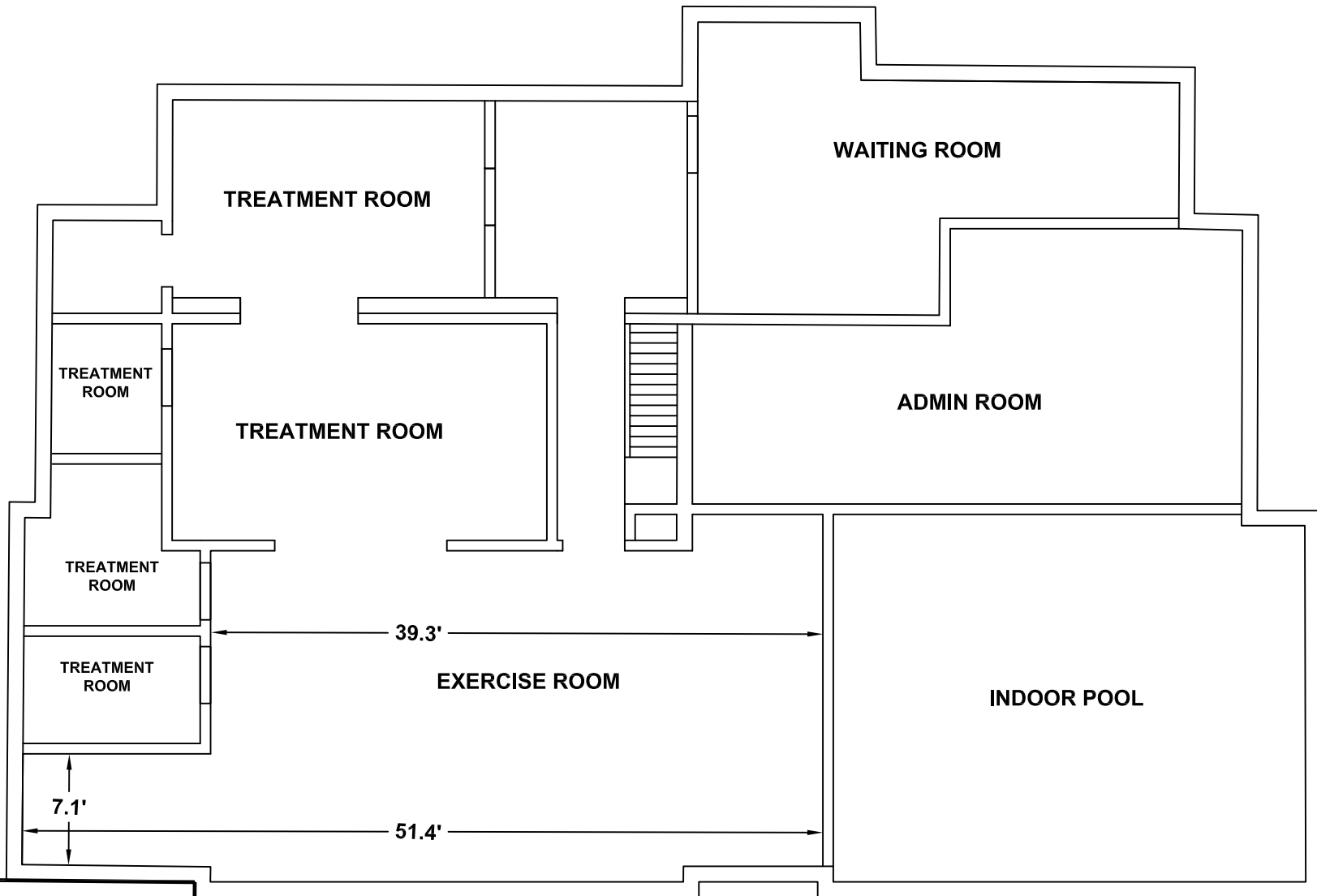
The Owner kindly requests to be placed on the October 4th Planning Board meeting agenda to review the above and enclosed information with the Board. Your continued consideration is greatly appreciated.

Sincerely,

Christian R. Paggi

Christian R. Paggi, PE
Senior Engineer

Enclosures



**PROPOSED
1 STORY
PERGOLA
20'X28'**

EXISTING FIRST FLOOR PLAN

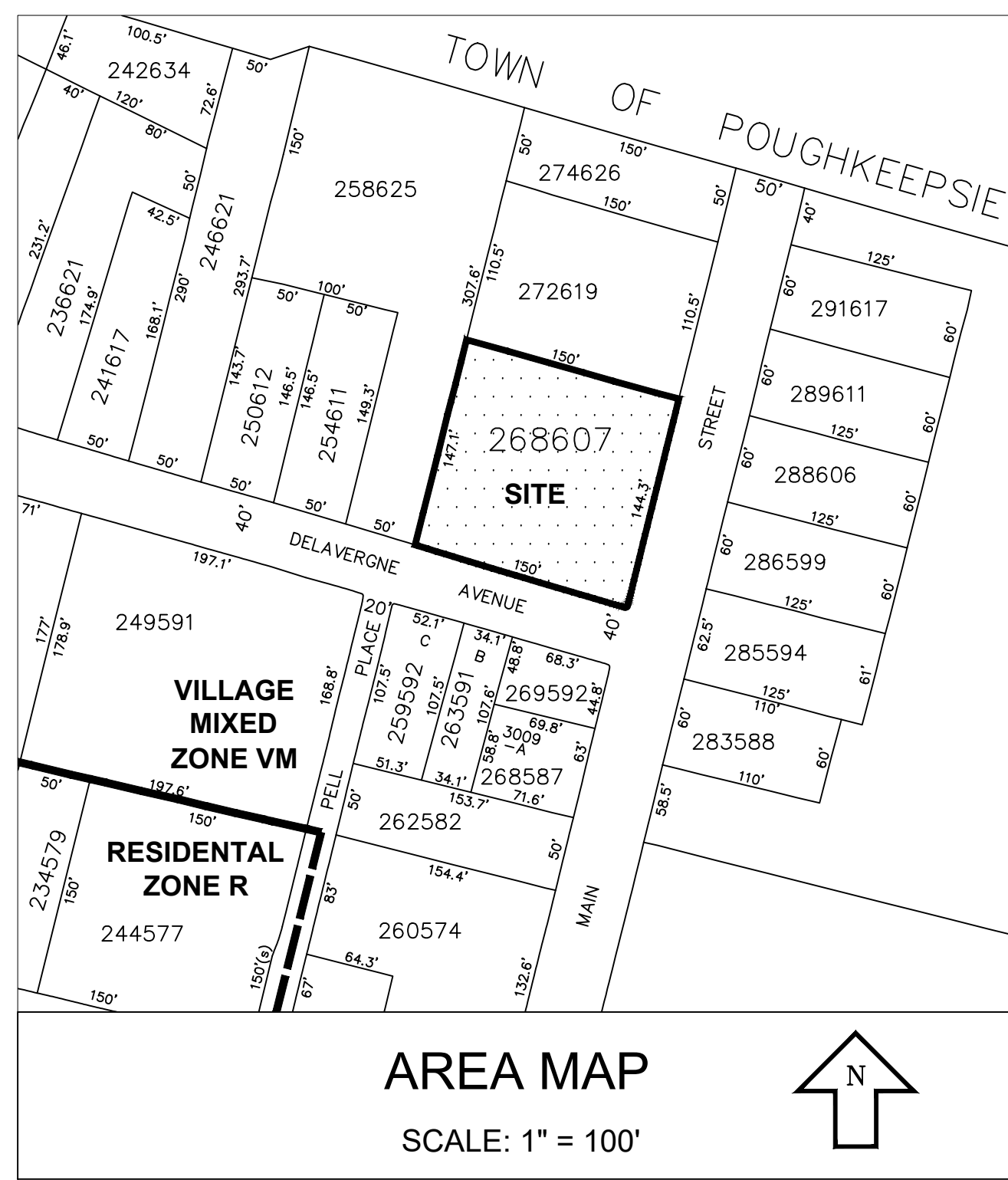
SCALE: 1" = 10'

*FLOOR PLAN BASED ON FIELD MEASUREMENTS TAKEN 10/14/22
FOR ILLUSTRATIVE PURPOSES ONLY*

CENTER FOR PHYSICAL THERAPY

**2 DELAVERGNE AVE
WAPPINGERS FALLS, NEW YORK**

NOVEMBER 1, 2022



SITE DATA:

LOT 1
OWNER: CAMPILII-SNYDER FMLY FARM LLC
ADDRESS: 2 DELAVERGNE AVE WAPPINGERS FALLS NY, 12590
TAX ID No.: 134601-6158-10-268607
AREA:
CURRENT: 0.51 AC
PROPOSED: 0.51 AC
ZONE: VM-VILLAGE MIXED

SITE AREA BREAKDOWN

	ACRES	PERCENTAGE
BUILDING:	0.11	21.6 %
GREENSPACE:	0.15	29.4 %
CONCRETE:	0.03	5.9 %
ASPHALT:	0.22	43.1 %

SITE DIMENSIONS

	REQUIRED	PROPOSED
MIN LOT AREA:	N/A	0.51 AC
MAX BUILDING HT.:	3 STORY	1 STORY
MIN LOT WIDTH:	25 FT.	147.12 FT.
MIN FRONT SETBACK:		
PRIMARY:	10 FT.	31.3 FT.
SECONDARY:	10 FT.	7.8 FT.
MIN SIDE SETBACK:	0 FT.	65.9 FT.
MIN REAR SETBACK:	10 FT.	17.3 FT.
MAX LOT COVERAGE:	75%	70.6%
BUILDING COVERAGE:	N/A	21.6%
MIN. GREENSPACE:	10%	29.4%

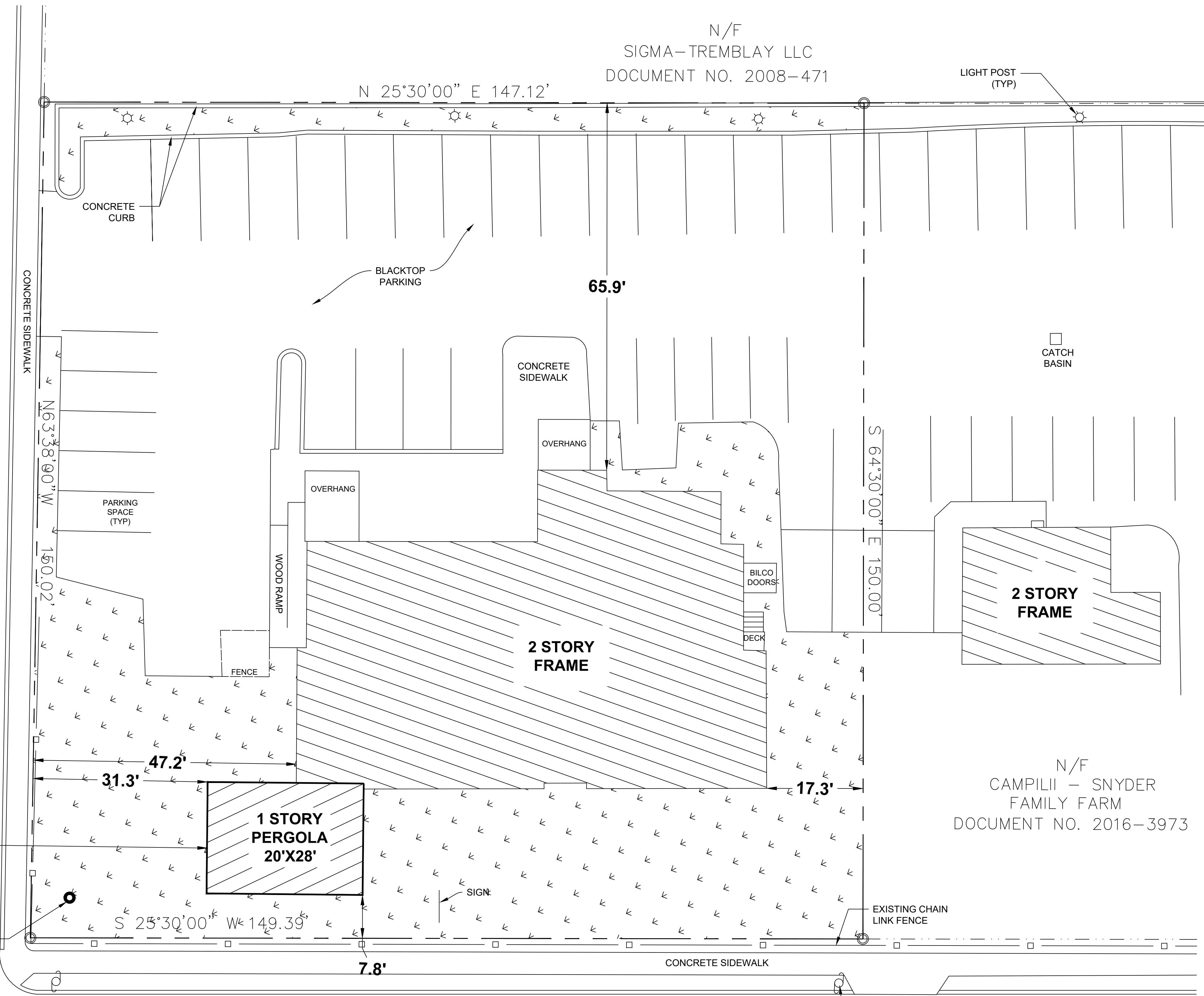
VARIANCES REQUIRED TO BE OBTAINED FROM THE VILLAGE ZONING BOARD:
 • VARIANCE TO ALLOW 7.8 FT SECONDARY FRONT SETBACK

BOUNDARY AND EXISTING CONDITIONS INFORMATION SHOWN HEREON TAKEN FROM A PLAN ENTITLED "MAP OF SURVEY FOR THE LANDS OF CHRISTOPHER CAMPILII", PREPARED BY ROBERT V. OSWALD LAND SURVEYING, DATED 5/9/22

UNAUTHORIZED ALTERATION OR ADDITION TO A PLAN BEARING A PROFESSIONAL ENGINEER'S SEAL IS A VIOLATION OF SECTION 7209, SUB-DIVISION 2, OF THE NEW YORK STATE EDUCATION LAW

DELAVERGNE AVENUE

PROPOSED 560 SF PERGOLA SUN ROOM



WEST MAIN STREET (A.K.A. ROUTE 9D)

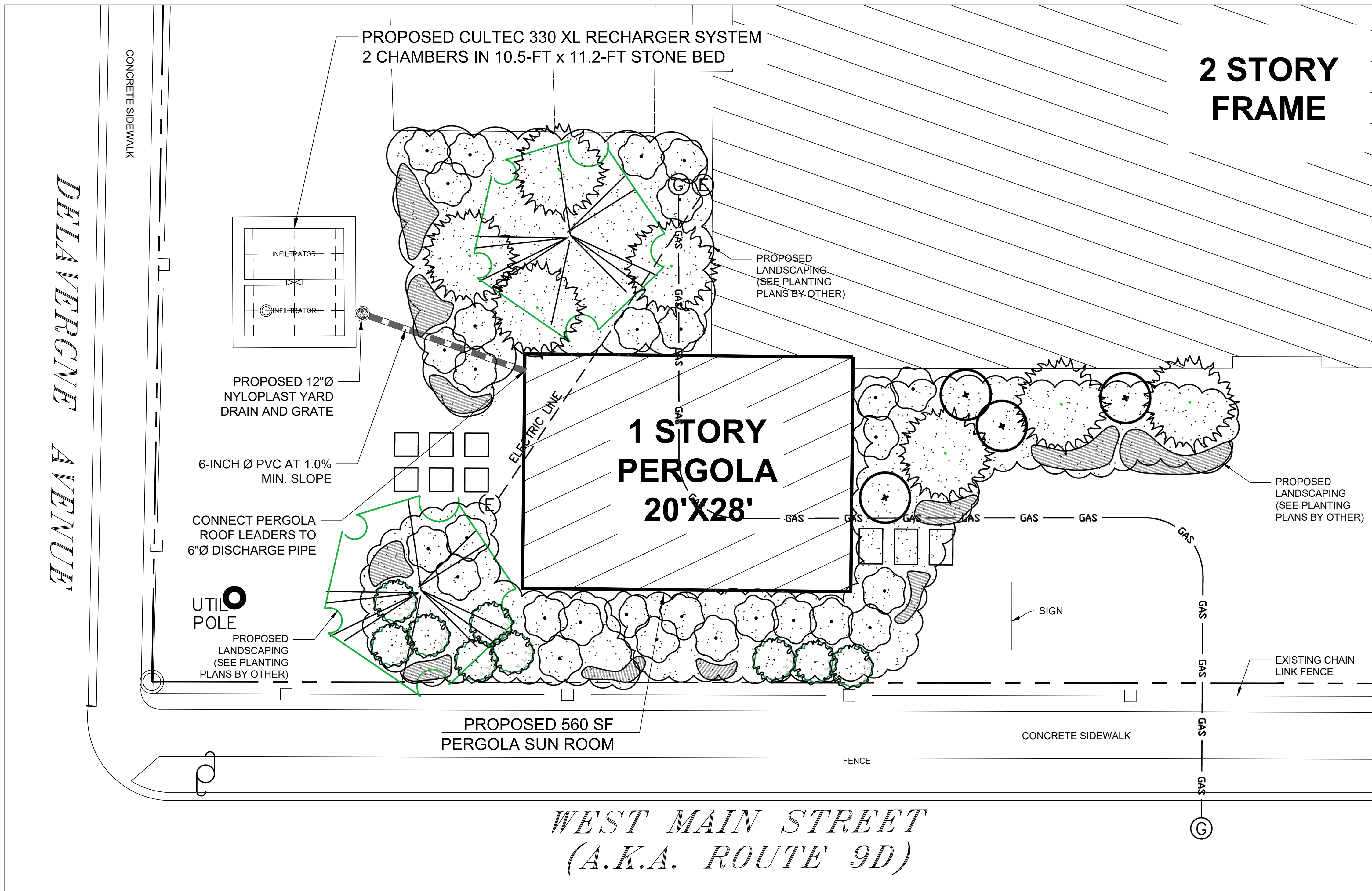
LAWRENCE J. PAGGI, PE, PC
 CONSULTING ENGINEERING
 43 BROAD STREET
 FISHKILL, NEW YORK 12524
 TELEPHONE: (845) 897-2375

FINAL	DATE
BT	8/16/2022
CP	11/17/2022

CAMPILII-SNYDER FMLY FARM LLC
 2 DELAVERGNE AVE, WAPPINGERS FALLS, NY 12590
 VILLAGE OF WAPPINGERS FALLS
 COUNTY OF DUTCHESS, STATE OF NEW YORK
 AMENDED SITE PLAN

DATE: **JUNE 8, 2022**
 SCALE: **1" = 10'**
 JOB NUMBER:
 SHEET NUMBER:

C100



GENERAL NOTES:

- EXISTING KNOWN UTILITIES ON THE PROJECT SITE HAVE BEEN LOCATED/MARKED BY CENTRAL HUDSON GAS & ELECTRIC, CHARTER COMMUNICATIONS HUDSON VALLEY, NYS DOT POUGHKEEPSIE REGION 8, VERIZON HUDSON VALLEY AND THE VILLAGE OF WAPPINGERS FALLS. UTILITY INFORMATION SHOWN HEREON HAS NOT BEEN SURVEYED AND IS BASED ON FIELD MEASUREMENTS PERFORMED BY SANOK DESIGN GROUP.
- CONTRACTOR SHALL VERIFY LOCATION, BURIAL DEPTH AND SIZE/MATERIAL OF ALL EXISTING UTILITIES WITHIN THE WORK AREA PRIOR TO COMMENCING WORK.

STORMWATER DESIGN NOTES:

- INCREASES IN IMPERVIOUS AREA (560-SF PERGOLA) ARE PROPOSED TO BE MITIGATED VIA SUBSURFACE INFILTRATION.
 - SOIL PERCOLATION RATES SHALL BE VERIFIED PRIOR TO INSTALLATION VIA PERFORMANCE OF INFILTRATION TESTS IN THE AREA OF THE PROPOSED SUBSURFACE SYSTEM IN CONFORMANCE WITH 2015 NYSDEC STORMWATER DESIGN MANUAL.
- DESIGN PARAMETERS:
 - EXISTING SOIL TYPES (DUTCHESS COUNTY, NEW YORK SOIL SURVEY):
 - K/A - KNICKERBOCKER FINE SANDY LOAM (HSG A; 1.98 TO 5.95 IN/HR)
 - KuA - KNICKERBOCKER-URBAN LAND COMPLEX (HSG A; 1.98 TO 5.95 IN/HR)
 - DESIGN ASSUMES 1.0 IN/HR INFILTRATION RATE, TO BE VERIFIED WITH IN SITU TESTING.
- MITIGATION OF 100-YR DESIGN STORM
 - NORTHEAST REGIONAL CLIMATE CENTER DATA FOR EXTREME PRECIPITATION INDICATES AN ESTIMATED 24-HR 100-YR DESIGN STORM OF 8.18 IN/HR
- SYSTEM DESIGN:
 - TWO (2) CULTEC 330 XL RECHARGERS IN 10.5-FT BY 11.2-FT STONE TRENCH RESULTS IN 100% MITIGATION OF 100-YR DESIGN STORM BASED ON ASSUMED 1.0 IN/HR INFILTRATION RATE (SEE CALCULATIONS BELOW).
 - ROOF RUNOFF FROM NEW PERGOLA STRUCTURE TO BE DIRECTED TO SUBSURFACE CULTEC SYSTEM.

2DelavergneAve_HydroCAD 2DelavergneAve 24-hr S1 100-yr 100-yr Rainfall=8.18"
 Prepared by (enter your company name here) Printed 8/16/2022
 HydroCAD® 10.00 s/n 07219 © 2011 HydroCAD Software Solutions LLC

Summary for Subcatchment 1S: 560-SF PERGOLA

[49] Hint: Tc<2dt may require smaller dt

Runoff = 0.12 cfs @ 11.97 hrs, Volume= 371 cf, Depth> 7.94"

Runoff by SCS TR-20 method, UH=SCS, Time Span= 0.00-24.00 hrs, dt= 0.05 hrs
 2DelavergneAve 24-hr S1 100-yr 100-yr Rainfall=8.18"

Area (sf)	CN	Description
560	98	PERGOLA
560		100.00% Impervious Area

Tc (min)	Length (feet)	Slope (ft/ft)	Velocity (ft/sec)	Capacity (cfs)	Description
1.0					Direct Entry,

2DelavergneAve_HydroCAD 2DelavergneAve 24-hr S1 100-yr 100-yr Rainfall=8.18"
 Prepared by (enter your company name here) Printed 8/16/2022
 HydroCAD® 10.00 s/n 07219 © 2011 HydroCAD Software Solutions LLC

Summary for Pond 2P: CULTEC 330

Inflow Area = 560 sf, 100.00% Impervious, Inflow Depth > 7.94" for 100-yr event

Inflow = 0.12 cfs @ 11.97 hrs, Volume= 371 cf

Outflow = 0.00 cfs @ 14.96 hrs, Volume= 231 cf, Atten= 97%, Lag= 179.9 min

Discarded = 0.00 cfs @ 14.96 hrs, Volume= 231 cf

Routing by Stor-Ind method, Time Span= 0.00-24.00 hrs, dt= 0.05 hrs
 Peak Elev= 3.02' @ 14.96 hrs Surf.Area= 117 sf Storage= 186 cf

Plug-Flow detention time= 246.1 min calculated for 231 cf (62% of inflow)
 Center-of-Mass det. time= 119.2 min (855.5 - 736.3)

Volume #1	Invert	Avail. Storage	Storage Description
#1	0.50'	75 cf	Cultec R-330XL Inside #2
			Effective Size= 47.8"W x 30.0"H => 7.45 sf x 7.00'L = 52.2 cf
			Overall Size= 52.0"W x 30.5"H x 8.50'L with 1.50' Overlap
			Row Length Adjustment= +1.50' x 7.45 sf x 2 rows
#2	0.00'	146 cf	Custom Stage Data (Prismatic) Listed below (Recalc)
			439 cf Overall - 75 cf Embedded = 364 cf x 40.0% Voids
		220 cf	Total Available Storage

Elevation (feet)	Surf. Area (sq-ft)	Inc. Store (cubic-feet)	Cum. Store (cubic-feet)
0.00	117	0	0
0.50	117	59	59
1.00	117	59	117
1.50	117	59	176
2.00	117	59	234
2.50	117	59	293
3.00	117	59	351
3.50	117	59	410
4.00	0	29	439

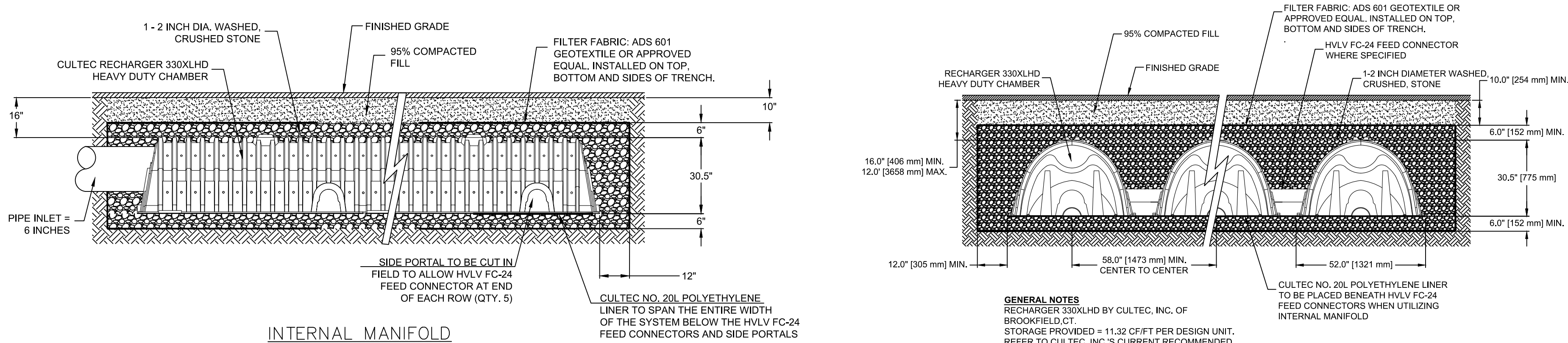
Device	Routing	Invert	Outlet Devices
#1	Discarded	0.00'	1.000 in/hr Exfiltration over Surface area Conductivity to Groundwater Elevation = -10.00'

Discarded Outflow Max=0.00 cfs @ 14.96 hrs HW=3.02' (Free Discharge)
 1=Exfiltration (Controls 0.00 cfs)

BOUNDARY AND EXISTING CONDITIONS INFORMATION SHOWN HEREON TAKEN FROM A PLAN ENTITLED "MAP OF SURVEY FOR THE LANDS OF CHRISTOPHER CAMPILII", PREPARED BY ROBERT V. OSWALD LAND SURVEYING, DATED 5/9/22

STORMWATER MANAGEMENT PLAN

SCALE: 1" = 5'



NOTES:

- CONTRACTOR SHALL REFER TO MANUFACTURER'S SPECIFICATIONS FOR DETAILED INSTALLATION INSTRUCTIONS. CONTRACTORS ARE EXPECTED TO COMPREHEND AND USE THE MOST CURRENT INSTALLATION INSTRUCTIONS PRIOR TO BEGINNING THIS SYSTEM INSTALLATION.
- CONTRACTORS ARE RESPONSIBLE FOR VERIFYING ALL GRADES AND INVERTS INDICATED ON THESE PLANS. CONTRACTORS ARE TO SUBMIT SHOP DRAWINGS OF ALL NEW DRAINAGE STRUCTURES, PIPING, AND STONE/BACKFILL MATERIAL TO THE DESIGN ENGINEER FOR REVIEW AND APPROVAL PRIOR TO INSTALLATION.
- TRENCH/SIDE SLOPE STABILIZATION AND JOB SAFETY ARE THE RESPONSIBILITY OF THE CONTRACTOR. THE CONTRACTOR IS EXPECTED TO COMPLY WITH ALL APPLICABLE STATE AND FEDERAL REGULATIONS.

GENERAL NOTES
 RECHARGER 330XLHD BY CULTEC, INC. OF BROOKFIELD, CT.
 STORAGE PROVIDED = 11.32 CF/FT PER DESIGN UNIT. REFER TO CULTEC, INC.'S CURRENT RECOMMENDED INSTALLATION GUIDELINES.
 MAXIMUM ALLOWED COVER OVER TOP OF UNIT SHALL BE 12" (3.05m)
 THE CHAMBER WILL BE DESIGNED TO WITHSTAND TRAFFIC LOADS WHEN INSTALLED ACCORDING TO CULTEC'S RECOMMENDED INSTALLATION INSTRUCTIONS

ALL RECHARGER 330XLHD HEAVY DUTY UNITS ARE MARKED WITH A COLOR STRIPE FORMED INTO THE PART ALONG THE LENGTH OF THE CHAMBER. ALL RECHARGER 330XLHD CHAMBERS MUST BE INSTALLED IN ACCORDANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL REGULATIONS.

TYPICAL SECTION

UNAUTHORIZED ALTERATION OR ADDITION TO A PLAN BEARING A PROFESSIONAL ENGINEER'S SEAL IS A VIOLATION OF SECTION 7209, SUB-DIVISION 2, OF THE NEW YORK STATE EDUCATION LAW

LAWRENCE J. PAGGI, PE, PC
 CONSULTING ENGINEERING
 43 BROAD STREET
 FISHKILL, NEW YORK 12524
 TELEPHONE: (845) 897-2375

DATE	BY	DESCRIPTION
11/17/2022	CP	RESPONSES TO PLANNING BOARD COMMENTS

CAMPILII-SNYDER FMLY FARM LLC
 2 DELAVERGNE AVE, WAPPINGERS FALLS, NY 12590
 VILLAGE OF WAPPINGERS FALLS
 COUNTY OF DUTCHESS, STATE OF NEW YORK

DATE: **AUGUST 16, 2022**
 SCALE: **AS NOTED**
 JOB NUMBER:

SHEET NUMBER:
C200

LEGEND:

- x 99.8 EXISTING SPOT GRADE
- + 100.0 PROPOSED SPOT GRADE
- UTILITY LINES

NOTES:

1. ALL GRADES ARE IN REFERENCE TO FINISHED FLOOR ELEVATION OF 100.0
2. ALL GRADES SHOULD BE FIELD VERIFIED PRIOR TO PURCHASING OR INSTALLING ANY MATERIALS.
3. ALL BASE SURVEY INFORMATION IS COMPLIMENTARY. THE CONTRACTOR IS RESPONSIBLE FOR VERIFY ALL INFORMATION PRIOR TO EXECUTION OF ANY WORK. ANY DISCREPANCIES SHALL BE BROUGHT TO THE ATTENTION OF THE OWNER BEFORE ANY ACTION TAKEN.
4. CONTRACTOR IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS PRIOR TO BEGINNING CONSTRUCTION.
5. ALL PIPE CONNECTIONS SHALL BE IN A "Y" CONFIGURATION.
6. CONTRACTOR SHALL EXCAVATE TO AREAS INDICATED TO EXPOSE BEDROCK AND SCULPT ROCK AND AREAS UNDER THE DIRECTION OF THE LANDSCAPE ARCHITECT. ALL WALL INSTALLATIONS SHALL BE UNDER THE DIRECTION OF THE STRUCTURAL ENGINEER.

No.	Date	Revision
3	10-27-22	RE-ISSUED FOR REVIEW
2	08-15-22	RE-ISSUED FOR REVIEW
1	06-06-22	ISSUED FOR REVIEW

ALTERATIONS BY ANY PERSON IN ANY WAY, OR ANY ITEM CONTAINED ON THIS DOCUMENT, UNLESS ACTING UNDER DIRECTION OF THE LICENSED SEAL AFFIXED HERETO, IS A VIOLATION OF TITLE VIII ARTICLE 145 SECTION 7209.2 OF THE NEW YORK STATE EDUCATION LAW.



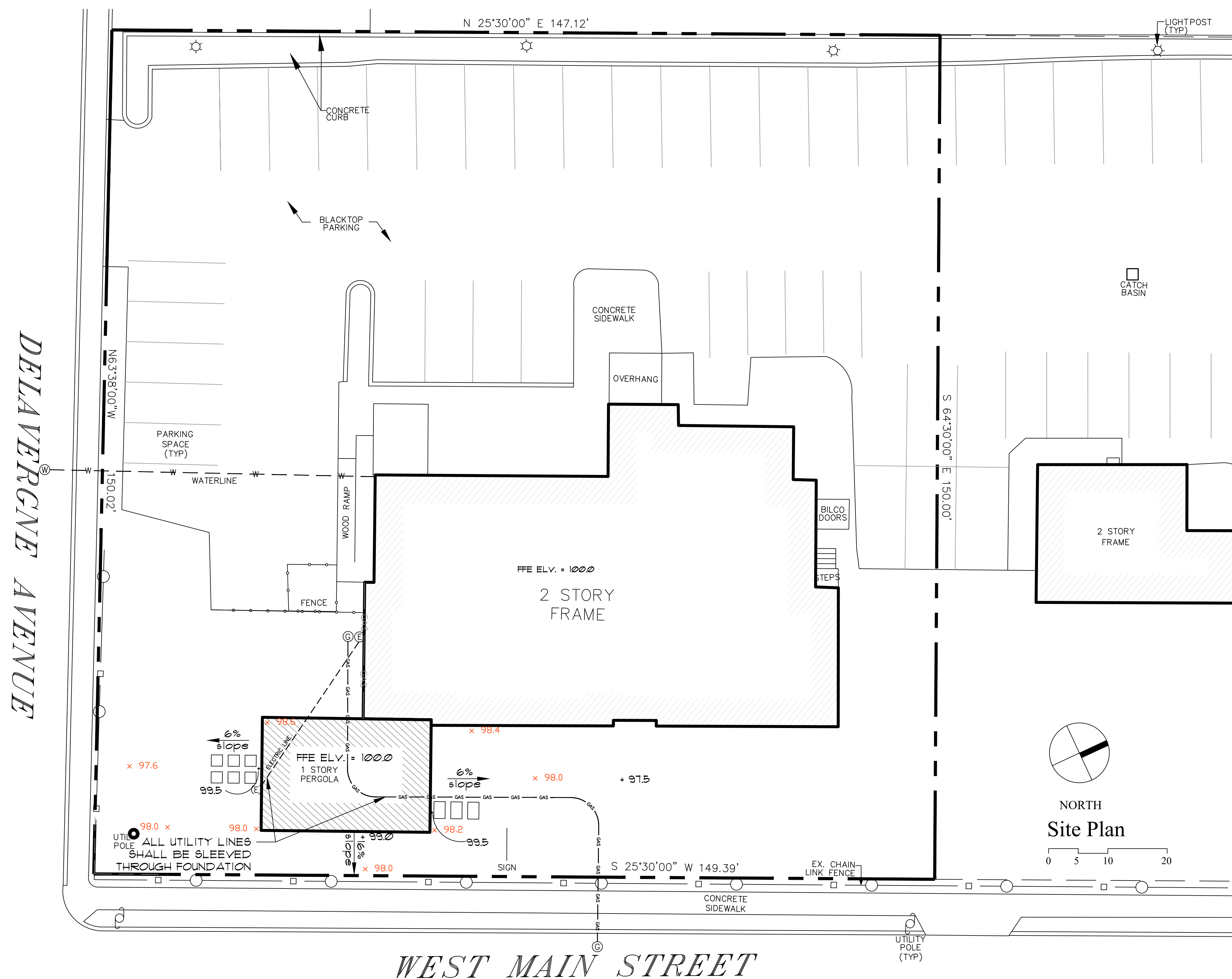
Project Title
CAMPILII OFFICE

Drawing Title
UTILITY AND GRADING PLAN

Scale	Job No.	Date	Drawing No.
1"=10'-0"	2218	06-06-22	L-300
Drawn	Checked	Approved	
JS	AS	JS	

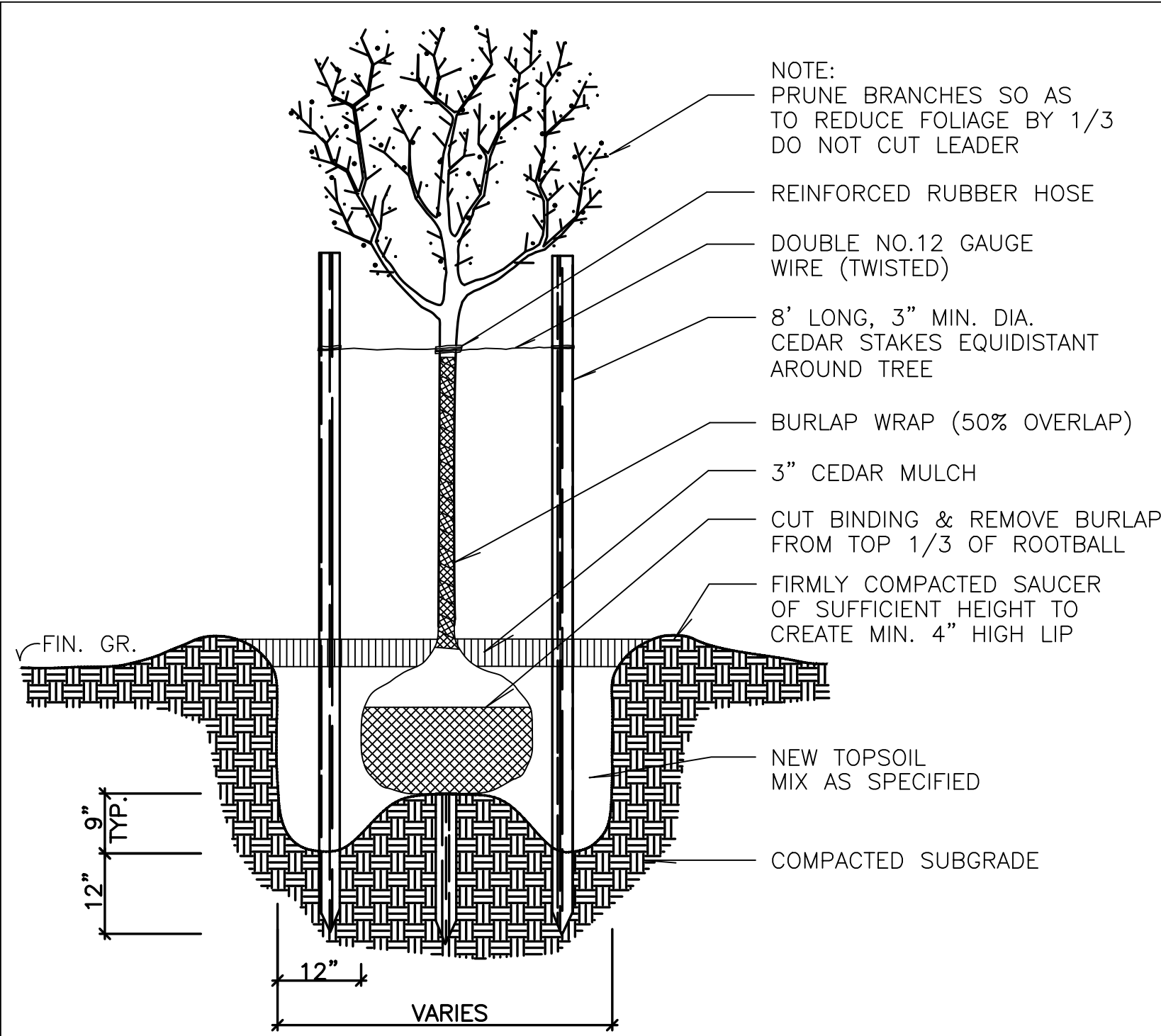
3 Recco Drive
Brewster, New York 10509
845-279-0198
Landscape Architects

SANOK DESIGN GROUP

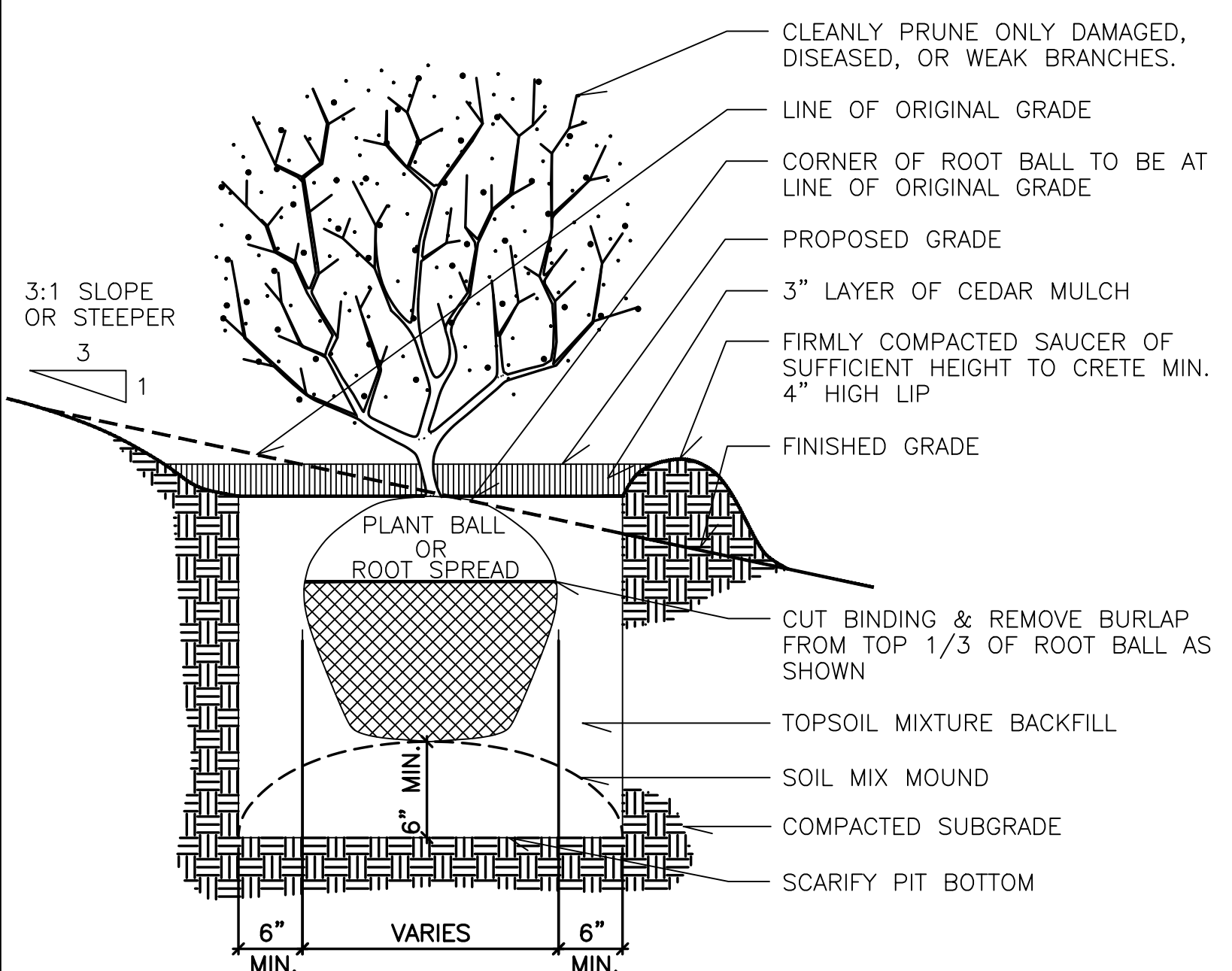


DELAVERGNE AVENUE

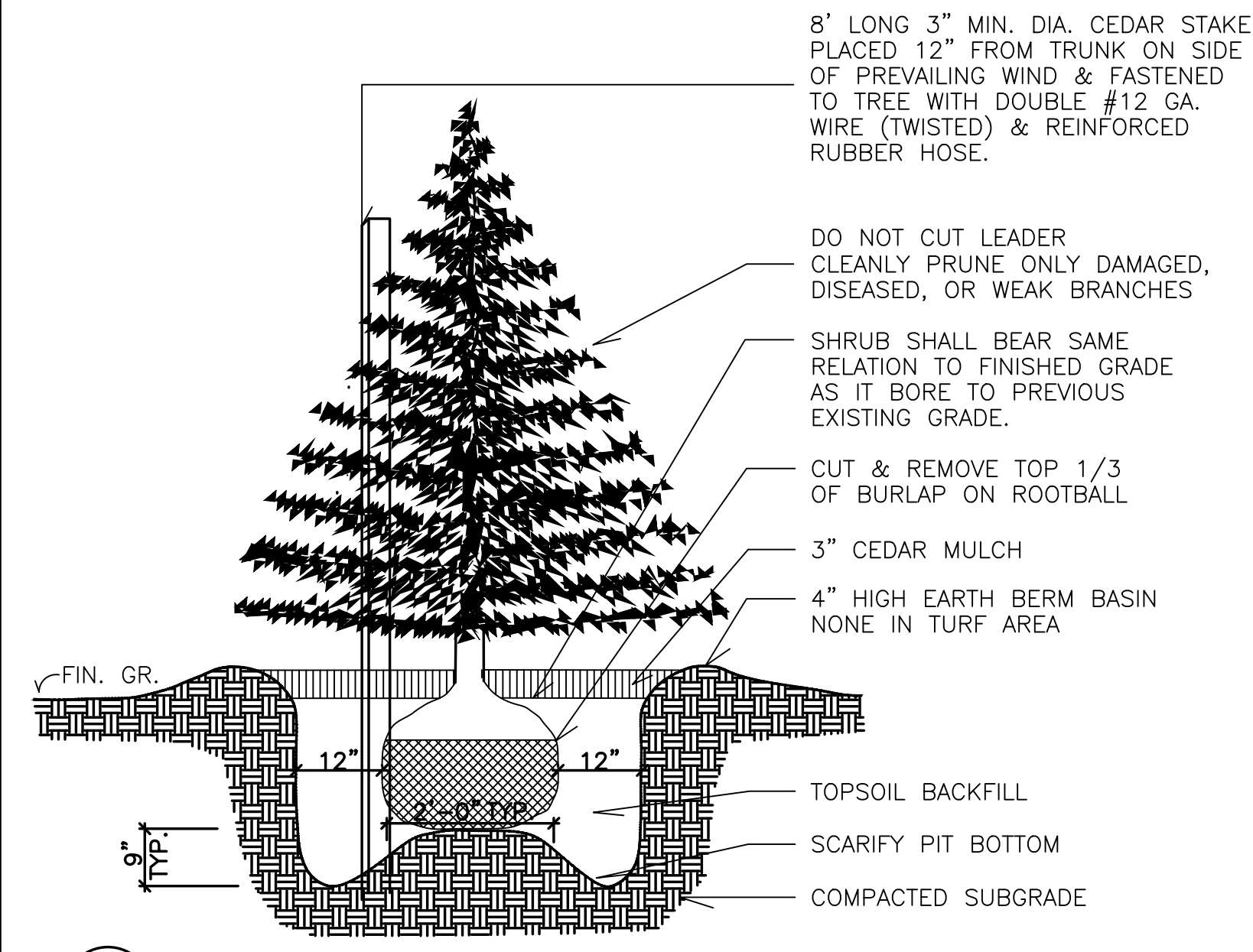
WEST MAIN STREET



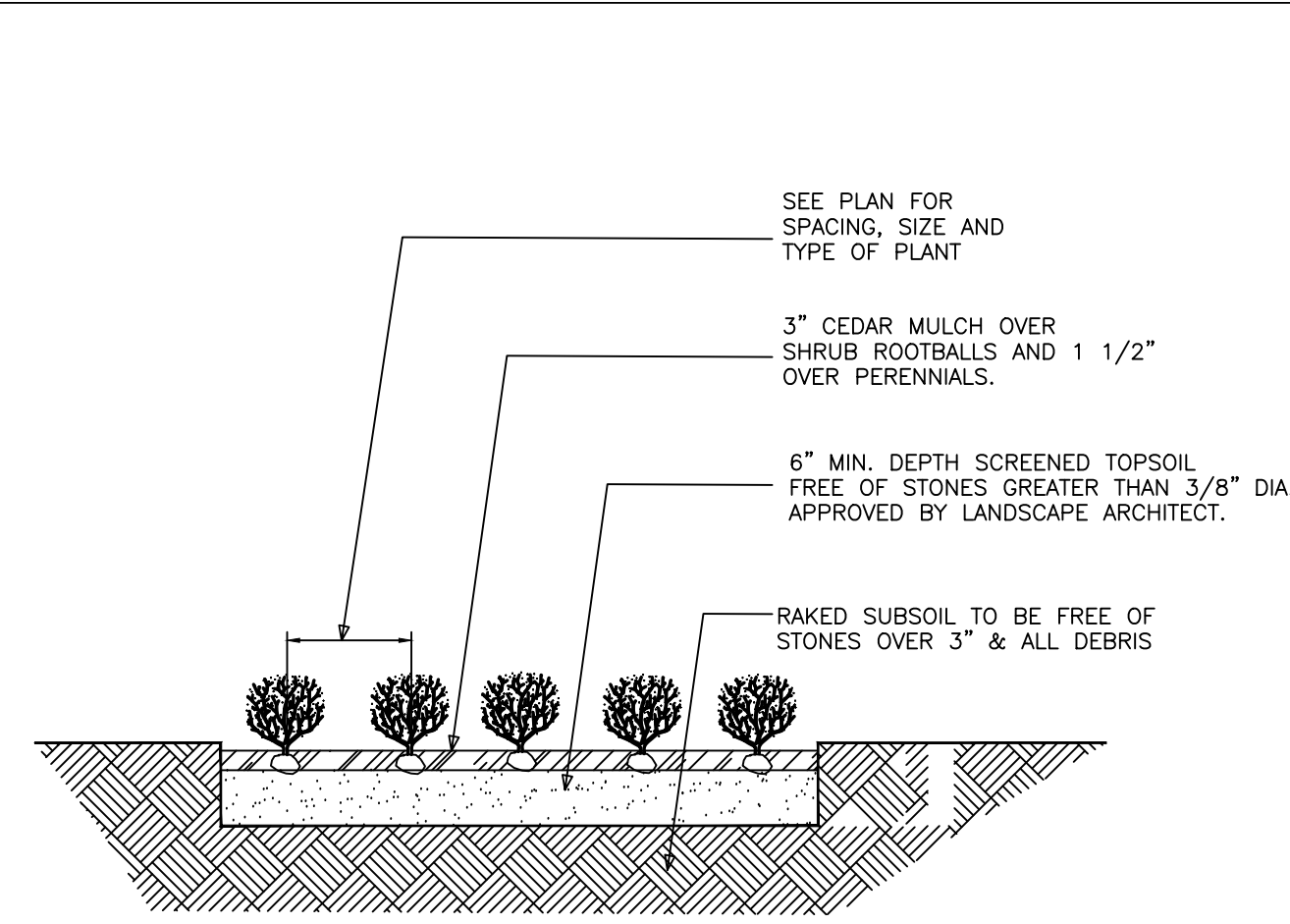
1 DECIDUOUS PLANTING SCALE: N.T.S.



4 SHRUB PLANTING SCALE: 4



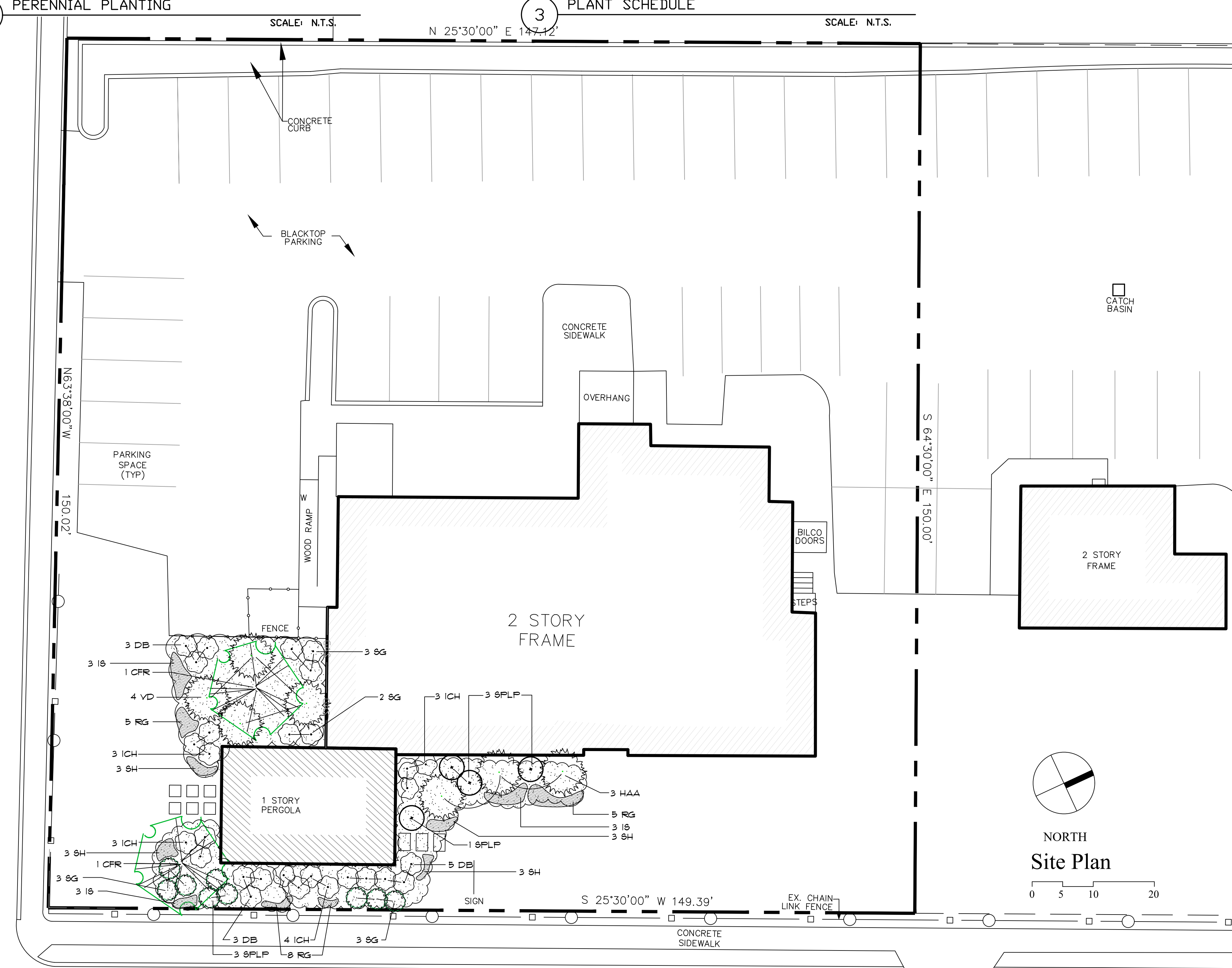
6 EVERGREEN PLANTING SCALE: N.T.S.



2 PERENNIAL PLANTING SCALE: N.T.S.

PLANT LIST:	KEY	QNT.	BOTANICAL NAME	COMMON NAME	SIZE	CONT.	REMARKS
TREES							
DECIDUOUS							
CFR	2		Cornus florida 'Cherokee Chief'	Cherokee Chief Dogwood Tree			full multi trunk specimen selected by LA
EVERGREEN							
SHRUBS							
DB	11		Daphne x burkwoodii 'Carol Mackie'	Carol Mackie Daphne	3'-4'	B&B	
HAA	3		Hydrangea arborescens 'Annabelle'	Annabelle Hydrangea	36"-38"	B&B	
SG	12		Spiraea 'Gold Mound'	Gold Mound Spirea	30"-36"	B&B	
SPLP	7		Spiraea 'Little Princess'	Little Princess Spirea	30"-36"	B&B	
ICH	13		Ilex crenata 'Shamrock'	Shamrock Holly	3'-4'	B&B	
VD	4		Viburnum dentatum 'Chicago Lustre'	Arrowood Dentatum	5'-6'	B&B	
PERENNIALS/ GRASSES							
IS	9		Iris siberica	Purple Iris		3 gal	
RG	18		Rudbeckia fulgida 'Goldstrum'	Goldstrum Black-Eyed Susan		3 gal	
SH	7		Hylotelephium telephium 'Herbstreude'	Sedum Autumn Joy		3 gal	

3 PLANT SCHEDULE SCALE: N.T.S.



WEST MAIN STREET

PLANTING NOTES CONT.:

7. THE ACTUAL LOCATION OF PLANT MATERIALS MAY VARY DUE TO THE FIELD CONDITIONS. FINAL PLACEMENT OF PLANT MATERIAL SHALL BE APPROVED BEFORE THE PITS ARE DUG. IF INITIAL PLACEMENT IS NOT SATISFACTORY, PLANTS SHALL BE RELOCATED IN THE FIELD AT THE DIRECTION OF THE LANDSCAPE ARCHITECT OR OWNER, AT NO ADDITIONAL COST TO THE OWNER.

8. THE CONTRACTOR IS TO USE CARE DURING EXCAVATION AND PLANTING TO AVOID DISTURBING OR DAMAGING ANY ADJACENT OR UNDERGROUND UTILITIES. ANY DAMAGE RESULTING FROM THIS CONSTRUCTION WILL BE THE CONTRACTOR'S RESPONSIBILITY AND SHALL BE RESTORED AT HIS EXPENSE TO THE SATISFACTION OF THE LANDSCAPE ARCHITECT OR OWNER.

9. SHOULD THERE BE ANY DISCREPANCIES BETWEEN THE QUANTITIES CALLED FOR ON THE PLANT LIST AND THOSE INDICATED ON THE PLAN, THE GREATER QUANTITY SHALL GOVERN.

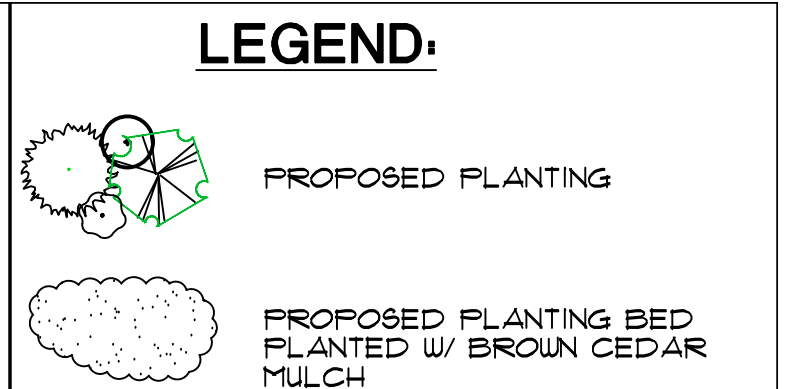
10. ALL EVERGREEN TREES SHALL BE 'DEAD MANNED'. PROVIDE 3" 8" X 30" CEDAR STAKES. BURY STAKES 30" BELOW FINISH GRADE AND GUY TO TREE.

11. ALL PLANT MATERIAL IS TO BE VIGOROUS, FREE OF INJURY OR DEFECTS. ALL PLANT MATERIAL IS TO BE REPRESENTATIVE FOR THEIR SPECIES.

12. NO SUBSTITUTION WILL BE PERMITTED WITHOUT PRIOR CONSENT FROM THE LANDSCAPE ARCHITECT OR OWNER.

13. REFER TO DETAIL #3, SHEET L-400 FOR PLANT LIST.

14. ALL TREES IN THE SAME PLANTING AREA SHALL BE PLACED AND PLANTED AT THE SAME TIME. IF BECAUSE OF DELIVERY SCHEDULE, ANY PLANT REMAINS ON THE SITE FOR MORE THAN 24 HOURS, THEY SHALL BE HEELED-IN ON SITE TO MAINTAIN THEIR HEALTH AND VITALITY. PLANTS SHALL BE OTHERWISE PROTECTED AND MAINTAINED, INCLUDING BUT NOT LIMITED TO WATER AND SHADE. ANY PLANTS DEEMED NOT IN SATISFACTORY HEALTH OR CONDITION AT TIME OF PLANTING SHALL BE REPLACED AT THE CONTRACTOR'S EXPENSE.



PLANTING NOTES:

1. ALL BASE SURVEY INFORMATION IS COMPLIMENTARY. THE CONTRACTOR IS RESPONSIBLE FOR VERIFY ALL INFORMATION PRIOR TO EXECUTION OF ANY WORK. ANY DISCREPANCIES SHALL BE BROUGHT TO THE ATTENTION OF THE OWNER BEFORE ANY ACTION TAKEN.

2. ALL LANDSCAPE ELEMENTS (PLANTING PATIOS, DECKS AND ETC.) SHALL BE LAID OUT, REVIEWED AND APPROVED PRIOR TO INSTALLATION.

3. PRIOR TO COMMENCING PLANTING OPERATIONS THE CONTRACTOR SHALL STAKE OUT THE EXACT LOCATION OF ALL TREES FOR THE LANDSCAPE ARCHITECT'S OR OWNER'S APPROVAL. ALL PLANTING OPERATIONS AND LAYOUT SHALL PROCEED UNDER CLOSE COORDINATION WITH THE LANDSCAPE ARCHITECT OR OWNER. TREE LOCATIONS MAY VARY AS DIRECTED BY THE LANDSCAPE ARCHITECT OR OWNER.

4. CONTRACTOR SHALL EDGE ALL PLANTING BEDS A MINIMUM OF 6" BELOW ADJACENT LAWN. PROVIDE TOPSOIL AND FEATHER TO MEET BOTTOM OF EDGE. WHERE PLANTS ARE TO BE PLANTED ON A GRADED BERM PROVIDE TOPSOIL TO FORM BERM. PROVIDE GRASS SEED AND SALT HAY MULCH BETWEEN EDGE OF EXISTING LAWN AND FORMED EDGE OF PLANTED AREA.

5. CONTRACTOR SHALL ENHANCE ALL PLANTING BED SOILS WITH COMMERCIAL FERTILIZERS AND ADDITIVES TO PROVIDE THE BEST POSSIBLE PLANTING ENVIRONMENT FOR THE INDIVIDUAL PLANT SPECIES.

6. CONTRACTOR SHALL INSTALL A MINIMUM OF A 3" LAYER OF DARK CEDAR MULCH IN ALL PLANTING BEDS AND PERENNIAL GARDENS. MULCH TO BE APPROVED BY LANDSCAPE ARCH.

No.	Date	Revision
3	10-21-22	RE-ISSUED FOR REVIEW
2	08-15-22	RE-ISSUED FOR REVIEW
1	06-06-22	ISSUED FOR REVIEW

ALTERATIONS BY ANY PERSON IN ANY WAY, OR ANY ITEM CONTAINED ON THIS DOCUMENT, UNLESS ACTING UNDER DIRECTION OF THE LICENSED SEAL AFFIXED HERETO, IS A VIOLATION OF TITLE VIII ARTICLE 145 SECTION 7209.2 OF THE NEW YORK STATE EDUCATION LAW.



Project Title: **CAMPILII OFFICE**

Drawing Title: **PLANTING PLAN**

Scale	Job No.	Date	Drawing No.
1"=10'-0"	2218	06-06-22	L-400

3 Recco Drive
Brewster, New York 10509
845-279-0198

SANOK DESIGN GROUP



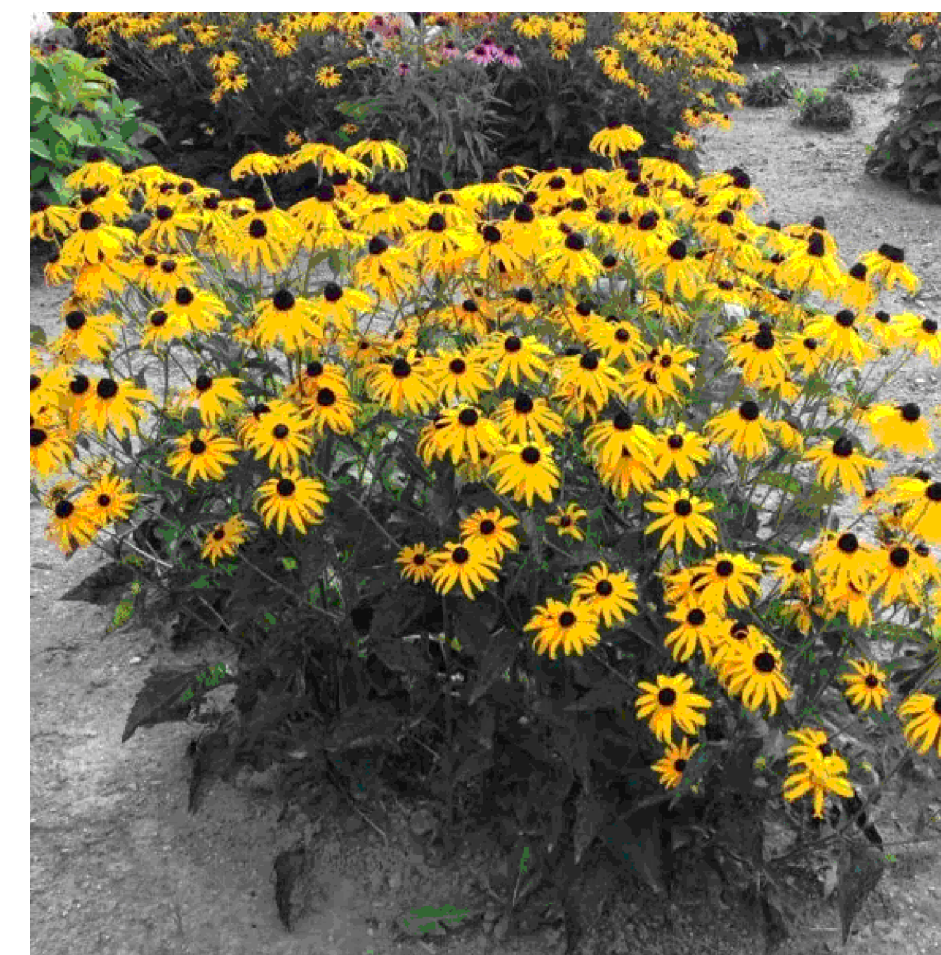
CFR:
CORNUS FLORIDA 'CHEROKEE CHIEF'
CHEROKEE CHIEF DOGWOOD TREE
EARLY SPRING BLOOM
LATE SUMMER RED FRUIT
FALL CRIMSON COLOR



DB:
DAPHNE x BURKWOODII 'CAROL MACKIE'
CAROL MACKIE DAPHNE
SEMI EVERGREEN
SPRING AND FALL FLOWER
FALL CRIMSON COLOR



IS:
IRIS SIBIRICA 'CAESAR'S BROTHER'
CAESAR'S IRIS
SPRING PURPLE FLOWERING PERENNIAL



RG:
RUDBECKIA FULGIDA VAR. SULLIVANTII 'GOLDSTURM'
GOLDSTURM BLACK-EYED SUSAN
SUMMER GOLDEN YELLOW FLOWERING PERENNIAL

PLANTING NOTES CONT:

9. SHOULD THERE BE ANY DISCREPANCIES BETWEEN THE QUANTITIES CALLED FOR ON THE PLANT LIST AND THOSE INDICATED ON THE PLAN, THE GREATER QUANTITY SHALL GOVERN.
10. ALL EVERGREEN TREES SHALL BE 'DEAD MANNED'. PROVIDE 3" x 3" CEDAR STAKES. BURY STAKES 30" BELOW FINISH GRADE AND GUY TO TREE.
11. ALL PLANT MATERIAL IS TO BE VIGOROUS, FREE OF INJURY OR DEFECTS. ALL PLANT MATERIAL IS TO BE REPRESENTATIVE FOR THEIR SPECIES.
12. NO SUBSTITUTION WILL BE PERMITTED WITHOUT PRIOR CONSENT FROM THE LANDSCAPE ARCHITECT OR OWNER.
13. REFER TO DETAIL #3, SHEET L-400 FOR PLANT LIST.
14. ALL TREES IN THE SAME PLANTING AREA SHALL BE PLACED AND PLANTED AT THE SAME TIME. IF BECAUSE OF DELIVERY SCHEDULE, ANY PLANT REMAINS ON THE SITE FOR MORE THAN 24 HOURS, THEY SHALL BE HEELED-IN ON SITE TO MAINTAIN THEIR HEALTH AND VITALITY. PLANTS SHALL BE OTHERWISE PROTECTED AND MAINTAINED, INCLUDING, BUT NOT LIMITED TO, WATER AND SHADE. ANY PLANTS DEEMED NOT IN SATISFACTORY HEALTH OR CONDITION AT TIME OF PLANTING SHALL BE REPLACED AT THE CONTRACTOR'S EXPENSE.

LEGEND:

- PROPOSED PLANTING
- PROPOSED PLANTING BED PLANTED W/ BROWN CEDAR MULCH

PLANTING NOTES:

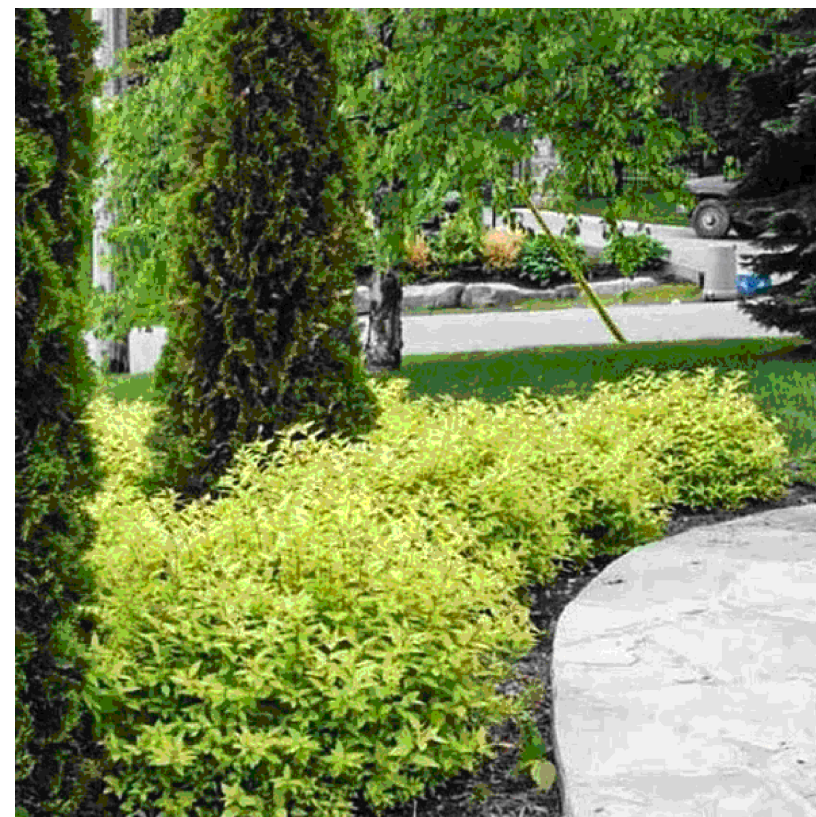
1. ALL BASE SURVEY INFORMATION IS COMPLEMENTARY. THE CONTRACTOR IS RESPONSIBLE FOR VERIFYING ALL INFORMATION PRIOR TO EXECUTION OF ANY WORK. ANY DISCREPANCIES SHALL BE BROUGHT TO THE ATTENTION OF THE OWNER BEFORE ANY ACTION TAKEN.
2. ALL LANDSCAPE ELEMENTS (PLANTING, PATIOS, DECKS AND ETC.) SHALL BE LAID OUT, REVIEWED AND APPROVED PRIOR TO INSTALLATION.
3. PRIOR TO COMMENCING PLANTING OPERATIONS THE CONTRACTOR SHALL STAKE OUT THE EXACT LOCATION OF ALL TREES FOR THE LANDSCAPE ARCHITECT'S OR OWNER'S APPROVAL. ALL PLANTING OPERATIONS AND LAYOUT SHALL PROCEED UNDER CLOSE COORDINATION WITH THE LANDSCAPE ARCHITECT OR OWNER. TREE LOCATIONS MAY VARY AS DIRECTED BY THE LANDSCAPE ARCHITECT OR OWNER.
4. CONTRACTOR SHALL EDGE ALL PLANTING BEDS A MINIMUM OF 6" BELOW ADJACENT LAWN. PROVIDE TOPSOIL AND FEATHER TO MEET BOTTOM OF EDGE. WHERE PLANTS ARE TO BE PLANTED ON A GRADED BERM PROVIDE TOPSOIL TO FORM BERM. PROVIDE GRASS SEED AND SALT HAY MULCH BETWEEN EDGE OF EXISTING LAWN AND FORMED EDGE OF PLANTED AREA.
5. CONTRACTOR SHALL ENHANCE ALL PLANTING BED SOILS WITH COMMERCIAL FERTILIZERS AND ADDITIVES TO PROVIDE THE BEST POSSIBLE PLANTING ENVIRONMENT FOR THE INDIVIDUAL PLANT SPECIES.
6. CONTRACTOR SHALL INSTALL A MINIMUM OF A 3" LAYER OF DARK CEDAR MULCH IN ALL PLANTING BEDS AND PERENNIAL GARDENS. MULCH TO BE APPROVED BY LANDSCAPE ARCH.
7. THE ACTUAL LOCATION OF PLANT MATERIALS MAY VARY DUE TO THE FIELD CONDITIONS. FINAL PLACEMENT OF PLANT MATERIAL SHALL BE APPROVED BEFORE THE PITS ARE DUG. IF INITIAL PLACEMENT IS NOT SATISFACTORY, PLANTS SHALL BE RELOCATED IN THE FIELD AT THE DIRECTION OF THE LANDSCAPE ARCHITECT OR OWNER, AT NO ADDITIONAL COST TO THE OWNER.
8. THE CONTRACTOR IS TO USE CARE DURING EXCAVATION AND PLANTING TO AVOID DISTURBING OR DAMAGING ANY ADJACENT OR UNDERGROUND UTILITIES. ANY DAMAGE RESULTING FROM THIS CONSTRUCTION WILL BE THE CONTRACTOR'S RESPONSIBILITY AND SHALL BE RESTORED AT HIS EXPENSE TO THE SATISFACTION OF THE LANDSCAPE ARCHITECT OR OWNER.



SH:
SEDUM 'HERBSTFREUDE'
SEDUM AUTUMN JOY
GREEN LEAVES
LATE SUMMER FLOWER BLOOM
EARLY FALL FLOWER BLOOM



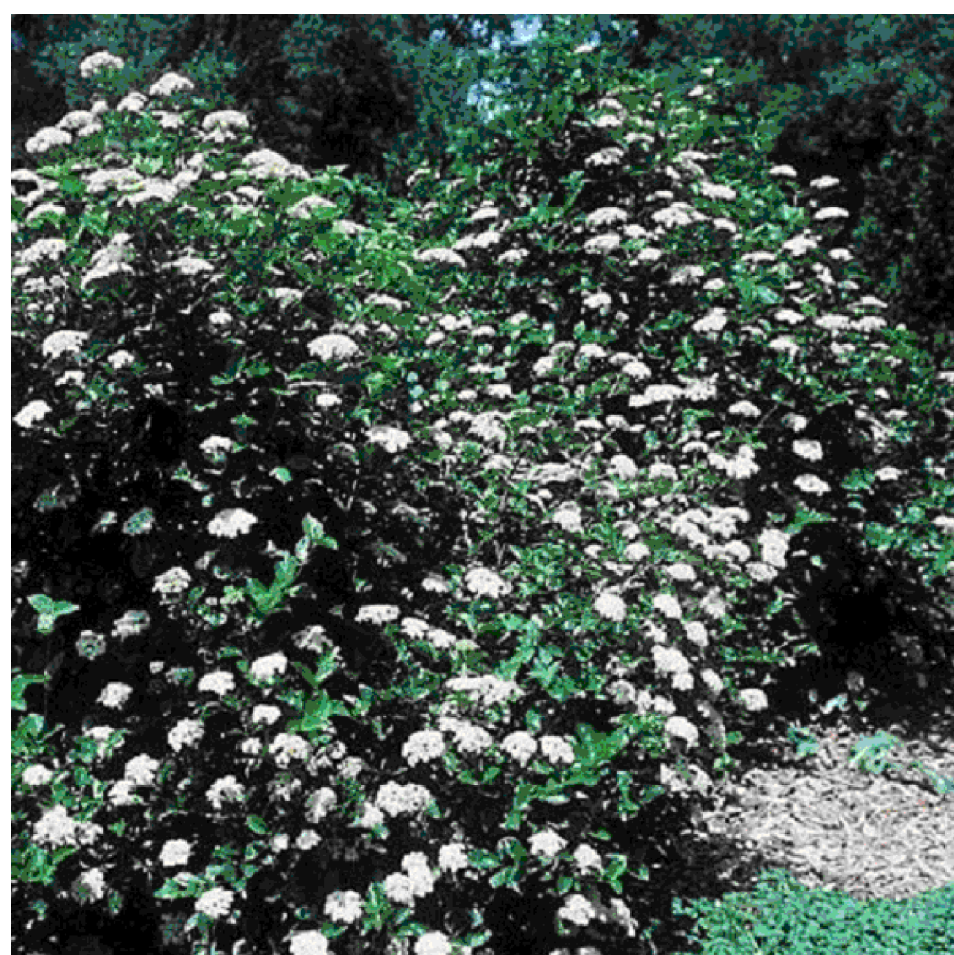
HAA:
HYDRANGEA ARBORESCENS 'ANNABELLE'
ANNABELLE HYDRANGEA
JULY TO SEPTEMBER BLOOM
FALL TO WINTER FLOWER HEADS DRY
AND PROVIDES A STALKY WINTER TEXTURE



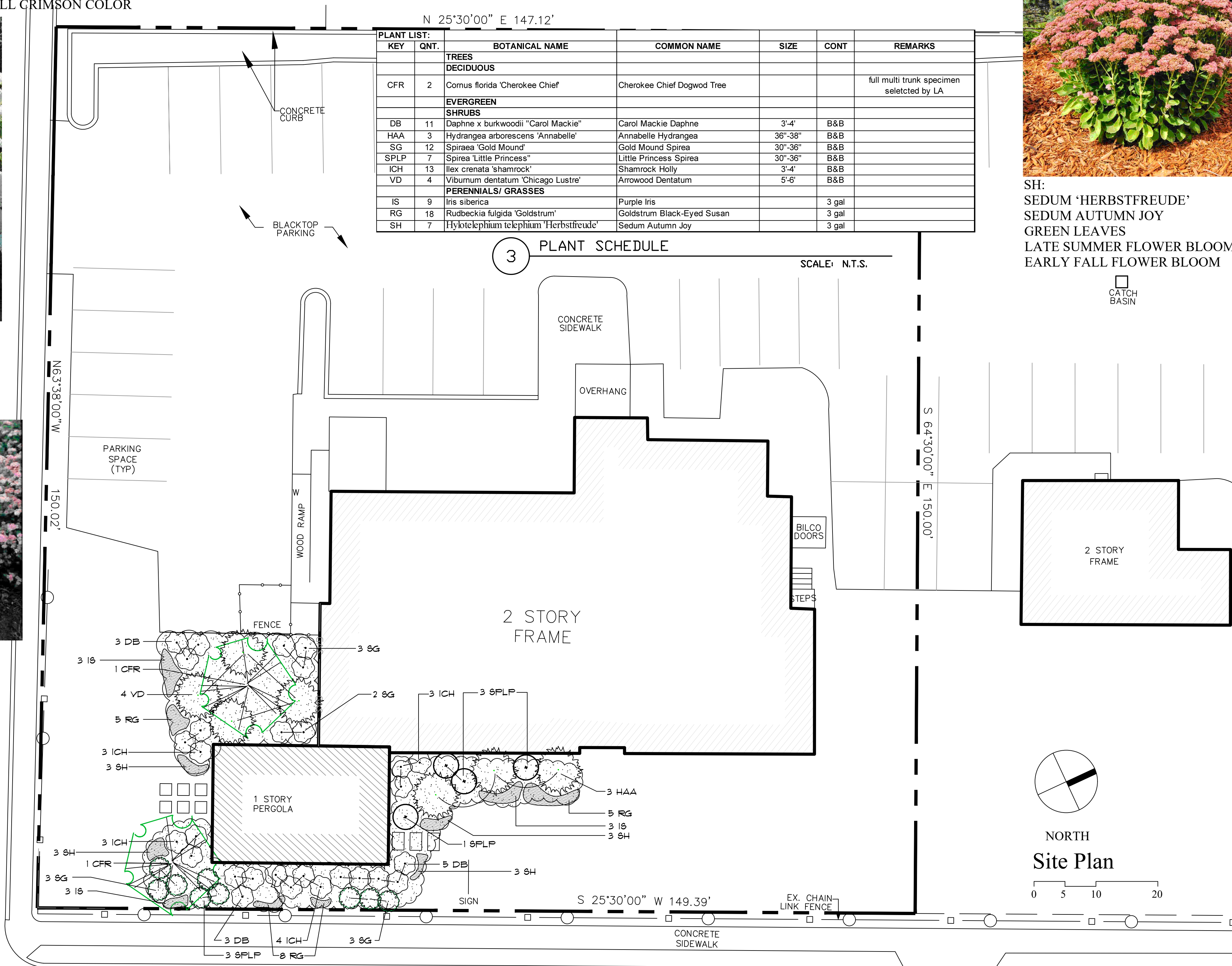
SG:
SPIREA 'GOLD MOUND'
GOLD MOUND SPIREA
SHOWY CHARTREUSE, LIGHT GREEN LEAVES
MAY TO JUNE PINK FLOWERED BLOOM
FALL LEAF CHANGE TO DARKER GREEN
WINTER STALKY TEXTURE



SPLP:
SPIREA 'LITTLE PRINCESS'
LITTLE PRINCESS SPIREA
GREEN LEAVES
SUMMER SHOWY PINK FLOWER BLOOM
FALL LEAF CHANGE TO CRIMSON
WINTER STALKY TEXTURE

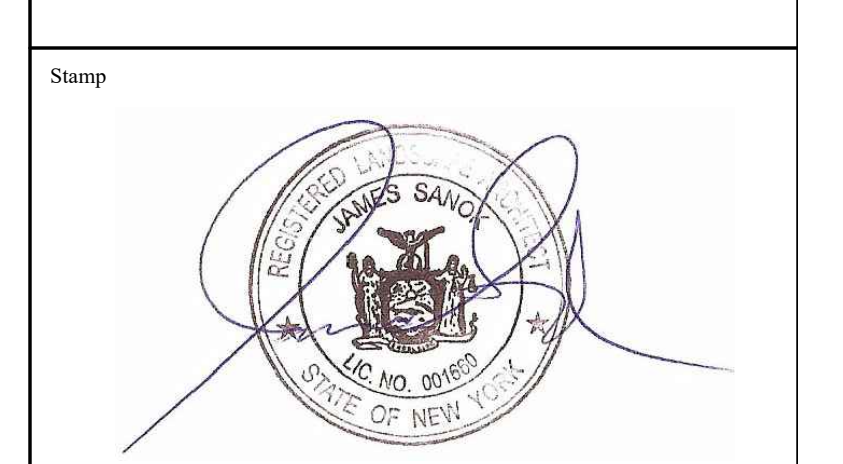


VD:
VIBURNUM DENTATUM 'CHICAGO LUSTRE'
ARROWWOOD DENTATUM
DARK GREEN LEAVES
CRAEY WHITE FLOWERS IN SPRING
FOLLOWED BY MASSES OF ROYAL BLUISH-BLACK BERRIES
RED LUSTROUS LEAVES TURN A GOOD FALL COLOR



No.	Date	Revision
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Project Title
CAMPILII OFFICE

Drawing Title
PLANTING PLAN WITH PLANT DESCRIPTION

Scale	Job No.	Date	Drawing No.
1"=10'-0"	2218	06-06-22	L-401

Drawn: JS
Checked: AS
Approved: JS

3 Recco Drive
Brewster, New York 10509
845-279-0198
Landscape Architects

WEST MAIN STREET

artistic conception



Sanok Design Group | James Sanok

Campili

artistic conception



artistic conception



Sanok Design Group | James Sanok

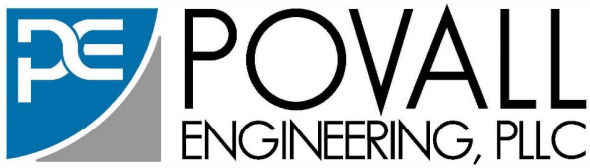
Campili

artistic conception



artistic conception





p: (845) 897-8205
f: (845) 897-0042

3 Nancy Court, Suite 4
Wappingers Falls, NY 12590

www.PovallEngineering.com

William H. Povall III, P.E.
Professional Engineer: NY

October 19, 2022

Chairman Tom Morris and Planning Board Members
Village of Wappingers Falls Planning Board
2582 South Avenue
Wappingers Falls, NY 12590

RE: Site Plan for 2731 W Main Street
Tax Grid No. 134601-6158-13-240434 – 0.37 ac.
Village of Wappingers Falls

Dear Chairman Morris and Planning Board Members:

On behalf of the owner/applicant, Dylan Aguado, and in preparation of the November 10, 2022 public hearing, we are submitting a revised Site Plan for the above referenced project. The plan has been revised per Village consultant's comments as follows:

J. Robert Folchetti & Associates, LLC review letter dated October 3, 2022:

1. Area variances for the right-of-way width and the road width were granted by the Zoning Board of Appeals at the October 4, 2022 meeting.
2. Comment noted. The design will be provided in a future submission.
3. Comment noted. A construction schedule will be provided once all outstanding items and condition of any approval have been addressed so that we know the full extent of what needs to be completed.

Four Corners Planning review letter dated October 5, 2022:

1. **SEQR:** Comment noted.
2. **Multiple Principal Buildings on Same Lot:** No response necessary.
3. **Area Variance:** No response necessary.
4. **Curb Cut:** No response necessary.
5. **Landscaping:**
 - (a) The snow storage area along the northern property boundary has been reduced in size and smaller evergreen planting have been proposed.
 - (b) The planting schedule has been revised to show the Blue Spruce as the landscape buffer.

6. Outdoor Lighting:

- (a) No response necessary.
- (b) The existing wall sconce is proposed to be replaced with a new wall sconce light with the mounting height at the top of the door. Specifications have been attached.

7. Fence:

- (a) The Planning Board waived the height requirement for the proposed 5' high white stockade fence at their October 6, 2022 meeting. This height is consistent with the neighboring fence.
- (b) The existing chain link fence is now proposed to be removed along the property frontage as discussed at the October 6, 2022 Planning Board meeting.

8. Building Elevations: The Building Elevation drawing has been attached.

9. Special Permit Criteria: A Special Use Permit Application has been attached.

10. Recreation Fee:

The recreation fee for the two (2) new dwelling units will be paid prior to the Chairman's signature.

11. Public Hearing(s): Comment noted.

12. 239-m Review: Comment noted. It is our understanding that the Planning Department will submit this plan to the Dutchess County Department of Planning and Development.

Public Comments received:

The neighbor to the north, on the parcel located at 2733 West Main Street, has indicated that he does not want trees along his property line because of leaves falling in his yard. He prefers a smaller tree or no tree. Therefore, a smaller pink dogwood tree has been chosen to replace the proposed maple tree.

In support of this application, please find enclosed the following:

- Seven (7) copies of the Site Plan dated revised October 19, 2022
- Seven (7) copies of Wall Sconce lighting specifications.
- Seven (7) copies of the Elevation Drawings dated October 19, 2022
- Seven (7) copies of Special Use Permit Application
- A check in the amount of \$100 for the Special Use Permit Application fee.

Please contact this office, should you have any questions or require any additional information. Thank you.

Sincerely,



William H. Povall, III, P.E.

cc: Dylan Aguado



CASCADE 1830BZ-LED	
BRONZE	

WIDTH:	8.0"
HEIGHT:	14.5"
WEIGHT:	3.5 LBS
MATERIAL:	EXTRUDED ALUMINUM
GLASS:	AMBER ETCHED ORGANIC RAIN
BACKPLATE WIDTH:	8.0"
BACKPLATE HEIGHT:	14.5"
SOCKET:	15W LED *INCLUDED
DARK SKY:	YES
LED INFO:	
LUMENS:	800
COLOR TEMP:	2700k
CRI:	96
INCANDESCENT EQUIVALENCY:	1 x 100W
DIMMABLE:	No
NOTES:	PATENT: US AND FOREIGN PATENTS PENDING
EXTENSION:	4.0"
TTO:	4.8"
CERTIFICATION:	C-US WET RATED
VOLTAGE:	120V
UPC:	640665183085

AT HINKLEY, WE EMBRACE THE DESIGN PHILOSOPHY THAT YOU CAN MERGE TOGETHER THE LIGHTING, FURNITURE, ART, COLORS AND ACCESSORIES YOU LOVE INTO A BEAUTIFUL ENVIRONMENT THAT DEFINES YOUR OWN PERSONAL STYLE. WE HOPE YOU WILL BE INSPIRED BY OUR COMMITMENT TO KEEP YOUR 'LIFE AGLOW.'

*life*AGLOW®



Village of Wappingers Falls
Office of Planning and Zoning
2582 South Avenue, Wappingers Falls, NY 12590
(845) 297-5277 Fax: (845) 296-0379

SPECIAL USE PERMIT APPLICATION

Part 1 – to be completed by all Applicants

Date: 10-19-22

NAME OF PROJECT: (ex: Doe Accessory Apartment) Site Plan for 2731 West Main Street

APPLICANT:

Name: Dylan Aguado

Address: 9 Lenny Court, Wappingers Falls, NY 12590

Phone: 845-705-5049 Fax: n/a

Email: dylan@aguadolandscaping.com

PROPERTY OWNER:

Name: Dylan Aguado

Address: 9 Lenny Court, Wappingers Falls, NY 12590

Phone: 845-705-5049 Fax: n/a

Email: dylan@aguadolandscaping.com

PROPERTY INFORMATION:

Address: 2731 West Main Street, Wappingers Falls, NY 12590

Parcel ID #: 134601-6158-13-240434 Parcel size: 0.374 Ac.

Zoning District: VM - Village Mixed Current use: Residential - one (1) two-family dwelling

If this application seeks a special use permit for an accessory dwelling (apartment), complete and attach Part 2 of this form, including the affidavit included as Exhibit A thereto.

If this application seeks a special use permit for any use other than an accessory apartment, complete and attach Part 3 of this form.

Every application must be accompanied by an owner affidavit in the form set forth on the next pages.

The Planning Board of the Village of Wappingers Falls generally meets in regular session on the first Thursday of each month. In order to be placed on a Planning Board agenda for any given month, the original and ten (10) copies of a completed application form and all necessary supporting documentation, together with the required fee, must be received by the Zoning Enforcement Officer no later than noon on the date 15 days prior to the next-scheduled meeting of the Planning Board. There shall be no exceptions. The Zoning Administrator will review each application for completeness. Incomplete applications will not be placed on an agenda. The Zoning Administrator is without authority to vary this rule. Early submissions are encouraged so that, if deficiencies are noted, applicants have sufficient time to revise their submission to correct them and be placed on that month's agenda.

Application fees and escrow fees shall be paid by separate checks, each made payable to the "Village of Wappingers Falls." No application will be deemed complete or placed on an agenda until such fees have been received by the Village.

I certify that I have read the foregoing and that the information submitted is true and accurate to the best of my knowledge:



Applicant

OWNER'S AFFIDAVIT

This affidavit must be signed by all owners of record of the property.

State of New York)
) ss.:
County of Dutchess)

Dylan Aguado being duly sworn, deposes and says:

1. That I/we are the Owner(s) of the within property as described in the foregoing application for special permit approval and that the statements contained therein are true to the best of my/our knowledge and belief.

2. *(If applicable)* That I/we hereby authorize Povall Engineering, PLLC to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.

3. That I/we understand that by submitting this application for special permit approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.

4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.

5. That I/we understand that I/we, and any of our contractors and representatives, shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from noncompliance with the approved application, and with non-compliance with any provision of the Village Code.

6. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, Code Enforcement Officer or Zoning

Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that, by submitting this application, the approval of said application, including the commencement of any work related to the approved plan, is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.

6. That I/we understand that the Planning Board intends to rely on the foregoing representations in making a determination to issue the requested special permit approval.

Under penalty of perjury, I/we declare that I/we have examined this affidavit and that it is true and correct.



Owner

Owner

Sworn to before me on the
18 day of October, ~~2019~~ 2022


Notary Public

WENDY PRZETAKIEWICZ
NOTARY PUBLIC-STATE OF NEW YORK
No. 01PR6295033
Qualified in Dutchess County
My Commission Expires December 23, ~~20~~ 25

Part 2 N/A

(To be completed if a special use permit is sought for an accessory apartment)

1. Briefly describe the proposed use.

2. Will the accessory apartment be contained within the existing dwelling or is an addition proposed? If an addition is proposed, how many square feet are proposed to be added?

3. Is the primary use of the property as a single-family dwelling? _____

4. When was the primary residence built? _____

5. Is there a certificate of occupancy for the primary dwelling unit? _____

6. Will the owner of the single-family dwelling occupy either the main dwelling unit or the accessory apartment? _____

7. How many square feet is the primary dwelling unit? _____

8. How many square feet is the proposed accessory apartment? _____

9. How many bedrooms will the accessory apartment contain? _____

10. Pursuant to §151-18 of the Village Code, an occupant of at least one of the dwelling units shall be the father, mother, son or daughter (including legally adopted), brother, sister, grandparent or grandchild of the occupant of the accessory apartment. State the relationship between the occupant(s) of the main dwelling unit and the accessory apartment. _____

Part 2, continued

11. Either the primary dwelling unit or the accessory apartment must be the principal residence of the persons identified in the preceding question. Will this requirement be met? Explain. _____

12. How many parking spaces are available on site? _____

13. How many residents of driving age reside in the primary dwelling unit? _____

14. Were any variances or special use permits previously granted for this property? If so, please describe them. _____

15. Is the property served by municipal water and sewer? If not, describe the adequacy of these utilities for the additional use. _____

**Supporting Documentation
to be submitted with an Application for a
Special Use Permit for an Accessory Dwelling (Apartment)**

1. A plot plan to convenient scale showing lot lines, the dimension(s) of all existing structures, and the location and dimensions of any proposed structures or additions.
2. If the proposal for the accessory apartment is made in conjunction with the development of a lot, a formal site plan must be submitted that complies with the site plan requirements found in the Village Code. The site plan must be signed by licensed professional engineer and shall show all required information, unless otherwise specified by the Zoning Board of Appeals. Note: site plan approval will be required to be obtained from the Planning Board.
3. An EAF short form (or long form if deemed necessary).
4. For any special use permit application that constitutes a land development activity, attach a storm water pollution prevention plan.
5. A copy of the deed for the property showing the current ownership.
6. Documentation sufficient to establish that the premises for which the special use permit is sought is the owner's principal place of residence.
7. Documentation sufficient to establish that the access to the proposed accessory apartment is not observable from the street, unless there is a single access to the principal dwelling unit and proposed accessory apartment from the front of the building with a split access inside the building.
8. Complete and return the affidavit attached hereto as Exhibit A acknowledging that the special use permit, if granted, will terminate upon the death of the owner or upon the transfer of title to said premises or if the owner no longer occupies the premises as their principal residence. This affidavit will be binding upon the owners, their heirs or distributes, executors, administrators, successors and assigns.
9. The owner's affidavit.
10. Photographs of the existing structure(s) are helpful but not required.

N/A

ACCESSORY APARTMENT ONLY

Exhibit A – Affidavit of Ownership

(Each owner of the property must complete a separate affidavit.)

STATE OF NEW YORK)

)

ss.:

COUNTY OF DUTCHSS)

I, _____, hereby swear or affirm under penalty of perjury as follows:

1. I am the owner of the property located at _____

2. I have applied to the Planning Board of the Village of Wappingers Falls for a special use permit to have an accessory apartment at this location.
3. The property is my principal residence.
4. The occupants of the accessory apartment will comply with the requirements of §151-18.
5. There will be only one accessory apartment on the property, for a total of no more than two dwelling units (principal and accessory).
6. I hereby specifically acknowledge that the special use permit, if granted, will terminate upon my death, or upon the transfer of title to said premises, or if I no longer occupy the premises as my principal residence.
7. The special use permit, if granted, also will terminate if the use is discontinued for a period of 12 months for any reason, or if all required improvements are not made within one year from the date of issuance.
8. I further acknowledge that the terms and conditions of any special use permit that may be granted shall be binding upon me, my heirs, distributees, executors, administrators, successors and assigns.
9. The statements made by me in the application to which this affidavit is attached are incorporated by reference as if fully set forth herein.

_____ (sign)

_____ (print name)

Sworn to before me this _____
day of _____

Notary Public

Part 3

(To be completed if a special use permit is sought for any use other than an accessory dwelling unit. Attach additional sheets if necessary.)

1. Describe the proposed use.

The owner/applicant is proposing to construct a new two-family apartment building/house on the parcel.

The existing two-family apartment building/house will remain.

2. Will the proposed use utilize the entire site or only a portion thereof? Describe.

The proposed two-family dwelling will utilize a portion of the site. It will be in addition

to the two-family dwelling currently existing on the site.

3. Are any new structures proposed to be constructed? If yes, describe.

Yes. One two-family apartment building/house is proposed.

4. How many vehicle trips per day is the proposed use anticipated to generate? 26

5. How will the proposed use affect the development of the district in which it is located?

The new two-family dwelling will result in a house layout and spacing consistent with

surrounding properties.

6. Were any variances or special use permits previously granted for this property?

If yes, please describe. Yes, an area variance for the shared driveway/access and required right of way to service the existing and proposed two-family dwellings was granted at the 10/4/22 ZBA meeting.

7. Describe how the proposed use is compatible with the principles of the zoning district in which it is located, the purposes set forth in this chapter, and the goals of the Comprehensive Plan of the Village of Wappingers Falls.

The new two-family dwelling will visibly align and blend with the neighboring homes and uses.

8. Describe how the proposed use is compatible with the adjoining properties and with the natural and man-made environment.

The new two-family dwelling will visibly align and blend with the neighboring home.

9. Describe how the height of buildings, walls, fences and the nature and extent of landscaping on the site are such that the proposed use will not hinder or discourage the appropriate development and use of adjacent land and buildings.

The height of the proposed buiding will meet the zoning requirements and be consistent with the height of the neighboring dwellings. Fencing and landscaping is proposed to buffer the proposed parking area from the adjacent properties and be consistent with surrounding neighbors.

10. Describe how the height of buildings, walls, fences and the nature and extent of landscaping on the site are such that the proposed use will not hinder or discourage the appropriate development and use of adjacent land and buildings.

See reponse to item no. 9 above.

11. Describe how parking areas will be of adequate size for the proposed use, properly located and suitably screened from adjoining residential uses, and how

appropriate vehicular circulation and infrastructure for the proposed use, including accessibility to fire, police, and emergency vehicles and sufficient water supply and appurtenances, will be provided.

The existing driveway will be relocated to provide proper access to both the existing and proposed apartment buildings. The driveway will be centrally located to position the driveway away from neighboring properties. The driveway parking area will be screened with new trees.

12. Will the proposed use generate any noise, fumes, vibration or other characteristics greater than would be the operations of any allowed use not requiring a special permit?

The proposed residence will have no adverse affect on noise, fumes, vibrations or any other characteristics of the allowed use.

13. What will be the overall impact of the proposed use on the site and its surroundings, considering environmental, social and economic impacts of traffic, noise, dust, odors, release of harmful substances, solid waste disposal, glare, or any other nuisances?

The proposed project will have no adverse impact on the site. The existing driveay, parking area and garage will be relocated or removed minimizing additional impervious surfaces resulting from the project. The proposed use is consistent with surrounding properties. The residential use will be limited to an apartment use with no impact or traffic.

14. Is the location of the proposed use consistent with the goal of creating a healthy mix of uses that enhances the viability of the Village?

The new apartment building will provide additional lower cost living opportunities mixed in with other residential and business uses in the area.

15. Is the property located in the historic district or adjacent to a historic structure?
If yes, describe the compatibility of the proposed use with the historic character and use of the structure or structures and the historic character of the site and in the surrounding area.

The property is not located in or adjacent to a historic structure.

**Supporting Documentation for a
Special Use Permit other than for an Accessory Dwelling**

1. A plot plan to convenient scale showing lot lines, the dimension(s) of all existing structures, and the locations and dimensions of any proposed structures.
2. If the proposed special use is in conjunction with the development of a lot, a formal site plan must be submitted that complies with the site plan requirements found in the Village Code. The site plan must be signed by a licensed professional engineer and shall show all required information, unless otherwise specified by the Planning Board.
3. An EAF short form (or long form if deemed necessary).
4. For any special use permit application that constitutes a land development activity, attach a storm water pollution prevention plan.
5. A copy of the deed for the property showing the current ownership, and copies of any easements for the property.
6. The owner's affidavit.
7. Photographs of the existing structure(s) are helpful but not required.

- **Siding** – Certaineed - Pacific Blue
- **Roofing** – Tamko Heritage Weathered Wood
- **Columns**- HBG columns , 8"x8" PermaLite Square w. Tuscan Cap and Base
- **Brackets** – Fypon – BKT19x24x4
- **Shutters** – Timberlane – CD12



FRONT PROPOSED ELEVATION

DEGRAW & DEHAAN ARCHITECTS

2731 West Main Street
September 28, 2022



LEFT PROPOSED ELEVATION

DEGRAW & DEHAAN ARCHITECTS

2731 West Main Street
September 28, 2022



BACK PROPOSED ELEVATION

DEGRAW & DEHAAN ARCHITECTS

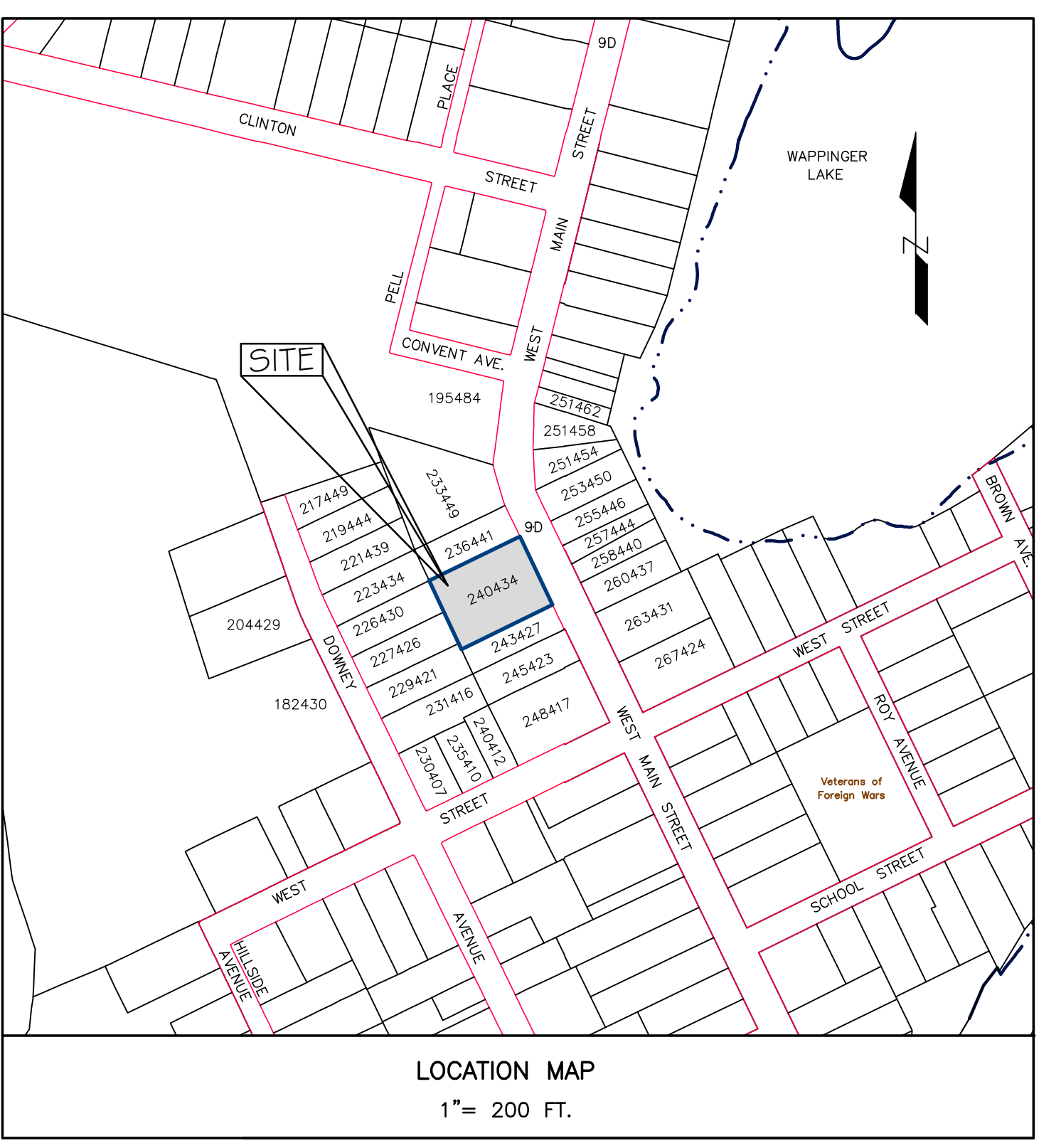
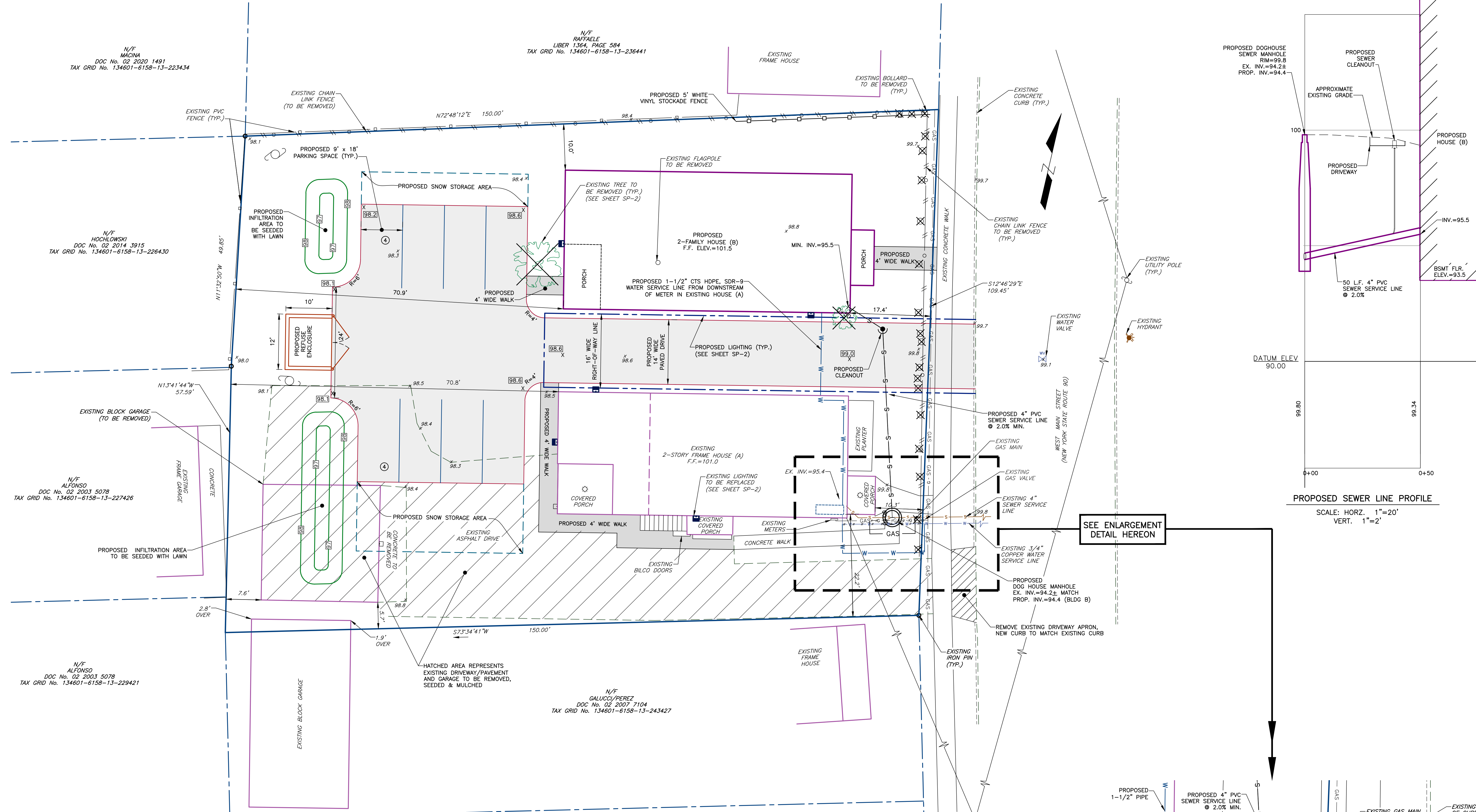
2731 West Main Street
September 28, 2022



RIGHT PROPOSED ELEVATION

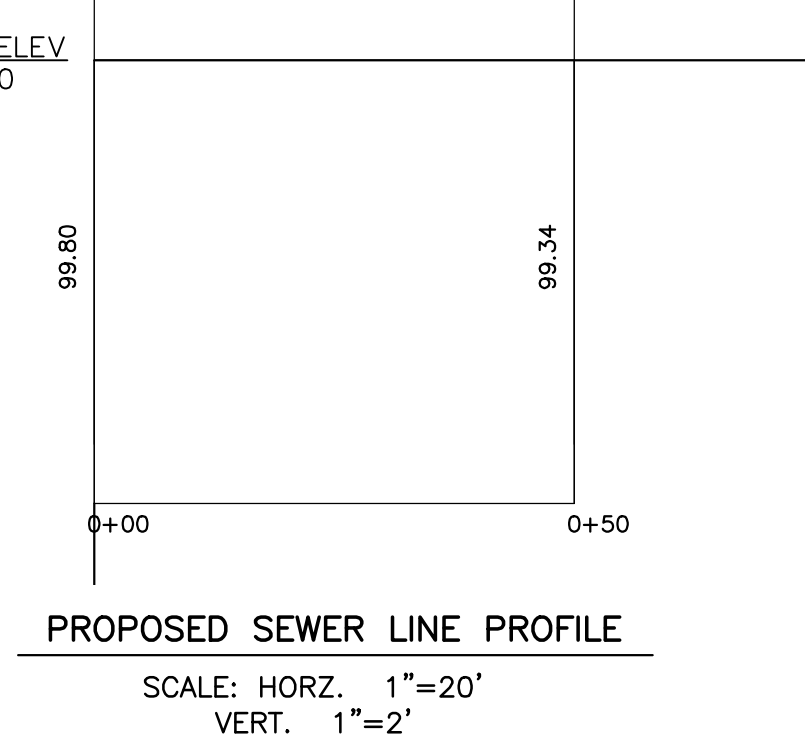
DEGRAW & DEHAAN ARCHITECTS

2731 West Main Street
September 28, 2022



GENERAL NOTES

- ALTERATION OF THIS PLAN BY ANY PERSON OTHER THAN A NEW YORK STATE LICENSED PROFESSIONAL ENGINEER IS A VIOLATION OF SECTION 7209-2 OF THE NEW YORK STATE EDUCATION LAWS. ANY ALTERATIONS OF THIS PLAN BY A NYS LICENSED PROFESSIONAL ENGINEER SHALL BE SO NOTED AND DATED AND BE ACCOMPANIED BY THE SEAL AND SIGNATURE OF SUCH PROFESSIONAL ENGINEER.
- EXISTING SURVEY FROM A MAP ENTITLED "MAP OF SURVEY OF LANDS OF AGUADO, 2731 WEST MAIN STREET (NY 90)", DATED JANUARY 8, 2022, PREPARED BY JOHN J. POST JR., L.S.
- LOCATIONS AND ELEVATIONS OF ALL EXISTING UTILITIES TO BE FIELD VERIFIED PRIOR TO COMMENCEMENT OF CONSTRUCTION.



PARKING SCHEDULE

REQUIRED PARKING:	
VM VILLAGE MIX USE DISTRICT:	
DWELLING: TWO FAMILY = 1 SPACE PER UNIT: 4 UNITS = 4 SPACES	
TOTAL EXISTING PARKING SPACES	= 4 SPACES
TOTAL PROPOSED PARKING SPACES	= 4 SPACES
TOTAL PARKING SPACES PROVIDED:	= 8 SPACES

SCHEDULE OF BULK REGULATIONS

VM DISTRICT	REQUIRED	EXISTING	PROPOSED
PRINCIPAL BUILDING HEIGHT	3 STORIES MAX/2 STORIES MIN.	2 stories	2 stories
ACCESSORY BUILDING HEIGHT	2 STORIES MAX.	1 story	N/A
MINIMUM LOT WIDTH	25 FT.	108.4 ft.	108.4 ft.
MAXIMUM LOT COVERAGE	75% MAX.	37%	48%
MINIMUM GREENSPACE	10% MIN.	63%	52%
FRONT SETBACK (PRINCIPAL)	10 FT. MIN.	10.3 ft.	10.3 ft.
FRONT SETBACK (SECONDARY)	10 FT. MIN.	N/A	N/A
SIDE SETBACK	0 FT. MIN.	21.4 ft.	10.0 ft.
REAR SETBACK	10 FT. MIN.	70.8 ft.	70.8 ft.
ACCESSORY BUILDING			
PRINCIPAL FRONTAGE	30 FT.	117.0 ft.	N/A
SECONDARY FRONTAGE	5 FT. MIN. OR 3 FT. AT CORNER	N/A	N/A
SIDE SETBACK	5 FT. MIN.	5.7 ft.	N/A

OWNER/APPLICANT:
DYLAN AGUADO
9 LENNY COURT
WAPPINGERS FALLS, NY 12590

PROPERTY INFORMATION:
2731 WEST MAIN STREET
TAX MAP NO.: 134601-6158-13-240434
DOC. No. 22021 450

ZONING DESIGNATION:
VM - VILLAGE MIXED DISTRICT

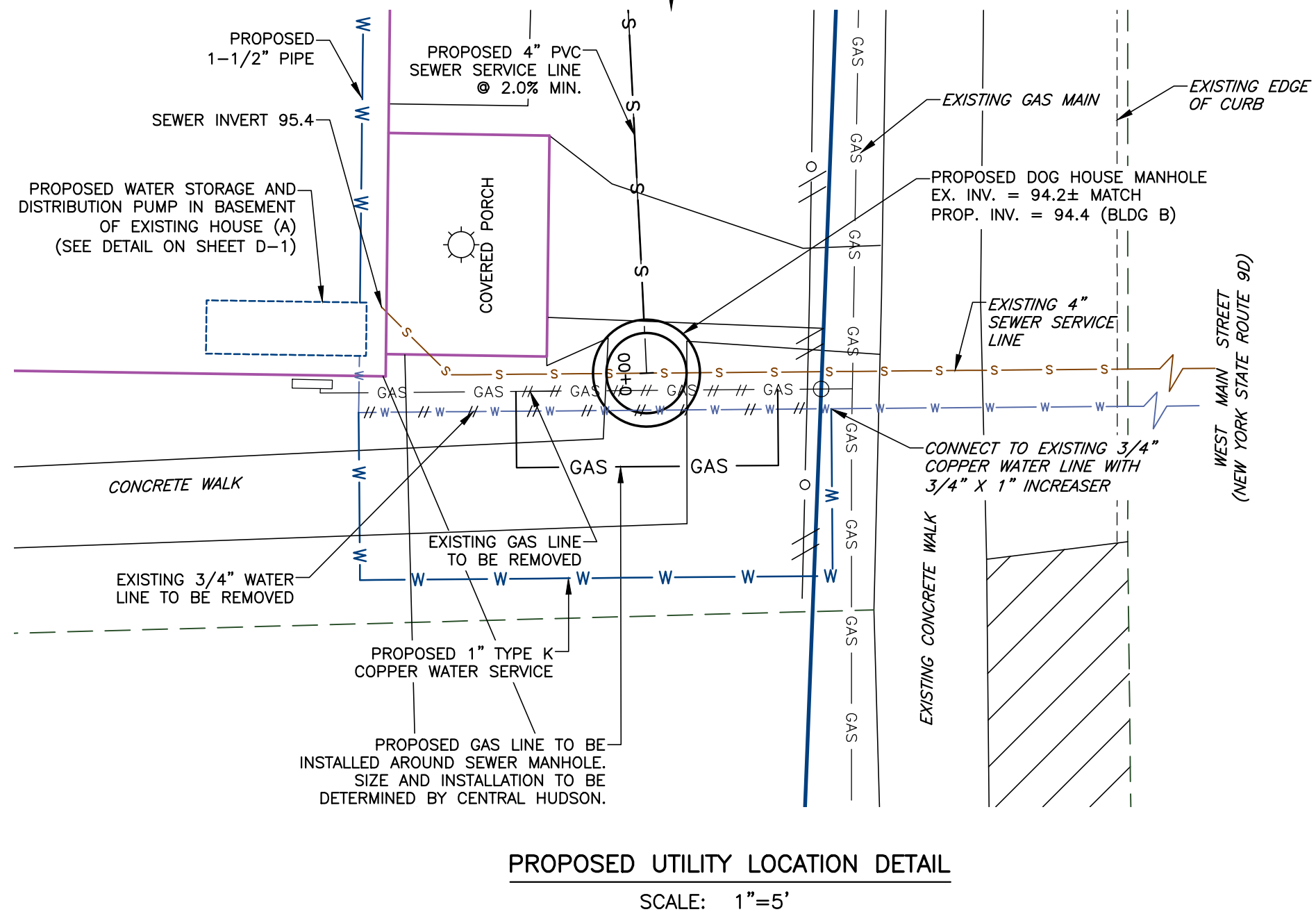
PROPERTY ACREAGE:
TOTAL AREA = 0.374± ACRES

**VILLAGE OF WAPPINGERS FALLS
PLANNING BOARD**

FINAL APPROVAL DATED: _____

PB CHAIR: _____ DATE: _____

WITNESS: _____



LEGEND

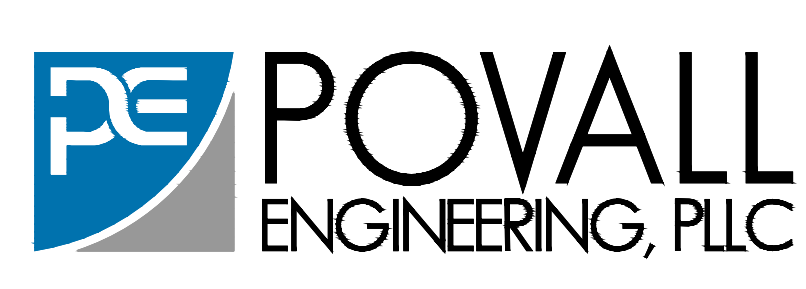
—●—	PROPERTY LINE	—x—	EXISTING SPOT GRADE
—●—	ADJACENT LOTLINE	—x—	PROPOSED SPOT GRADE
—s—	EXISTING WATER LINE	—w—	PROPOSED WATER LINE
—s—	EXISTING SEWER LINE	—s—	PROPOSED SEWER LINE
—g—	EXISTING GAS LINE	—g—	PROPOSED GAS LINE
—o—	EXISTING CHAIN LINK FENCE	—o—	PROPOSED LIGHT
—o—	EXISTING PVC FENCE	—x—	EXISTING TREE TO BE REMOVED
—o—	EXISTING UTILITY POLE WITH OVERHEAD WIRES		
—o—	EXISTING HYDRANT		
—o—	EXISTING WATER VALVE		

REVISIONS

DATE:	DESCRIPTION:
09-14-22	GENERAL REVISIONS PER VILLAGE COMMENTS
10-19-22	GENERAL REVISIONS PER VILLAGE COMMENTS

OWNER'S CONSENT NOTE:
THE UNDERSIGNED OWNER OF THE PROPERTY HEREON STATES THAT HE/SHE IS FAMILIAR WITH THIS MAP, ITS CONTENTS, AND ITS LEGENDS AND HEREBY CONSENTS TO ALL SAID TERMS AND CONDITIONS AS STATED HEREON.

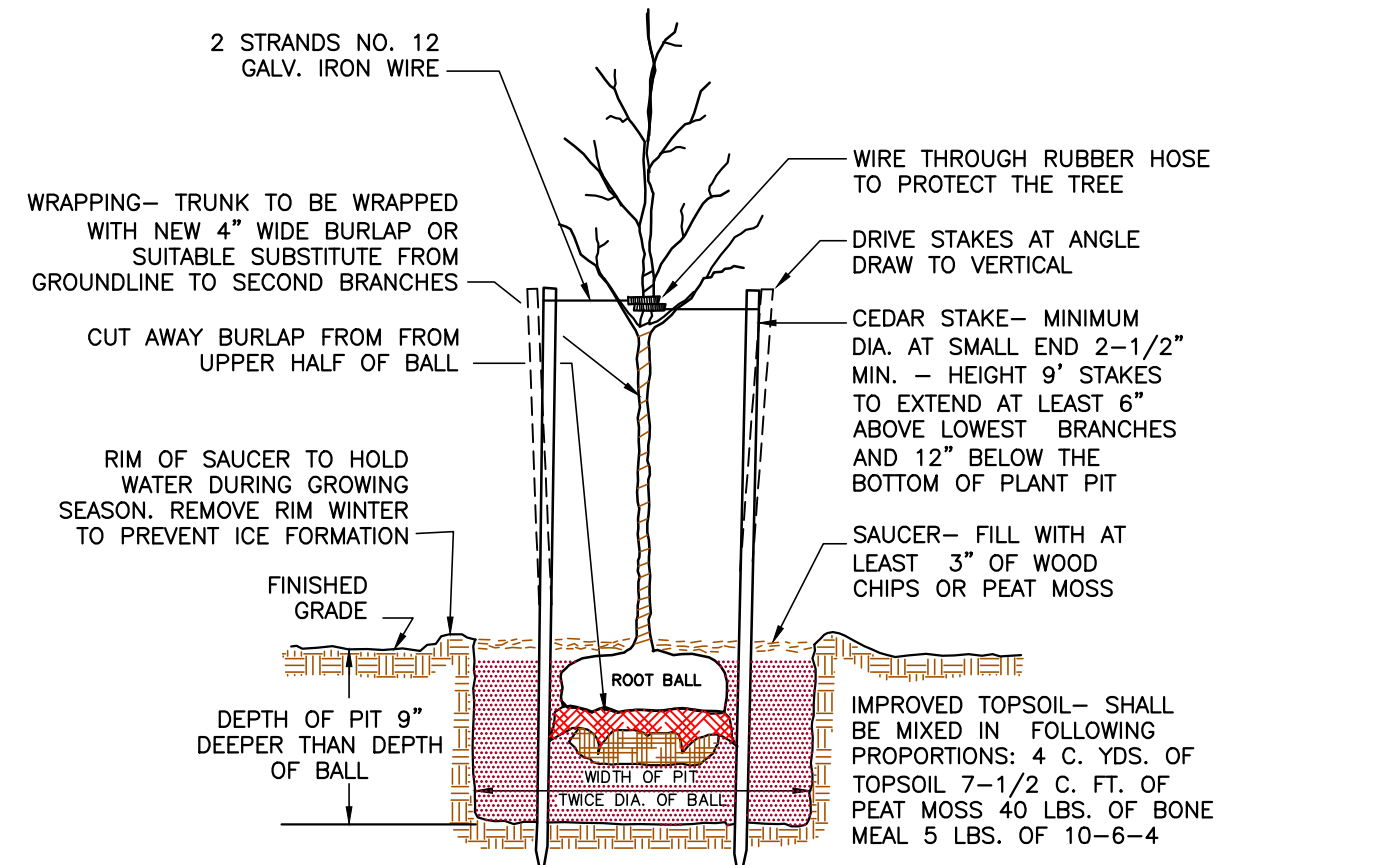
OWNER: _____ DATE: _____



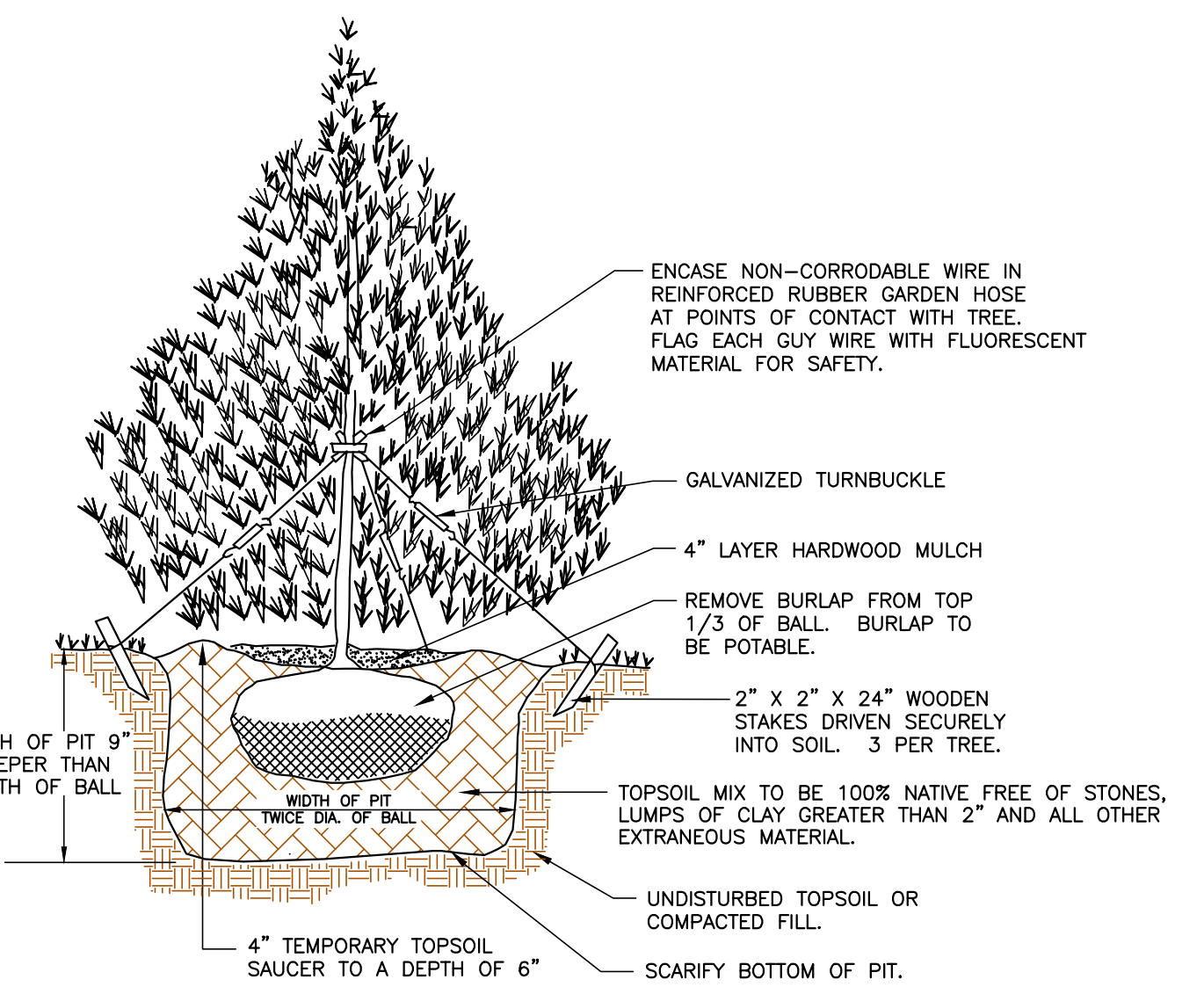
WILLIAM H. POVALL III, P.E.
N.Y.S.P.E. LICENSE #075020
3 NANCY COURT, SUITE 4
WAPPINGERS FALLS, NY 12590
TEL: (845) 897-8205
FAX: (845) 897-0042

SITE PLAN FOR
2731 WEST MAIN STREET
VILLAGE OF WAPPINGERS FALLS
DUTCHESS COUNTY, NEW YORK

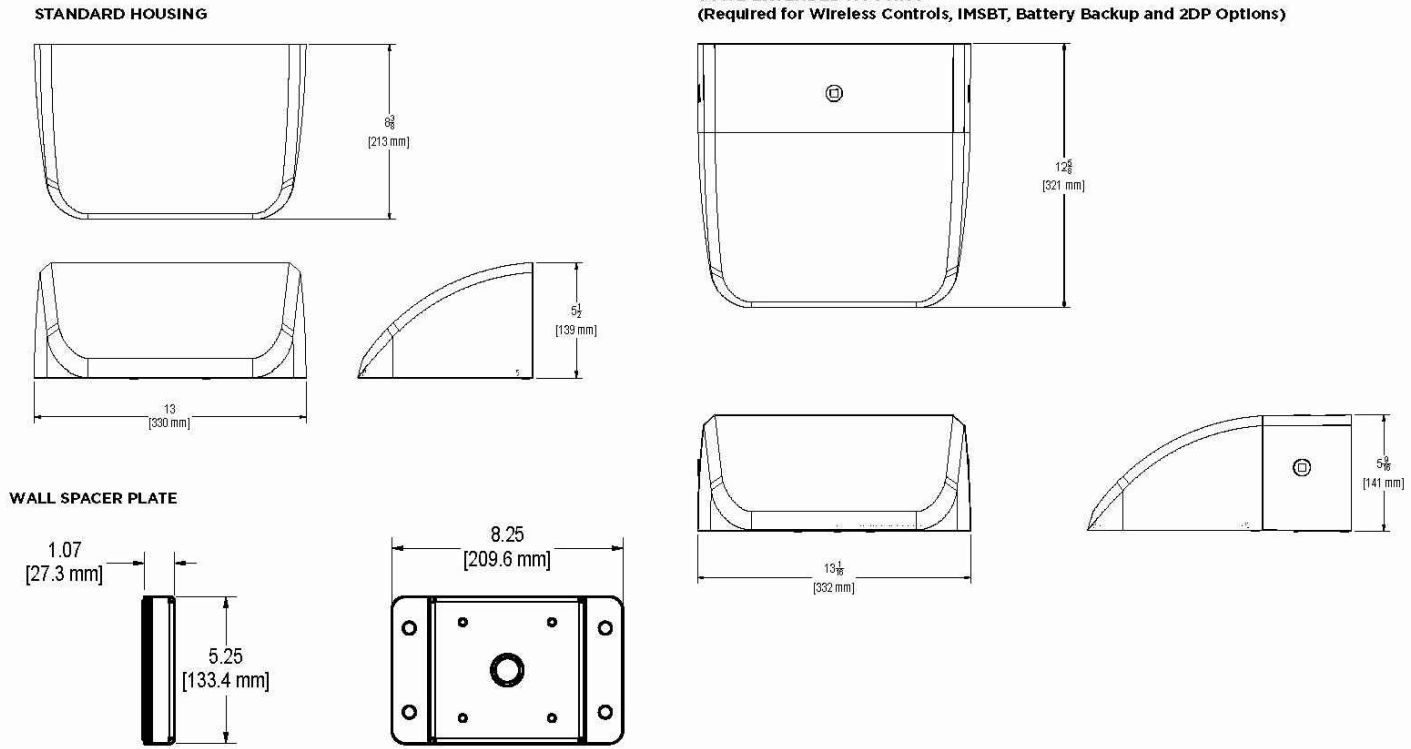
JOB #: 2202
DATE: 04-28-22
SCALE: 1"=10'
SP-1
SHEET 1 OF 3



DECIDUOUS TREE PLANTING DETAIL
NOT TO SCALE



EVERGREEN PLANTING DETAIL
NOT TO SCALE



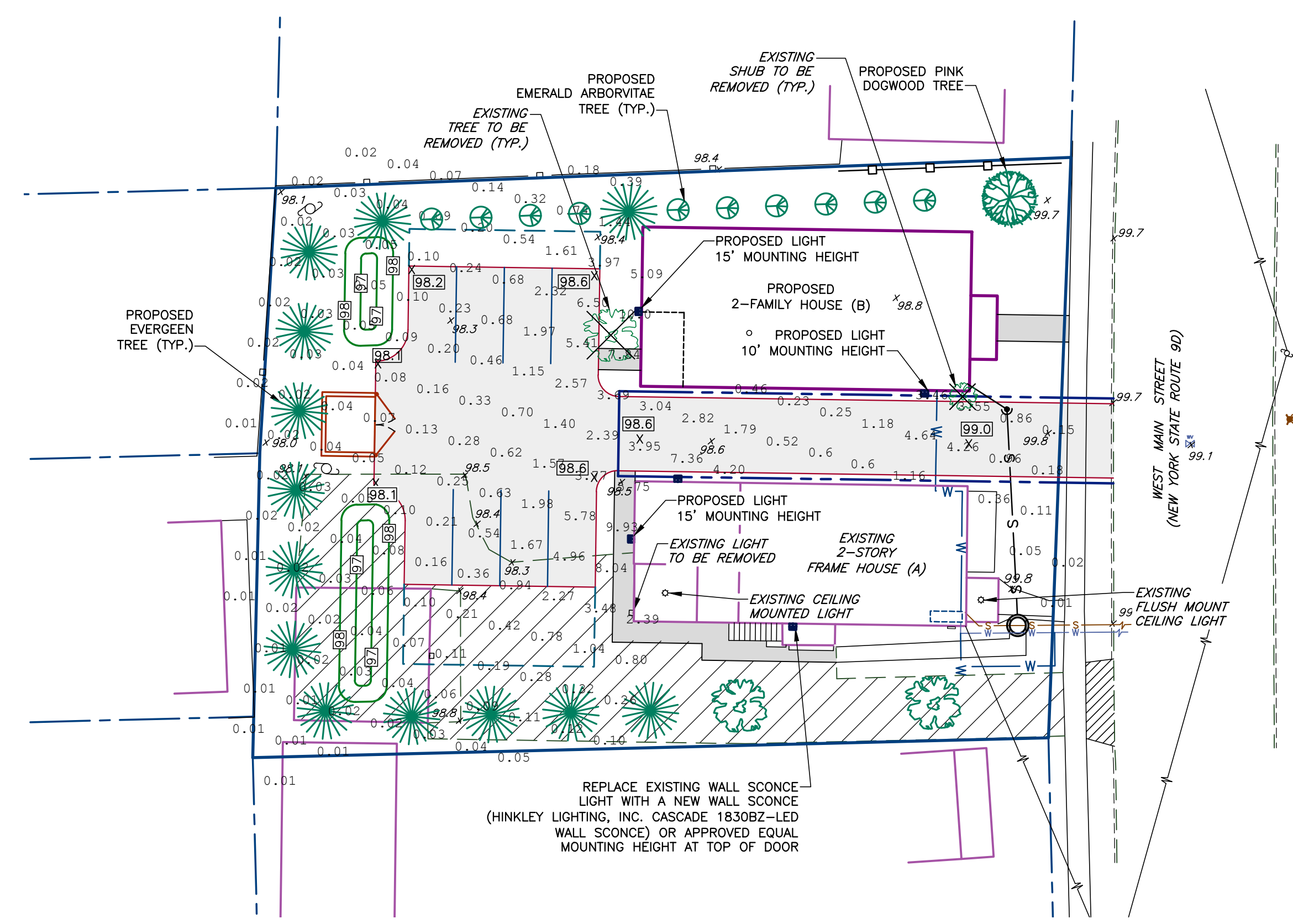
WALL MOUNTED LIGHTING DETAIL
NOT TO SCALE

PLANTING SCHEDULE				
SYMBOL	QTY.	COMMON NAME	BOTANICAL NAME	SIZE
	2	RED OAK OR RED MAPLE	QUERCUS RUBRA ACER RUBRUM	3"-3 1/2" MIN. CAL.
	1	PINK DOGWOOD	CORNUS FLORIDA	3"-3 1/2" MIN. CAL.
	13	BLUE SPRUCE	PICEA PUNGENS	8-10 FT. HT.
	10	*EMERALD ARBORVITAE	THUJA OCCIDENTALIS 'EMERALD'	10-15 FT. HT.

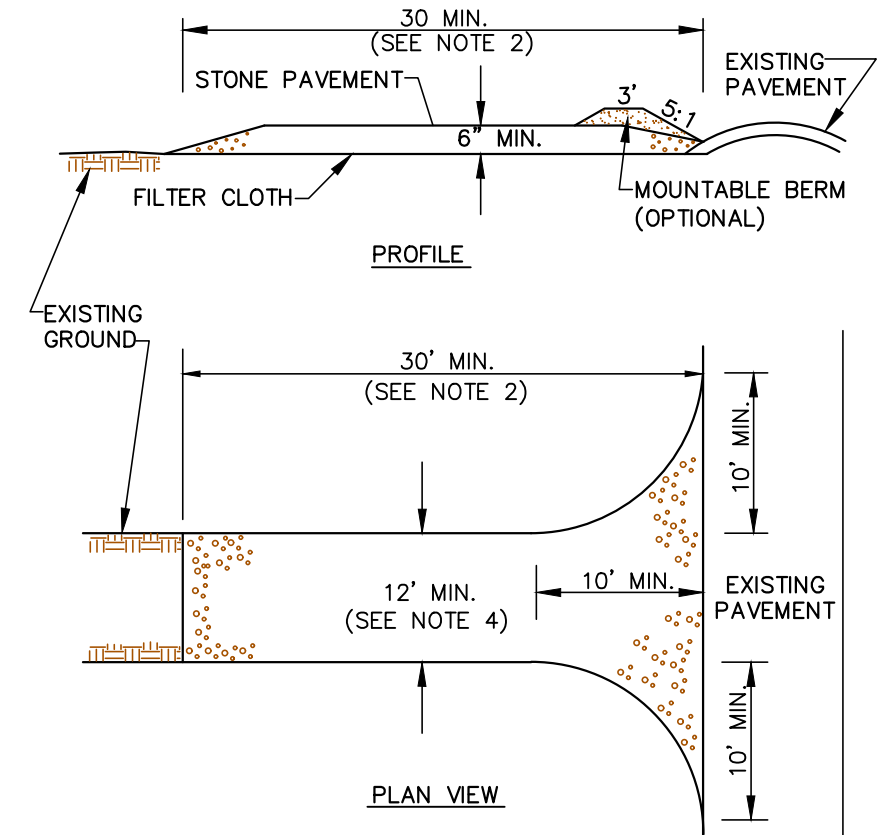
* THE SPECIES WILL BE EMERALD ARBORVITAE OR OTHER EVERGREEN PLANT OF A SIMILAR HEIGHT AND PROVIDING SIMILAR SCREENING

PROPOSED LIGHTING INFORMATION				
LUMINAIRE SCHEDULE				
QUANTITY	MANUFACTURER/MODEL No.	MOUNTING HEIGHT	COLOR TEMPERATURE	DESCRIPTION
2	*MIRADA SMALL WALL SCONCE (XWS)	10'	2700K	OUTDOOR LED WALL LIGHT
2	*MIRADA SMALL WALL SCONCE (XWS)	15'	6000	2700K OUTDOOR LED WALL LIGHT
1	*HINKLEY LIGHTING CASCADE 1830B2-LED TOP OF DOOR	800	2700K	OUTDOOR LED WALL SCONCE

* OR APPROVED EQUAL
** MAXIMUM COLOR TEMPERATURE = 2700K

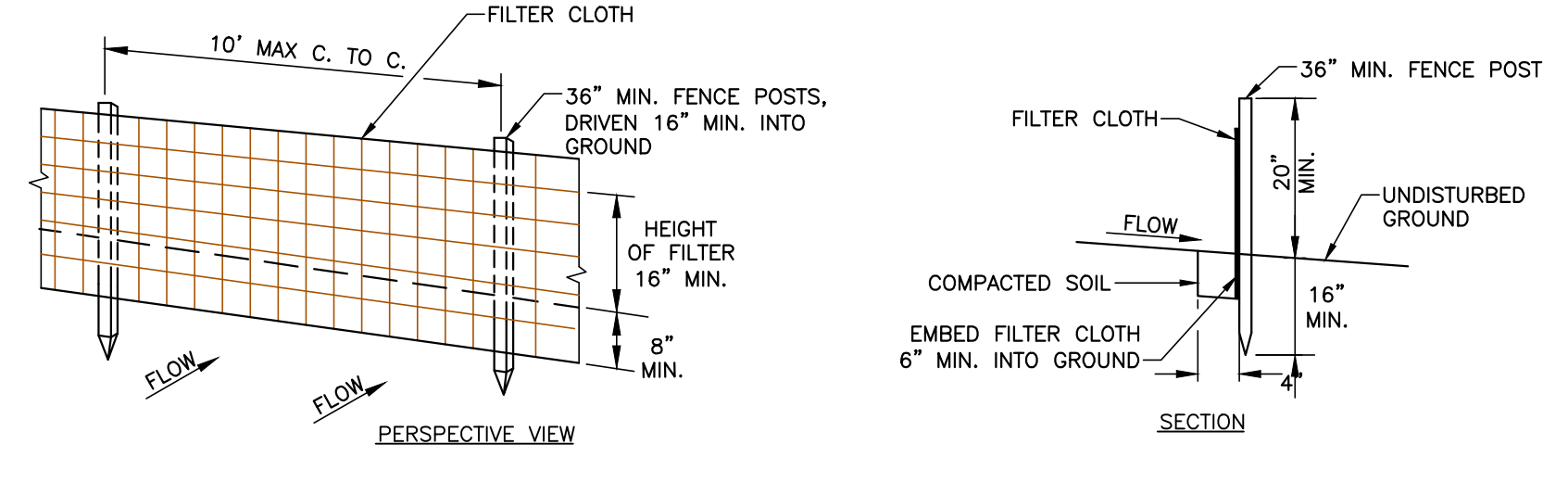


LIGHTING & LANDSCAPE PLAN
SCALE: 1" = 20'



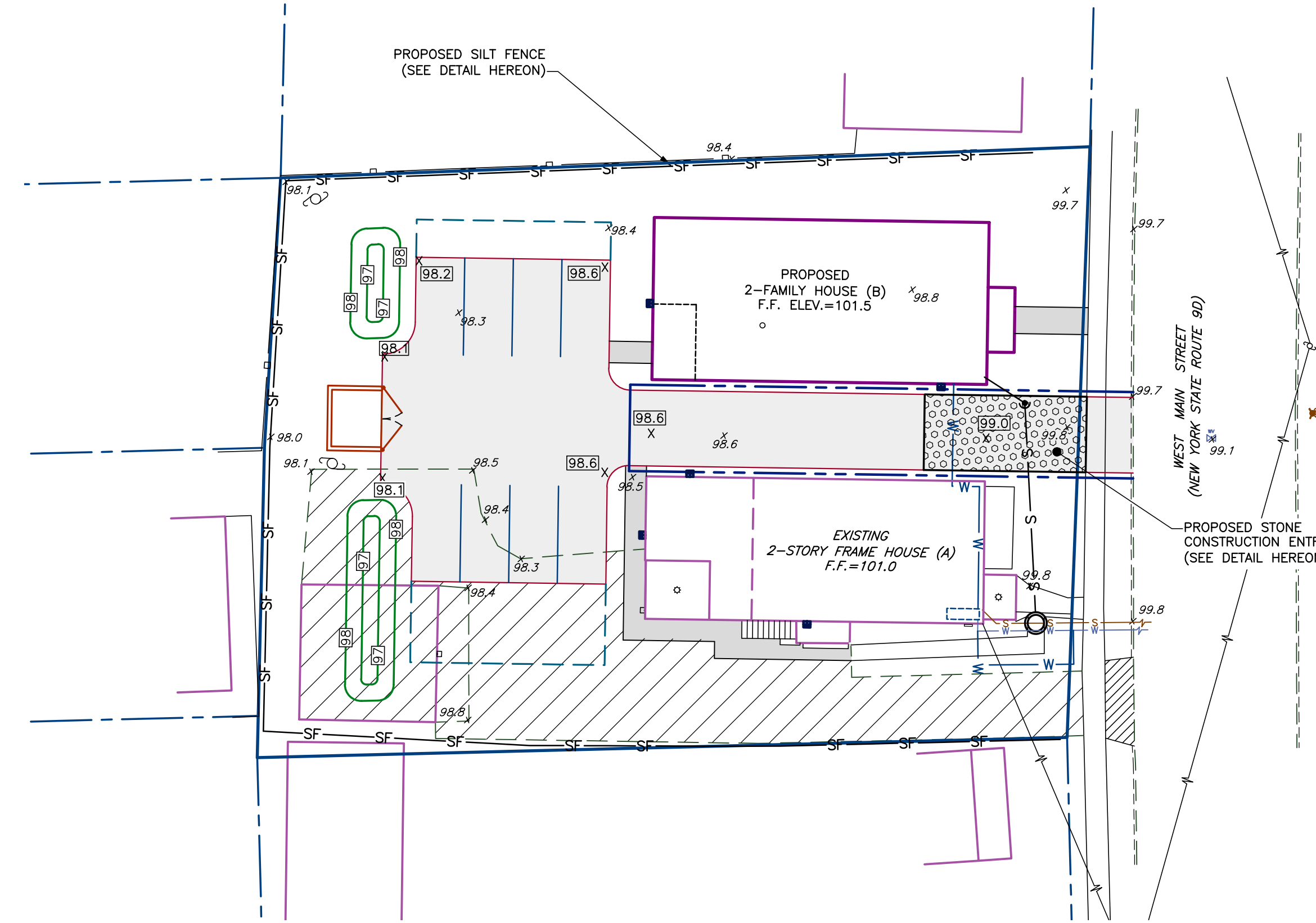
- CONSTRUCTION SPECIFICATIONS**
- STONE SIZE - USE 2" STONE, OR RECLAIMED OR RECYCLED CONCRETE EQUIVALENT.
 - LENGTH - NOT LESS THAN 50 FEET (EXCEPT ON A SINGLE RESIDENCE LOT WHERE A 30 MINIMUM LENGTH WOULD APPLY).
 - THICKNESS - NOT LESS THAN SIX (6) INCHES.
 - WIDTH - TWELVE (12) FOOT MINIMUM, BUT NOT LESS THAN THE FULL WIDTH AT POINTS WHERE INGRESS AND EGRESS OCCURS. TWENTY-FOUR (24) FOOT IF SINGLE ENTRANCE TO SITE.
 - FILTER CLOTH - WILL BE PLACED OVER THE ENTIRE AREA PRIOR TO PLACING OF STONE.
 - SURFACE WATER - ALL SURFACE WATER FLOWING OR DIVERTED TOWARD CONSTRUCTION ENTRANCES SHALL BE PIPED ACROSS THE ENTRANCE. IF PIPING IS IMPRACTICAL A MOUNTABLE BERM WITH 5:1 SLOPES WILL BE PERMITTED.
 - MAINTENANCE - THE ENTRANCE SHALL BE MAINTAINED IN A CONDITION WHICH WILL PREVENT TRACKING OR FLOWING OF SEDIMENT ONTO PUBLIC RIGHT-OF-WAY. ALL SEDIMENT SPILLED, DROPPED, WASHED OR TRACED ONTO PUBLIC RIGHT-OF-WAY MUST BE REMOVED IMMEDIATELY.
 - WHEN WASHING IS REQUIRED, IT SHALL BE DONE ON AN AREA STABILIZED WITH STONE AND WHICH DRAINS INTO AN APPROVED SEDIMENT TRAPPING DEVICE.
 - PERIODIC INSPECTION AND NEEDED MAINTENANCE SHALL BE PROVIDED AFTER EACH RAINFALL EVENT.

STABILIZED CONSTRUCTION ENTRANCE
NOT TO SCALE



- CONSTRUCTION NOTES FOR FABRICATED SILT FENCE**
- FILTER CLOTH TO BE FASTENED SECURELY TO WOVEN WIRE FENCE WITH TIES SPACED EVERY 24" AT TOP AND MID SECTION.
 - WHEN TWO SECTIONS OF FILTER CLOTH ADJOIN EACH OTHER THEY SHALL BE OVERLAPPED BY SIX INCHES AND FOLDED.
 - MAINTENANCE SHALL BE PERFORMED AS NEEDED AND MATERIAL REMOVED WHEN "BULGES" DEVELOP IN THE SILT FENCE.

SILT FENCE DETAIL
NOT TO SCALE



EROSION & SEDIMENT CONTROL PLAN
SCALE: 1" = 20'

REVISIONS	
DATE:	DESCRIPTION:
10-19-22	GENERAL REVISIONS PER VILLAGE COMMENTS

LEGEND	
	PROPERTY LINE
	ADJACENT LOT LINE
	EXISTING WATER LINE
	EXISTING SEWER LINE
	EXISTING CHAIN LINK FENCE
	EXISTING PVC FENCE
	EXISTING UTILITY POLE WITH OVERHEAD WIRES
	EXISTING HYDRANT
	EXISTING WATER VALVE
	EXISTING SPOT GRADE
	PROPOSED CONTOUR
	PROPOSED SPOT GRADE
	PROPOSED WATER LINE
	PROPOSED SEWER LINE
	PROPOSED STOCKADE FENCE
	PROPOSED SILT FENCE
	PROPOSED LIGHT
	PROPOSED FOOTCANDLE
	EXISTING TREE TO BE REMOVED
	PROPOSED TREE

POVALL ENGINEERING, PLLC



WILLIAM H. POVALL III, P.E.
N.Y.S.P.E. LICENSE #075020
3 NANCY COURT, SUITE 4
WAPPINGERS FALLS, NY 12590
TEL: (845) 897-8205
FAX: (845) 897-0042

LIGHTING & LANDSCAPING AND EROSION & SEDIMENT CONTROL PLAN FOR 2731 WEST MAIN STREET

VILLAGE OF WAPPINGERS FALLS
DUTCHESS COUNTY, NEW YORK

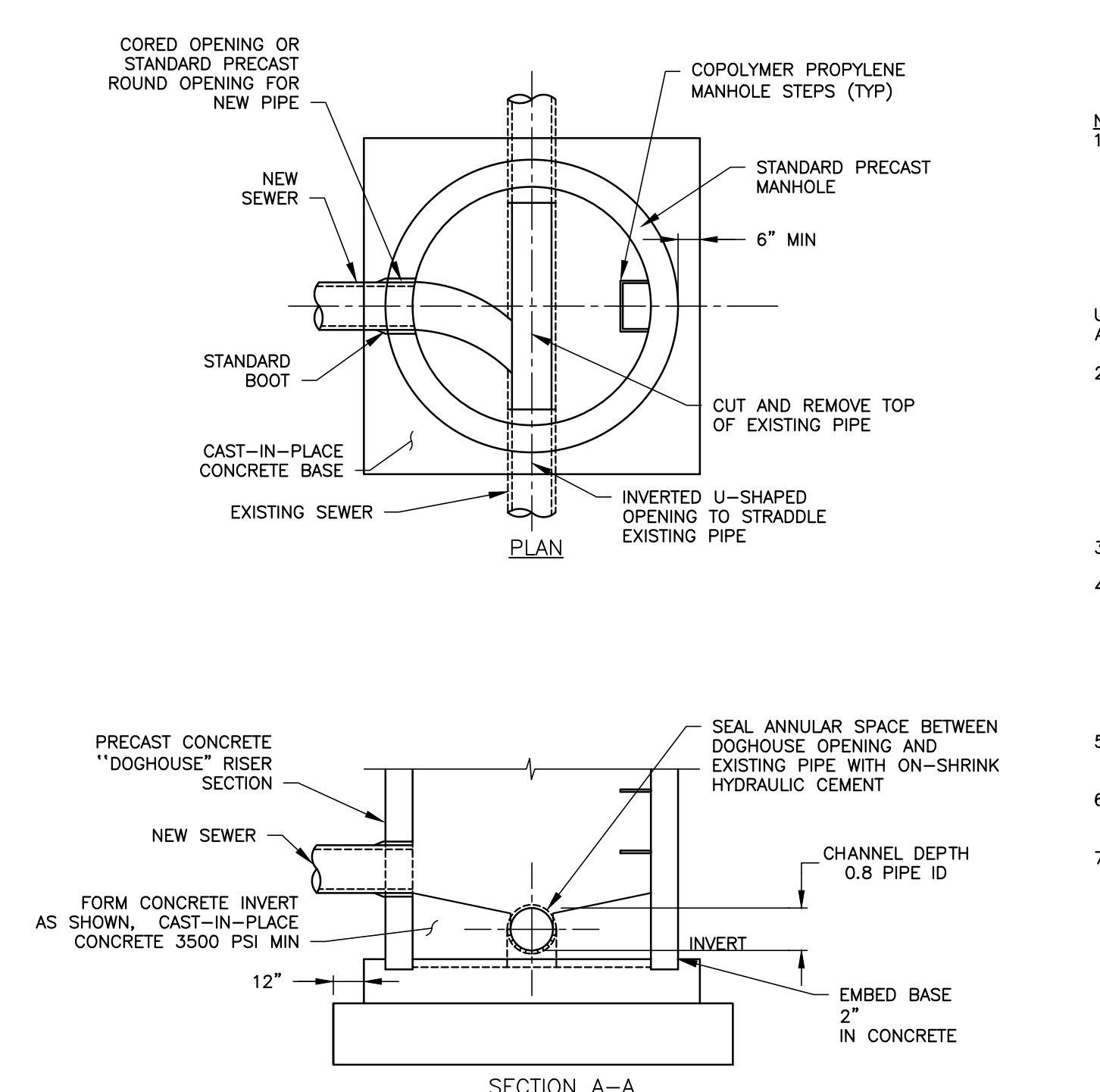
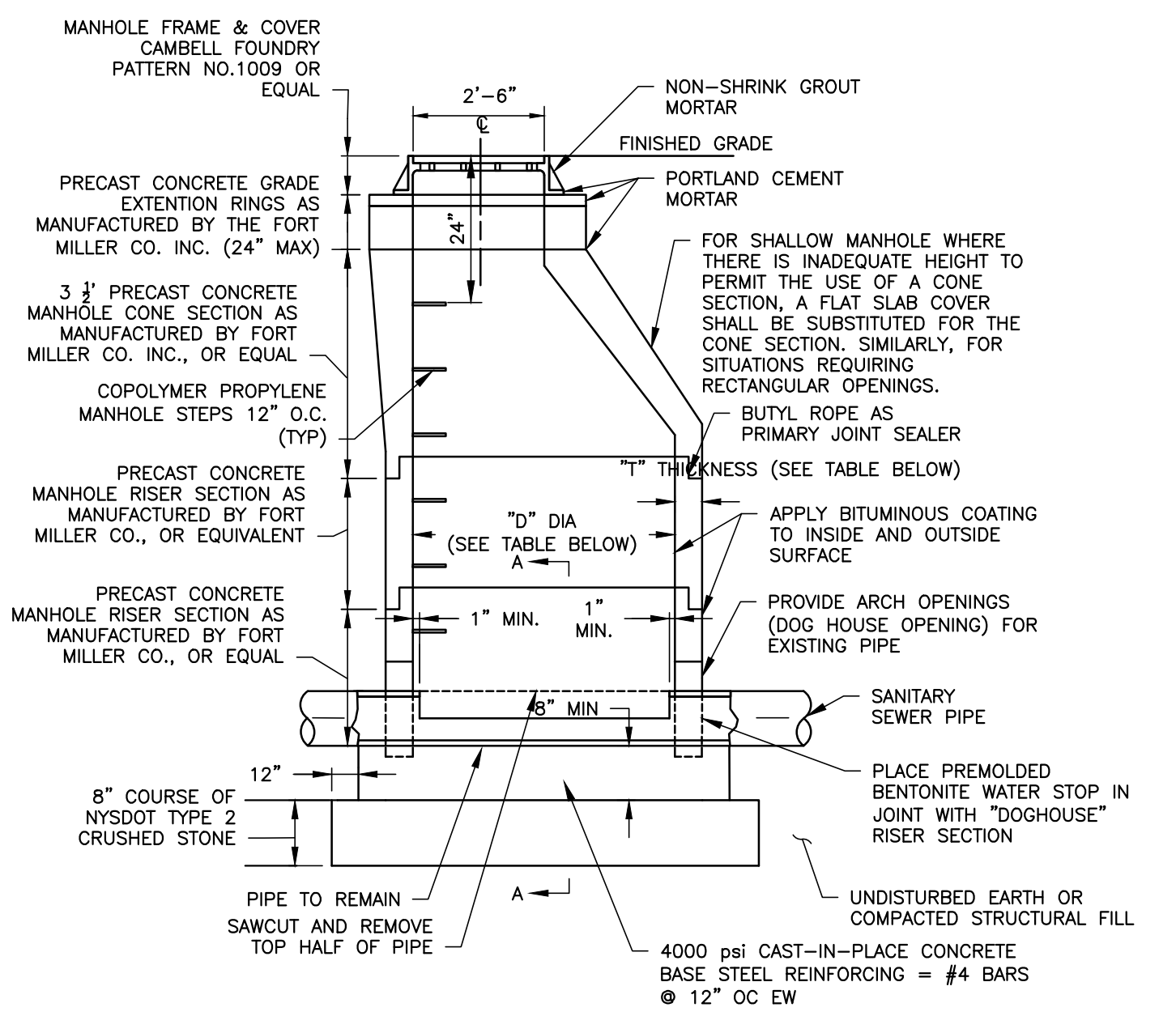
VILLAGE OF WAPPINGERS FALLS
PLANNING BOARD

FINAL APPROVAL DATED: _____

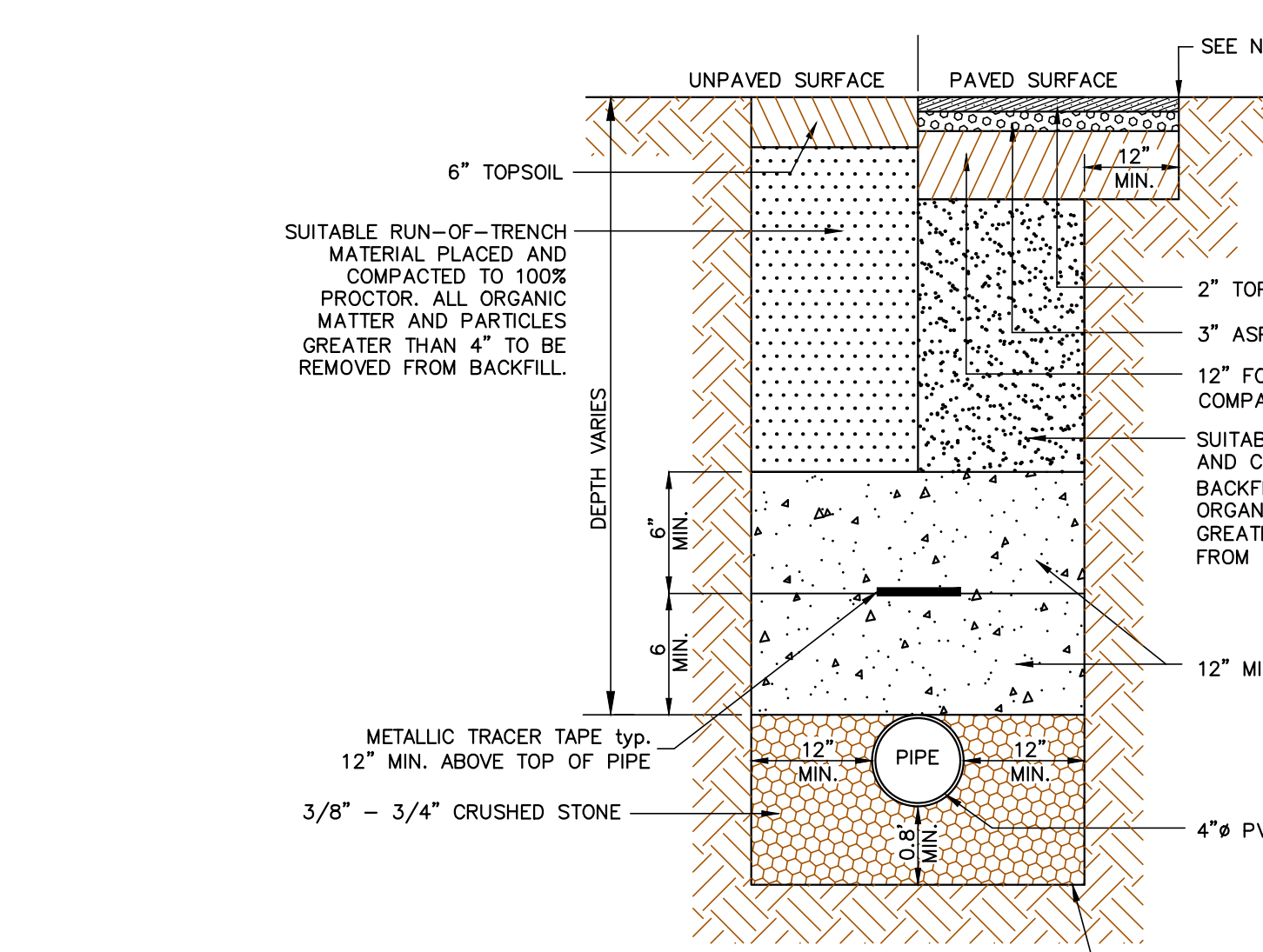
PB CHAIR: _____ DATE: _____

WITNESS: _____

JOB #:	2202
DATE:	09-14-22
SCALE:	AS SHOWN
LLE-1	
SHEET 2 OF 3	



PRECAST CONCRETE DOGHOUSE INSERTION MANHOLE
NOT TO SCALE

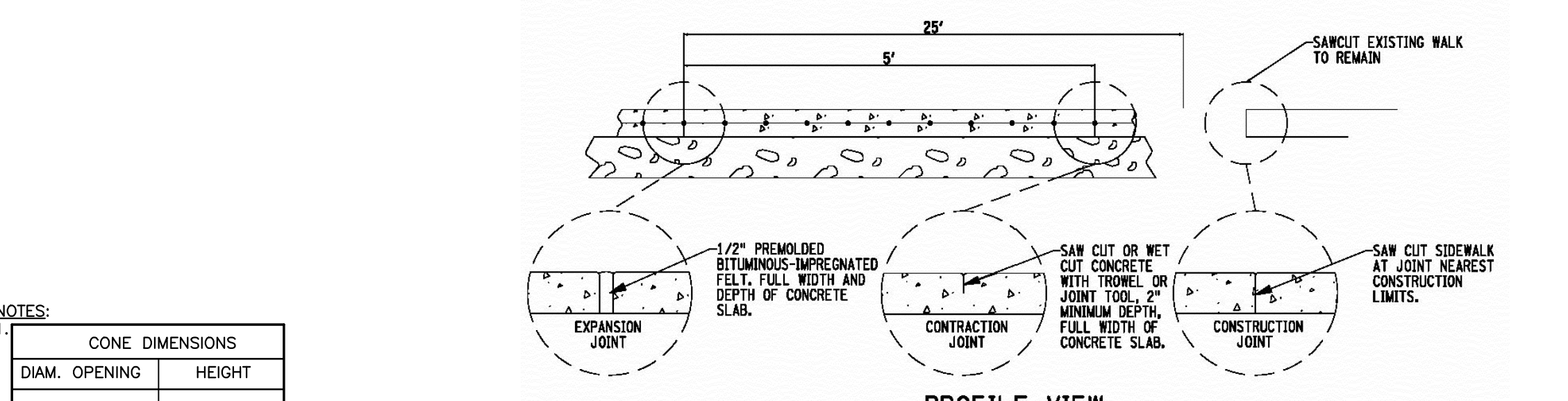
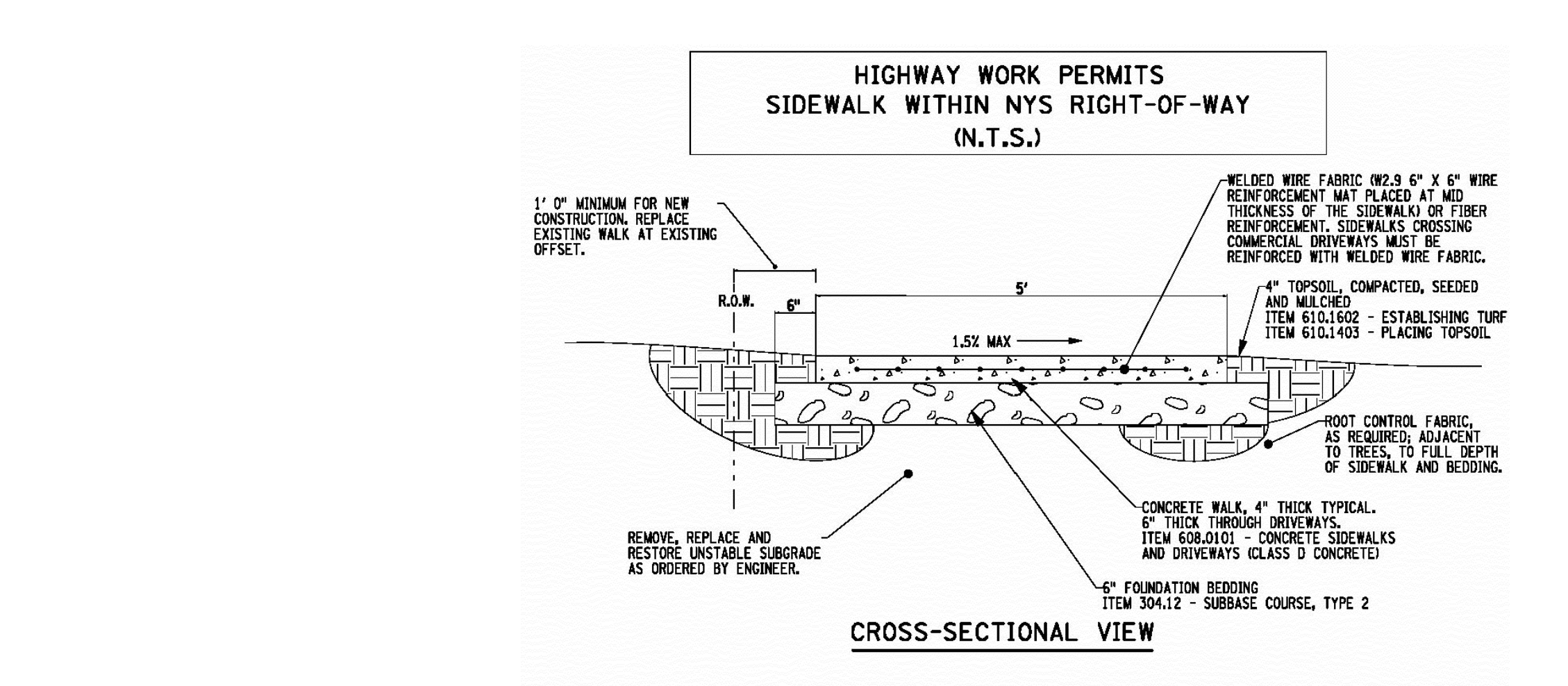


- NOTES:
- SAW CUT 12" MIN. FROM EDGE OF TRENCH IN ALL PAVED AREAS.
 - PAVEMENT SECTION IN AREAS OF NEW CONSTRUCTION SHALL CONFORM TO TYPICAL PAVEMENT SECTION.
 - BACKFILL MATERIAL UNDER PAVED SURFACES SHALL BE RUN-OF-BANK (R.O.B.) GRAVEL AND BE PLACED IN HORIZONTAL LIFTS NOT EXCEEDING 8 INCHES IN THICKNESS PRIOR TO COMPACTION OR STONE BACK FILL. ALL COMPACTION SHALL BE TO A MINIMUM 95% OF STANDARD PROCTOR MAXIMUM DENSITY. NO STONE GREATER THAN 2 INCHES IN SIZE SHALL BE PLACED IN TRENCH.
 - BACKFILL MATERIAL UNDER UNPAVED SURFACES SHALL BE RUN-OF-TRENCH MATERIAL AND BE PLACED IN HORIZONTAL LIFTS NOT EXCEEDING 8 INCHES IN THICKNESS PRIOR TO COMPACTION. IF EXCAVATED MATERIAL IS UNSUITABLE FOR BACKFILLING, R.O.B. GRAVEL SHALL BE USED. NO STONE GREATER THAN 4 INCHES IN SIZE SHALL BE PLACED IN TRENCH.
 - WHEN PLACING FILL OR BACKFILL AROUND CULVERTS AND PIPES, LIFTS SHALL BE PLACED TO PROGRESSIVELY BURY THE PIPE OR CULVERT TO EQUAL DEPTHS ON BOTH SIDES.

SANITARY SEWER TRENCH DETAIL
NOT TO SCALE

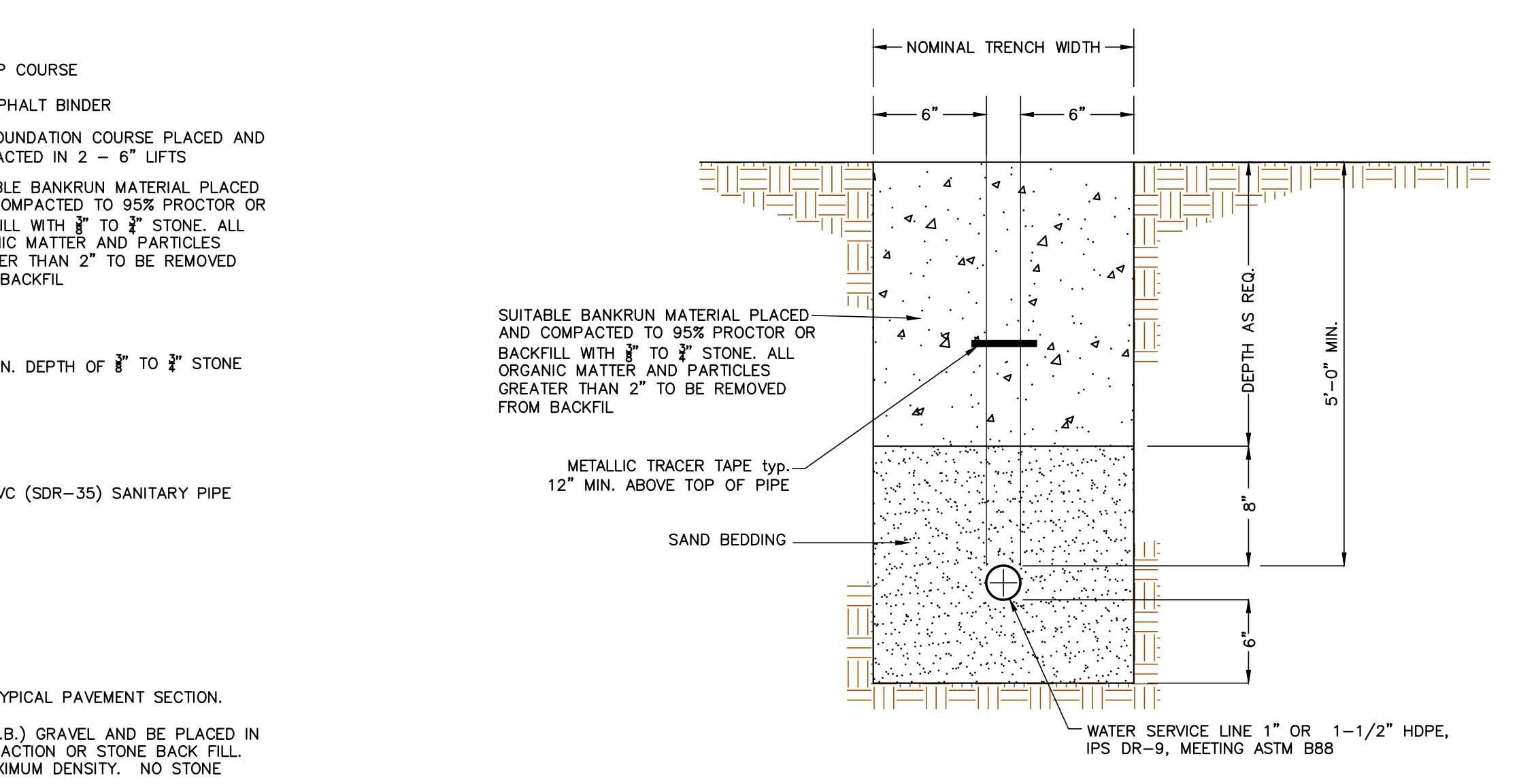
REVISIONS

DATE:	DESCRIPTION:
09-14-22	GENERAL REVISIONS PER VILLAGE COMMENTS



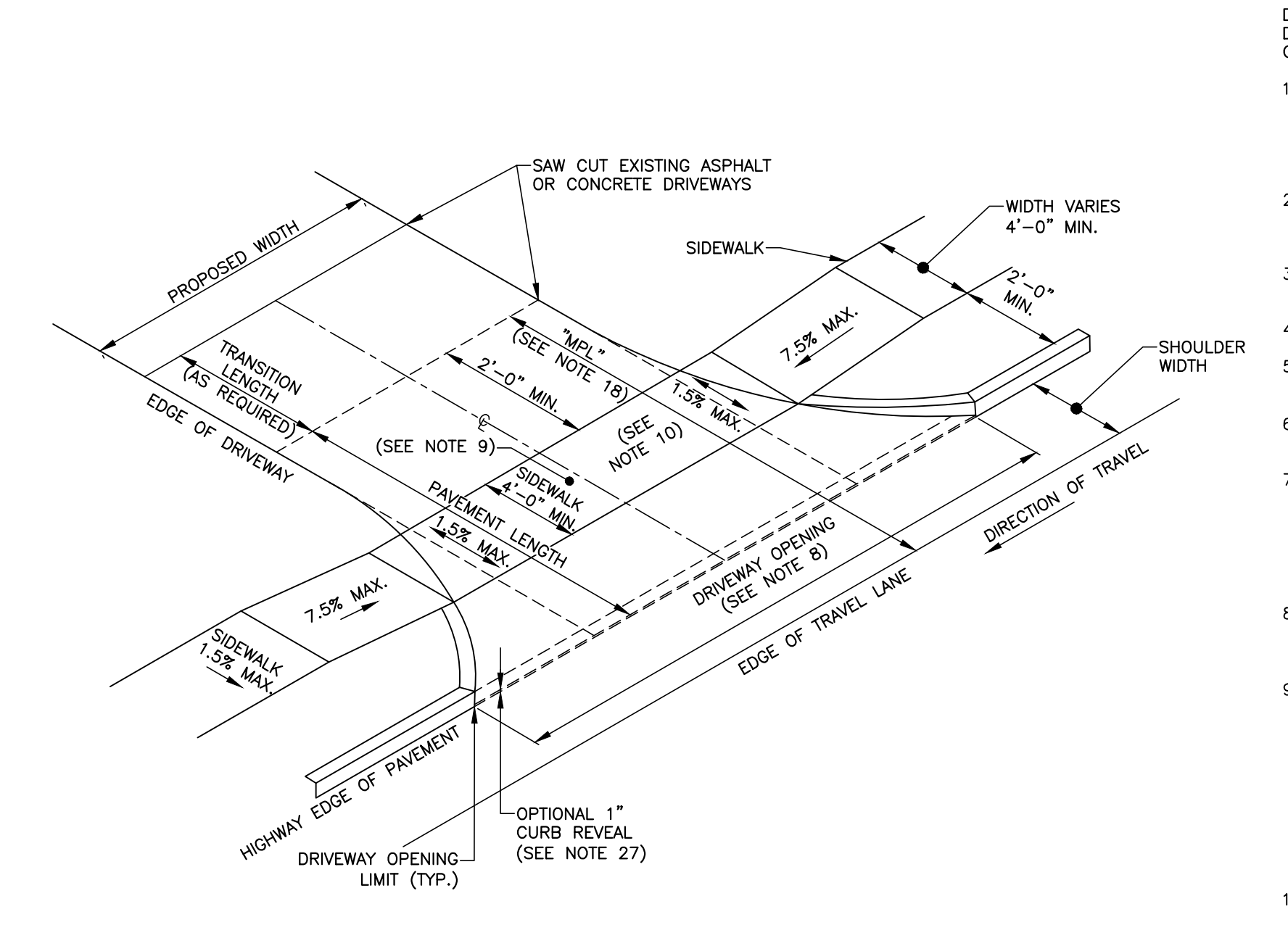
- NOTES:
- THE GRAVEL OR STONE BASE SHALL BE PLACED ON A WELL GRADED AND COMPACTED SUBGRADE. THE GRAVEL OR STONE BASE SHALL BE THOROUGHLY COMPACTED.
 - ALL EXPOSED SURFACES SHALL BE BROOMED AND EDGES FINISHED WITH A 1/4" RADIUS EDGING TOOL. THE FINISHED CONCRETE SURFACE SHALL BE TREATED WITH A CLEAR, NON YELLOWING CURING COMPOUND.
 - NO CONCRETE SHALL BE PLACED BEFORE APRIL 20TH, OR AFTER OCTOBER 31ST. NO CONCRETE SHALL BE PLACED UNLESS THE AMBIENT AIR AND BASE MATERIAL SURFACE TEMPERATURE IS ABOVE 40 DEGREES.
 - ALL WORK SHALL CONFORM TO NYSDOT SPECIFICATIONS.
 - ALL CONTACT NYSDOT ENGINEER IF PROPOSED SIDEWALK IS LESS THAN 5' WIDE.
 - RUNNING SLOPE/GRADE WHERE HWY GRADE IS 6% OR LESS: 4:5% HWY EDGE OF PAVT GRADE IS MAX. RUNNING SLOPE/GRADE WHERE HWY GRADE IS 6% OR MORE: 4:5% HWY EDGE OF PAVT GRADE IS MAX.

REPLACEMENT CONCRETE SIDEWALK DETAIL
NOT TO SCALE

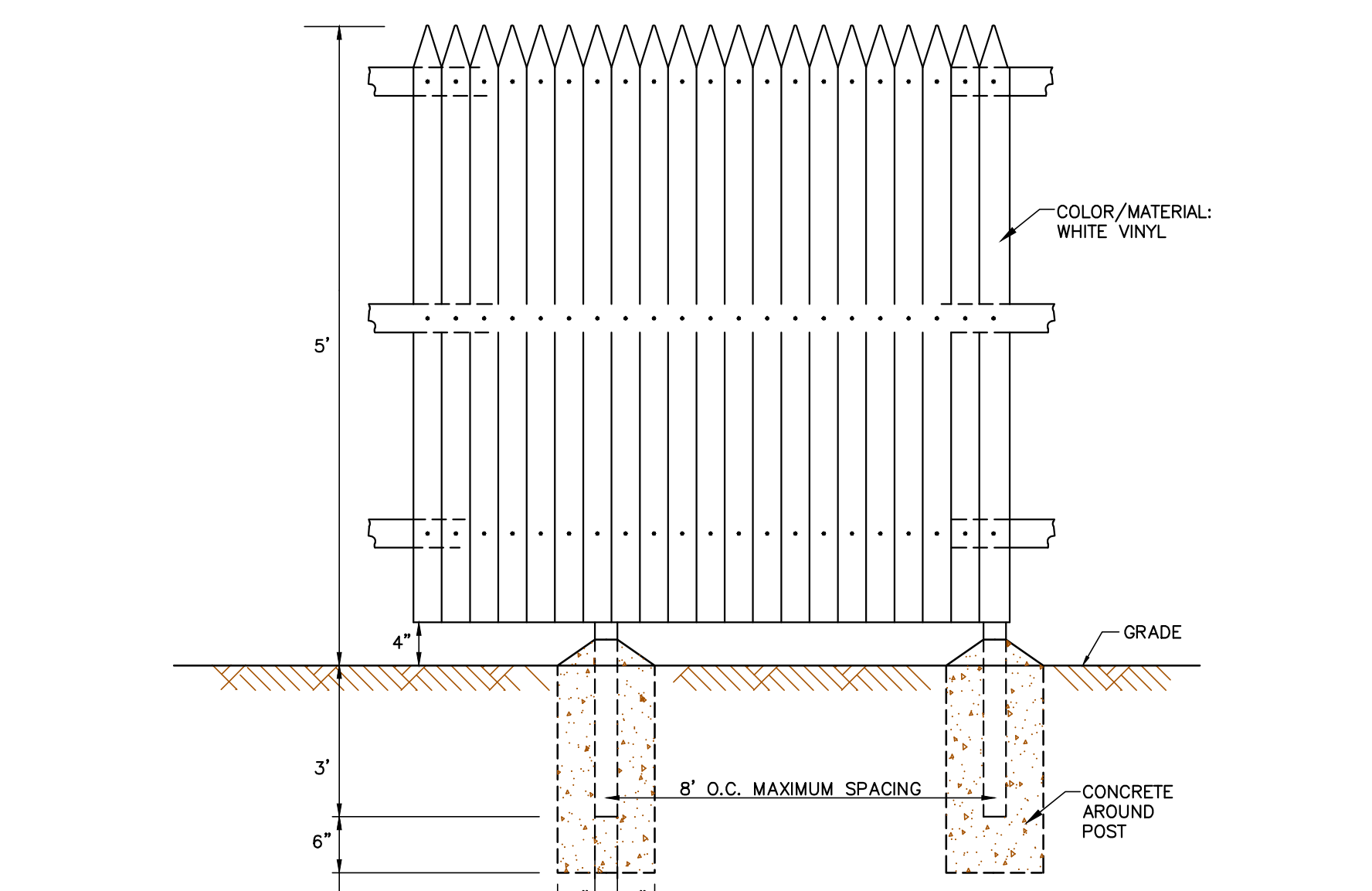


- NOTES:
- ALL BACKFILL AND PAVEMENT MATERIAL SHALL BE APPROVED BY THE TOWN HIGHWAY SUPERINTENDENT AND/OR TOWN ENGINEER PRIOR TO PLACEMENT. AS FIELD CONDITIONS WARRANT, THE ENGINEER AND/OR HIGHWAY SUPERINTENDENT MAY REQUIRE FOUNDATION STONE, AND/OR RUN-OF-BANK GRAVEL BACKFILL IF UNACCEPTABLE OR INSUFFICIENT TRENCH MATERIAL IS ENCOUNTERED.

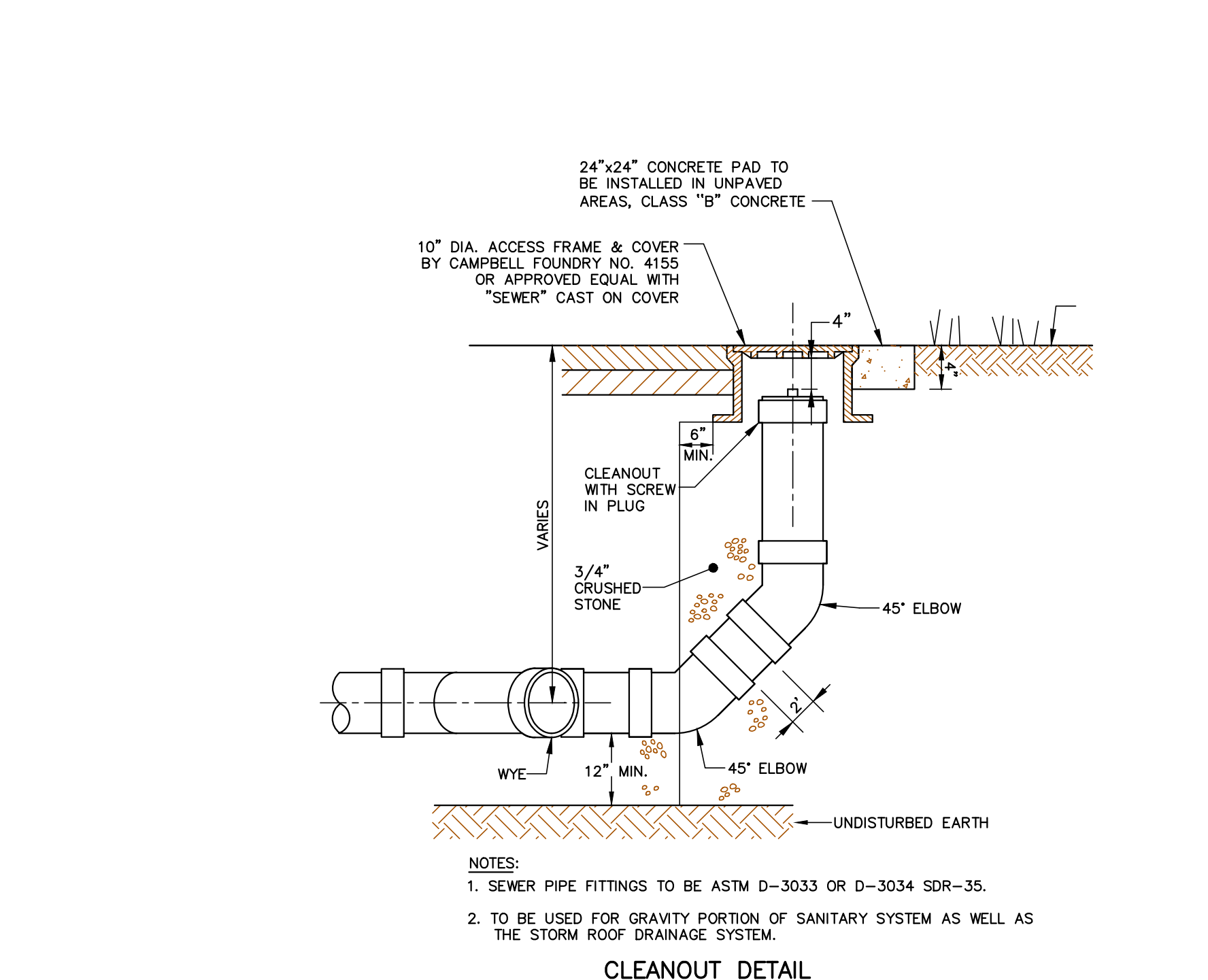
TYPICAL WATER SERVICE TRENCH DETAIL
NOT TO SCALE



NEW YORK STATE RESIDENTIAL TYPE 2 DRIVEWAY ENTRANCE DETAIL
NOT TO SCALE

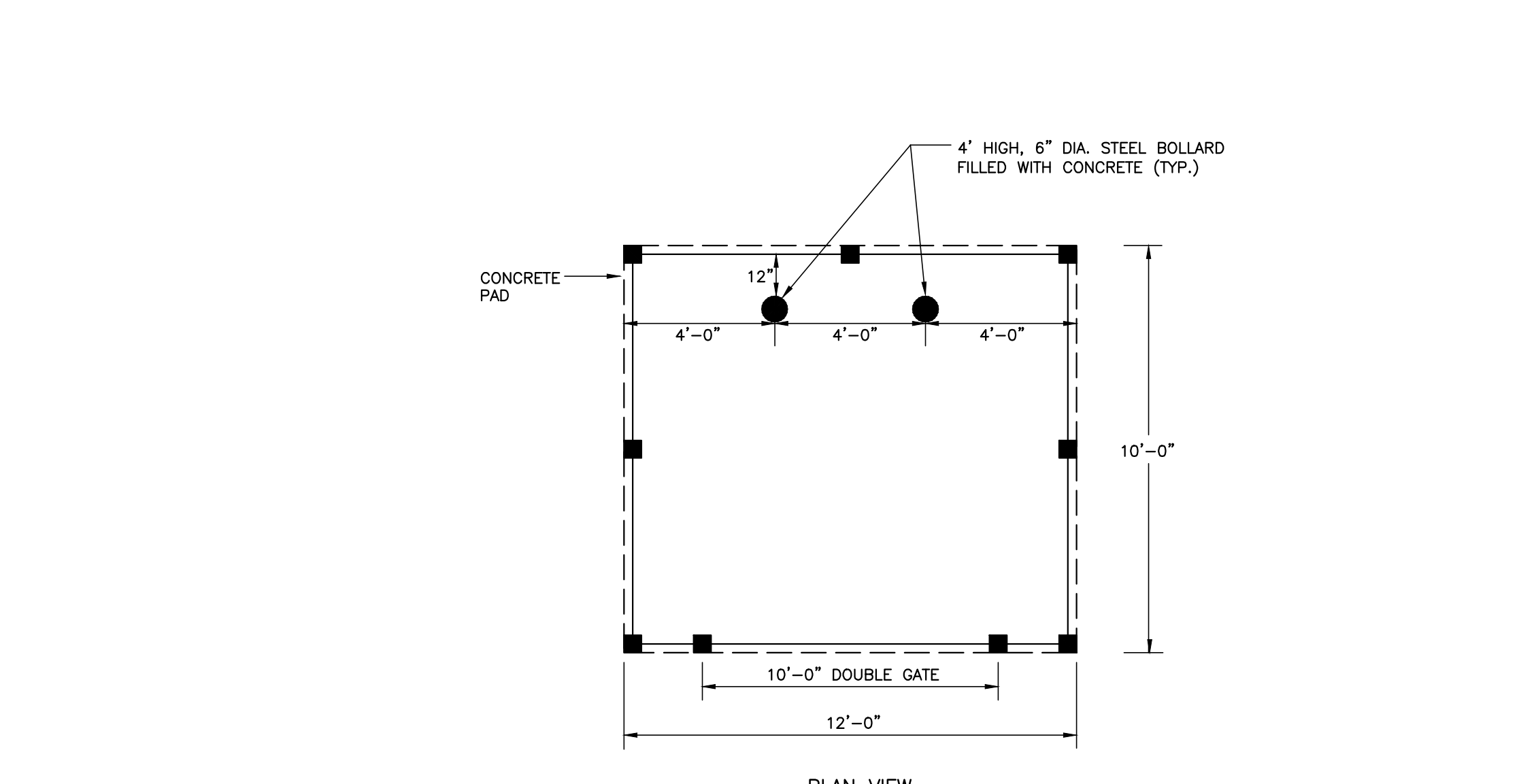


5' HIGH STOCKADE FENCE DETAIL
NOT TO SCALE

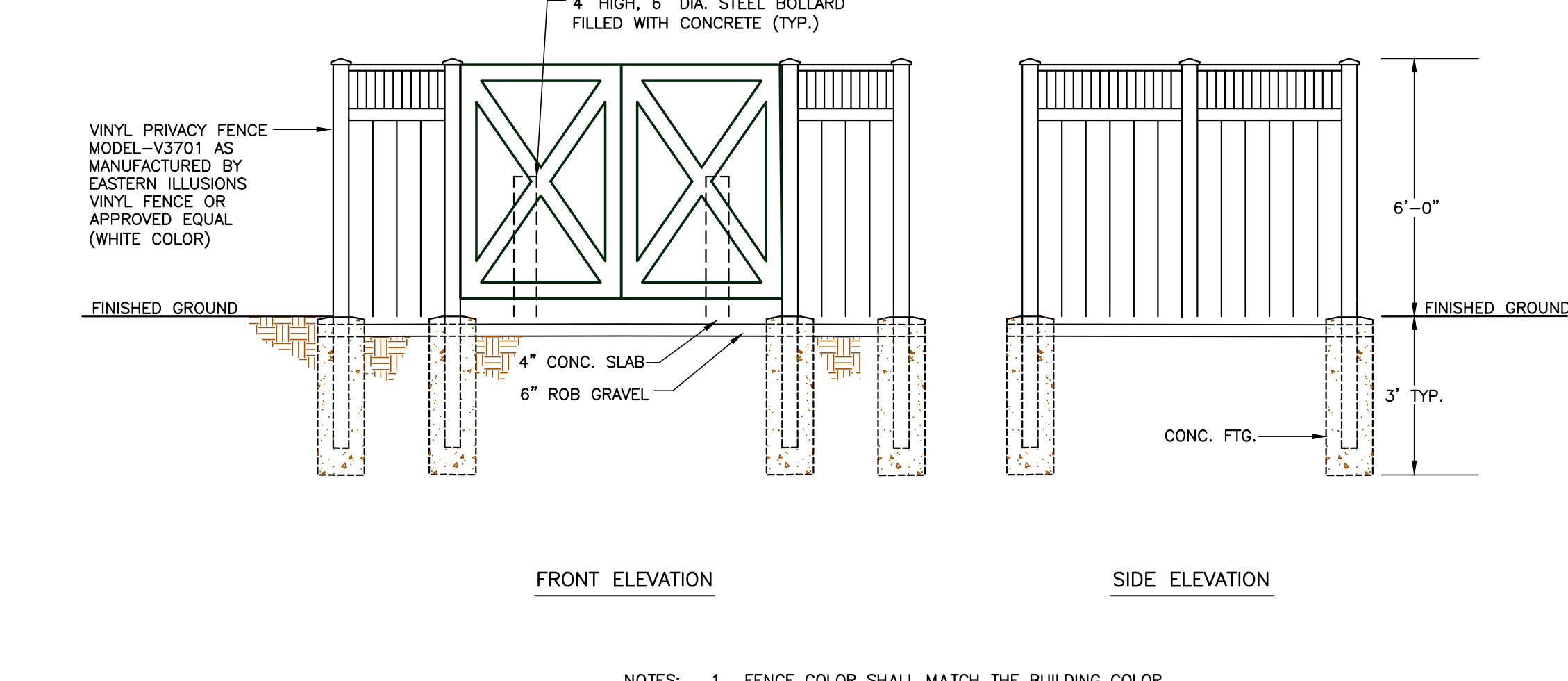


CLEANOUT DETAIL
NOT TO SCALE

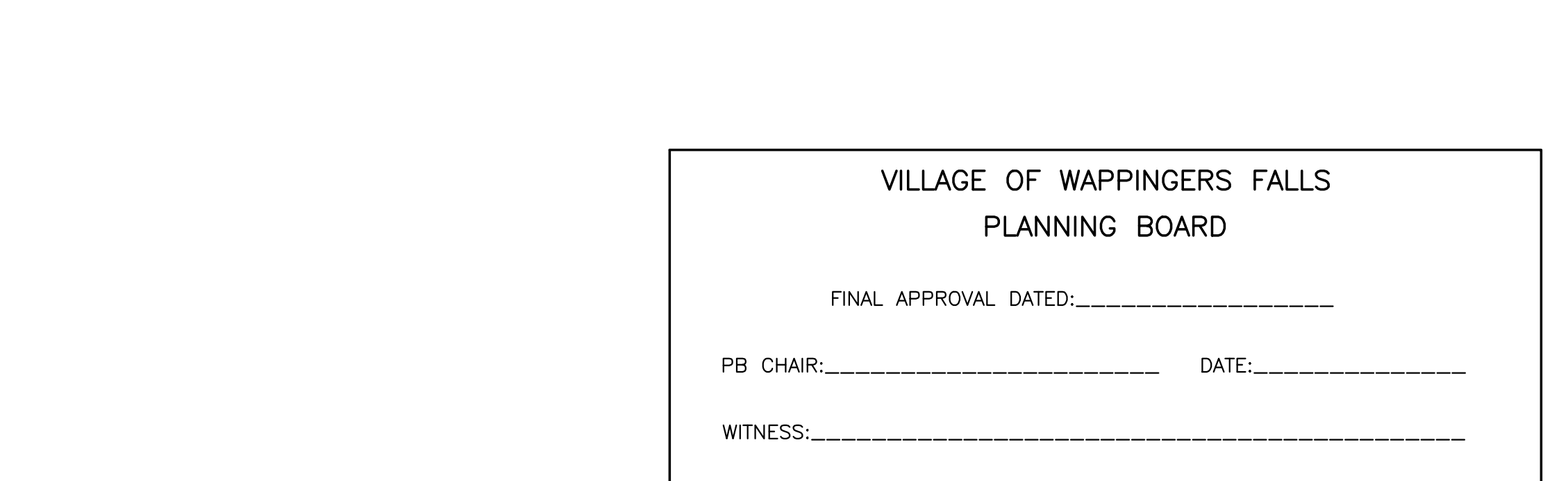
- RESIDENTIAL TYPE 2 DRIVEWAY NOTES:
- DRIVEWAY ENTRANCES SHALL BE IN ACCORDANCE WITH NEW YORK STATE DEPARTMENT OF TRANSPORTATION STANDARDS FOR RESIDENTIAL AND MINOR COMMERCIAL DRIVEWAYS 608-03.
- ALL AREAS WITHIN THE NYS RIGHT-OF-WAY DISTURBED DURING CONSTRUCTION SHALL BE PERMANENTLY STABILIZED WITH TOPSOIL, SEED, AND MULCH, IN ACCORDANCE WITH THE NEW YORK GUIDELINES FOR URBAN EROSION AND SEDIMENT CONTROL SPECIFICATIONS, OR AS DIRECTED BY THE NYSDOT REPRESENTATIVE.
 - MAINTENANCE AND PROTECTION OF TRAFFIC DURING CONSTRUCTION SHALL BE IN CONFORMANCE WITH THE NEW YORK STATE MANUAL OF UNIFORM TRAFFIC CONTROL DEVICES.
 - DRIVEWAY MUST BE PAVED FOR A MINIMUM OF 10 FT. BACK FROM THE EDGE OF ROAD.
 - DRIVEWAY MUST BE A MINIMUM OF 5 FT. FROM THE PROPERTY LINE.
 - THE MINIMUM ACCEPTABLE THICKNESS OF THE DRIVEWAY MATERIAL SHALL BE 3" OF ASPHALT CONCRETE ON A 6" GRAVEL BASE (ITEM 4).
 - CENTERLINE OF THE DRIVEWAY MUST BE PERPENDICULAR TO EDGE OF THE STATE HIGHWAY.
 - WHERE THERE ARE CONSTRAINT THAT PREVENT THE CONSTRUCTION OF THE DRIVEWAY OPENING USING EITHER OF THE LAYOUT METHODS, THE ENGINEER MAY SPECIFY A SMALL CONVEY CURB RADIUS OF 2' (OR A 1/2" BULL NOSE" CURB ALONG LOW SPEED HIGHWAYS). PROVIDED THE DRIVEWAY OPENING MEETS THE REQUIREMENT SO OF THE DRIVEWAY TABLES.
 - ANY RCC SIDEWALK WHICH CROSSES A DRIVEWAY SHALL HAVE A MINIMUM THICKNESS OF 6" AND INCLUDE STEEL MESH REINFORCEMENT WITH 3" OF TOP COVER.
 - TO PREVENT DRIVEWAY GRADES FROM EXCEEDING THE VALUES IN TABLE 2 - "MAXIMUM DRIVEWAY SLOPE", IT MAY BE NECESSARY TO DEPRESS THE SIDEWALK ACROSS THE DRIVEWAY. SIDEWALK RAMPS SHALL HAVE THE LEAST RUNNING SLOPE POSSIBLE, WITH A MAXIMUM DESIGN AND LAYOUT SLOPE OF 7.5%. THE RUNNING SLOPE FOR WORK ACCEPTANCE SHALL BE A MAXIMUM OF 8.3% WHERE EXISTING CONDITIONS DO NOT ALLOW THE CONSTRUCTION OF A SIDEWALK RAMP AT 8.3% OR LESS RUNNING SLOPE. THE RAMP LENGTH SHALL NOT BE REQUIRED TO EXCEED 15'-1" FOR DESIGN AND LAYOUT. THE RAMP LENGTH SHALL NOT BE REQUIRED TO EXCEED 15'-0" FOR WORK ACCEPTANCE.
 - WHERE DRAINAGE IS CARRIED ALONG THE CURB, CONSTRUCT THE DRIVEWAY WITH A SHORT UPGRADE TO PREVENT RUNOFF FROM PONDING AT THE DRIVEWAY ENTRANCE (FLAT DRIVEWAY) OR RUNNING DOWN THE DRIVEWAY (DOWNHILL DRIVEWAY SLOPE) IF CONDITIONS MAKE THE ADDITION OF A SHORT UPGRADE IMPRACTICAL. USE 1" CURB REVEAL AND CONTINUE CURB ACROSS THE DRIVEWAY OPENING. TYPICALLY, CURB REVEAL WILL NOT BE CONSTRUCTED IN RURAL AREAS. IF CURB REVEAL IS SPECIFIED FOR A SPECIFIC DRIVEWAY, IT WILL BE NOTED IN THE DRIVEWAY TABLE OF THE CONTRACT PLANS IN THE "COMMENTS" COLUMN.



PAVEMENT SECTION DETAIL
NOT TO SCALE



INTERNAL SITE CONCRETE SIDEWALK DETAIL
NOT TO SCALE



REFUSE ENCLOSURE DETAIL
NOT TO SCALE

VILLAGE OF WAPPINGERS FALLS
PLANNING BOARD

FINAL APPROVAL DATED: _____

PB CHAIR: _____ DATE: _____

WITNESS: _____

DETAILS FOR
2731 WEST MAIN STREET
VILLAGE OF WAPPINGERS FALLS
DUTCHESS COUNTY, NEW YORK

JOB #: 2202
DATE: 04-28-22
SCALE: N.T.S.
D-1
SHEET 3 OF 3

WILLIAM H. POVALL III, P.E.
N.Y.S.P.E. LICENSE #075020

3 NANCY COURT, SUITE 4
WAPPINGERS FALLS, NY 12590

TEL: (845) 897-9205
FAX: (845) 897-0042

STATE OF NEW YORK
WILLIAM H. POVALL III, P.E.
REGISTERED PROFESSIONAL ENGINEER



VILLAGE OF WAPPINGERS FALLS

BUILDING DEPARTMENT
OFFICE OF CODE ENFORCEMENT
OFFICE OF THE FIRE INSPECTOR
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR PLANNING BOARD REVIEW

Submission Date: 09/14/22

Date of Meeting: 10/06/22

Meetings are held at the American Legion Hall, 7 Spring Street on the first Thursday of the month at 7:00 p.m. All information must be completely filled out and returned no later than 15 business days before meeting date. For the complete list of Planning Meeting Dates and Deadlines go to the Building, Planning and Zoning page on the village website www.wappingersfallsny.gov.

A filing fee is required in connection with any application to the Planning Board for approval.

The Planning Board is responsible for the review and approval of all applications concerning:

- Opening a new business in the Village
- Installing a new sign
- Building a new structure in a commercial zone
- Subdivision / Site Review/ Lot Line Adjustment

Items to be submitted for review: (Only items pertaining to project)

- PDF Emailed to Building Dept. and Ten (10) hard copy sets of construction/site/elevation/plans - Engineer drawings showing all areas to be affected. Or a sketch of the proposed floor plan layout (*All sets of plans must be folded*)
- Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form (*The applicant must provide consent form, from homeowner authorizing him/her to file for Planning Review*)
- Application fee
- Application for proposed sign - Including Renderings/sketch of proposed sign/ Elevation/size/ exact color samples.

(Separate Application)



VILLAGE OF WAPPINGERS FALLS

BUILDING DEPARTMENT
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR PLANNING BOARD REVIEW

All information must be completely filled out and returned no later than the stated submission date.

Date Submitted: 9/14/22

Date of Meeting: 10/06/22

Property Identification:

Address: 40 CLAPP AVE

Zoning District: VR

Existing site area: 9,912.8 SF

Owner Information:

Name: MARCO QUEZADA

Address: 40 CLAPP AVE

City: WAPPINGERS FALLS

State: NY

Zip: 12590

Contact Numbers: (H) _____ (C) 845.401.5672

(E-mail) _____

Applicant Information:

(Please provide if someone other than the property owner is the applicant)

Name: HILDA DUQUE

Address: 18 MARKET ST

City: WAPPINGERS FALLS

State: NY

Zip: 12590

Contact Numbers: (H) _____ (C) 845.453.6208

E-mail Address: hduques@gmail.com

Lead Design Professional: (If applicable)

(Indicate the primary design professional associated with this application)

Name: SAME AS APPLICANT

Title: _____

Architect Engineer

Company: _____

Address: _____

Telephone #: _____

E-mail Address: _____



VILLAGE OF WAPPINGERS FALLS
APPLICATION FOR PLANNING BOARD REVIEW
(Continued)

Proposed Site:

(Property where improvements are proposed)

Existing Use(s): TWO FAMILY - RESIDENCE

Proposed square footage: 2,056 SF ADDITION

Project Description : *(Please print or type)*

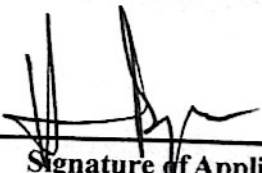
(Describe the project in detail indicating all areas of work, type(s) of improvement and materials to be used as a part of the proposed improvements. Use additional sheets if necessary.)

PROPOSED WORK INVOLVES THE ADDITION OF : TWO DWELLING UNITS ON NEW SECOND LEVEL. ADDITIONAL TWO EGRESS STAIRS, REAR AND FRONT OF STRUCTURE . ADDITIONAL PARKING PROVIDED . SEE ATTACHED PROPOSED ARCHITECTURAL PLAN.

Items to be submitted for review: (Only items pertaining to project)

- Ten (10) sets of plans.
- Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form
- Application for proposed sign
- Application Fee
- Proof that the taxes, utility bills and fines for the property are paid in full.

With the completion of this application, I hereby state that the information provided and all Accompanying documentation is accurate to the best of my knowledge, and that the attached plans contain all information required by the appropriate checklist.



Signature of Applicant Signed

9/10/22

Date

Office use only:

[] **FEE :** _____ **Receipt No. :** _____ **Cash / Check #** _____ **Date:** _____

Revised by : _____ **Revision date :** _____
Zoning Administrator/Code Enforcement Officer

617.20
Appendix B
Short Environmental Assessment Form

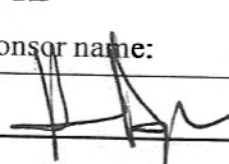
Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: <p style="text-align: center;">40 CLAPP ADDITION</p>			
Project Location (describe, and attach a location map): <p style="text-align: center;">40 CLAPP AVE, WAPPINGERS FALLS NY 12590</p>			
Brief Description of Proposed Action: <p>PROPOSED WORK INVOLVES THE ADDITION OF : TWO DWELLING UNITS ON NEW SECOND LEVEL. ADDITIONAL TWO EGRESS STAIRS, REAR AND FRONT OF STRUCTURE . ADDITIONAL PARKING PROVIDED . SEE ATTACHED PROPOSED ARCHITECTURAL PLAN.</p>			
Name of Applicant or Sponsor: <p style="text-align: center;">HILDA DUQUE</p>		Telephone: 845.453.6208 E-Mail: hduques@gmail.com	
Address: 18 MARKET ST			
City/PO: <p style="text-align: center;">WAPPINGERS FALLS</p>		State: NY	Zip Code: 12590
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO	YES
		X	
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO	YES
		X	
3.a. Total acreage of the site of the proposed action?		.23 acres	
b. Total acreage to be physically disturbed?		.0149 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.23 acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
Urban	Rural (non-agriculture)	Industrial	Commercial
Forest Agriculture Parkland		Aquatic	Residential (suburban)
		Other (specify): _____	

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
		<input checked="" type="checkbox"/>	
b. Consistent with the adopted comprehensive plan?		<input checked="" type="checkbox"/>	
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
			<input checked="" type="checkbox"/>
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>		
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>		
			<input checked="" type="checkbox"/>
b. Are public transportation service(s) available at or near the site of the proposed action?			<input checked="" type="checkbox"/>
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>		
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ _____	NO	YES	
		<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
			<input checked="" type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
			<input checked="" type="checkbox"/>
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>		
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>		
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input checked="" type="checkbox"/>		
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:	NO	YES	
	<input checked="" type="checkbox"/>		
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: Shoreline Forest Agricultural/grassland Early mid-successional Wetland			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input checked="" type="checkbox"/>		
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>		
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES	
	<input checked="" type="checkbox"/>		
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>		
b. Will storm water discharges be directed to established conveyance systems off and storm drains)? If Yes, briefly describe: STORM WATER WILL BE DIRECTED TO EXISTING VILLAGE STORM DRAINS.			

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size:	NO	YES
_____	<input checked="" type="checkbox"/>	
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
_____	<input checked="" type="checkbox"/>	
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
_____	<input checked="" type="checkbox"/>	
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>HILDA DUQUE</u>	Date: <u>9/10/22</u>	
Signature: 		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	
7. Will the proposed action impact existing:		
a. public / private water supplies?	<input checked="" type="checkbox"/>	
b. public / private wastewater treatment utilities?	<input checked="" type="checkbox"/>	
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input checked="" type="checkbox"/>	
11. Will the proposed action create a hazard to environmental resources or human health?	<input checked="" type="checkbox"/>	

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. **Part 3** should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)



VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning
2582 South Avenue
Wappingers Falls, NY 12590
Phone: (845) 297-5277 Fax: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

CONSENT FORM

Name of property owner: MARCO QUEZADA

Address of property owner: 40 CLAPP AVE.

City: WAPPINGERS FALLS State: NY Zip: 12590

Phone number of property owner: (Include home, work, mobile number and e-mail address):

(H) _____ (C) 845.401.5672

(W) _____ (Email) _____

Address of site where work is being conducted: 40 CLAPP AVE

Description of work: _____

PROPOSED WORK INVOLVES THE ADDITION OF : TWO DWELLING UNITS ON NEW SECOND LEVEL. ADDITIONAL TWO EGRESS STAIRS, REAR AND FRONT OF STRUCTURE . ADDITIONAL PARKING PROVIDED . SEE ATTACHED PROPOSED ARCHITECTURAL PLAN.

Name of person doing work: HILDA DUQUE FOR PLANNING BOARD APPICATION

Address of person doing work: 18 MARKET ST

City: WAPPINGER FALLS State: NY Zip: 12590

Phone number of person doing work (Include home, work, mobile numbers and e-mail address):

(H) _____ (C) 845.453.6208

(W) _____ (Email) hduques@gmail.com

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

[Signature]
Signature of Property Owner

9-14-22

[Signature]
Date Signed

PART "A"
OWNER AFFIDAVIT

State of Ny }
County of Dutchess } ss:

MARCO QUEZADA being duly sworn, deposes and says:

1. That I/we are the Owner(s) of the within property as described in the foregoing application for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That I/we hereby authorize HILDA DUQUE, to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.
4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
6. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

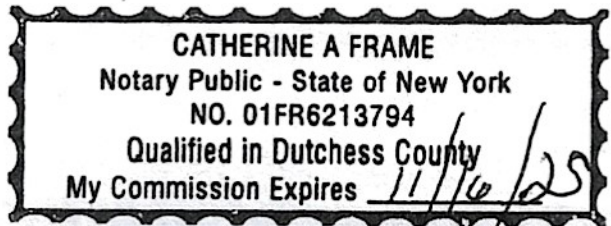
[Signature]
Applicant/Owner

MARCO QUEZADA
Applicant/Owner

Sworn to before me this 14 day of

September, 2022.

[Signature]
Notary Public



PART "B"
APPLICANT / AGENT AFFIDAVIT

State of NEW YORK

County of DUTCHESS

}
} ss:
}

HINDA DUQUE being duly sworn, deposes and says:

1. That I/we are the _____ named in the foregoing application for Planning Board for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That he/she resides at or conducts business at 18 MARKET ST in the County of DUTCHESS and the State of NEW YORK.
3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
4. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
5. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we has examined this affidavit and that it is true and correct.

[Signature] 9/19/22
Applicant/Agent

HINDA DUQUE
Applicant/Agent

Sworn to before me this 19th day of September, 2022.

Heather M. McCormick
Notary Public

HEATHER M McCORMICK
Notary Public, State of NY
No. 01MC5031663
Qualified in Dutchess County
Commission Expires August 8, 2026

T 216132770
119
74
80
130
300
510

BARGAIN AND SALE DEED WITHOUT COVENANT AGAINST GRANTOR (CORPORATION)

STATUTORY FORM BB

THIS IS A LEGALLY BINDING INSTRUMENT. IF NOT FULLY UNDERSTOOD, WE RECOMMEND ALL PARTIES TO THE INSTRUMENT CONSULT AN ATTORNEY BEFORE SIGNING.

THIS INDENTURE, made the 7th day of March, 2016

between **FEDERAL HOME LOAN MORTGAGE CORPORATION, 5000 PLANO PARKWAY, CARROLLTON, TEXAS 75010**, a corporation organized under the laws of United States of America,

party of the first part, and

MARCO QUEZADA, with a mailing address of 51 Spring Street, Fishkill, New York

party of the second part:

WITNESSETH, that the party of the first part, in consideration of one dollar and other good and valuable consideration, lawful money of the United States, paid by the party of the second part, does hereby grant and release unto the party of the second part, their and assigns forever, the property located in the Village of Wappinger, County of Dutchess and the State of New York more fully described as follows: Section: 6158 Block: 17 Lot: 240071

* Falls, Town of Wappinger

SEE SCHEDULE "A";

Said property known as **40 CLAPP AVENUE, WAPPINGERS FALLS, NEW YORK 12590**


Being and Intended to be the premises conveyed by Deed dated September 3, 2014 and recorded September 19, 2014 in Document Number 02-2014-5674 5671. K

TOGETHER with the appurtenances and all the estate and rights of the party of the first part in and to said premises;

TO HAVE AND TO HOLD the premises herein granted unto the party of the second part, their and assigns forever.

FEDERAL HOME LOAN MORTGAGE CORPORATION

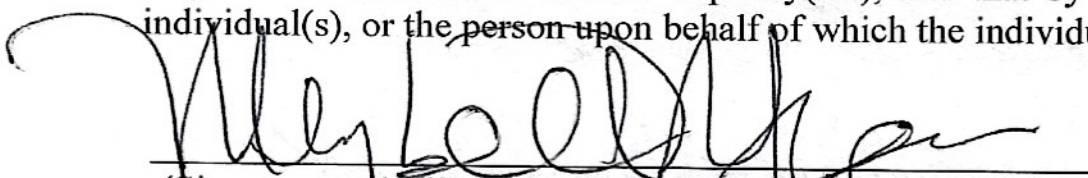
BY: STEIN, WIENER & ROTH, LLP,
as its attorney-in-fact

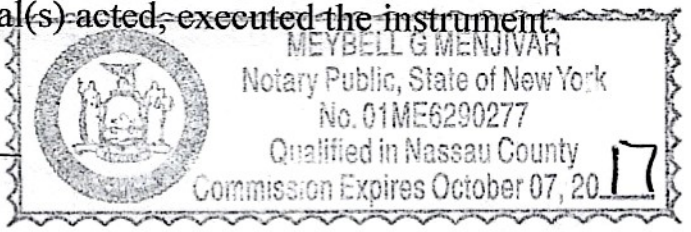
By: 
EDWARD WIENER, ESQ.

Acknowledgment by a Person within New York State (RPL § 309-a)

STATE OF NEW YORK)
) ss.:
COUNTY OF NASSAU)

On the 4th day of March, 2016, before me, the undersigned, personally appeared Edward Wiener, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that they executed the same in their capacity(ies), and that by their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.


(Signature and office of individual taking acknowledgment)



Consultant
 Address
 Phone
 Fax
 e-mail

Consultant
 Address
 Phone
 Fax
 e-mail

No.	Description	Date

**QUEZADA
 RESIDENCE**

40 CLAPP ADDITION

COVER SHEET



40 CLAPP ADDITION
 40 CLAPP AVE.
 WAPPINGERS FALLS, NY 12590

Project number 2105
 Date 09/14/22
 Drawn by HD
 Checked by Checker

C1-0
 Scale



② EAST ELEVATION
1/4" = 1'-0"



① West
1/4" = 1'-0"

ALFRED A. CAPPELLI Jr., AIA
ARCHITECT
1136 ROUTE 9 WAPPINGERS FALLS, NY 12590
Phone: (609) 334-0000
alfred@aacapelli.com

Consultant
Address
Phone
Fax
e-mail

Consultant
Address
Phone
Fax
e-mail

QUEZADA RESIDENCE
40 CLAPP ADDITION

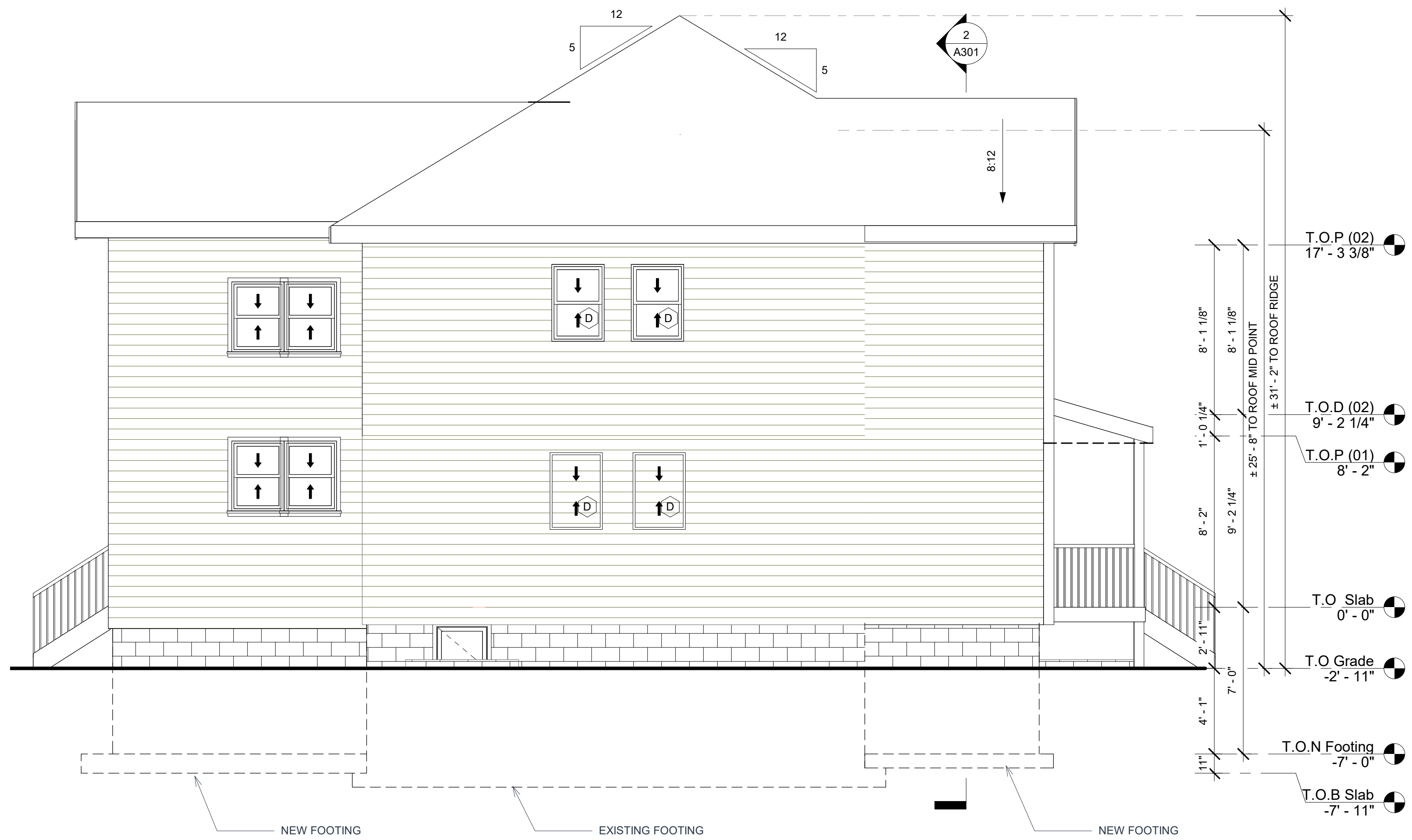
E & W ELEVATIONS

No.	Description	Date

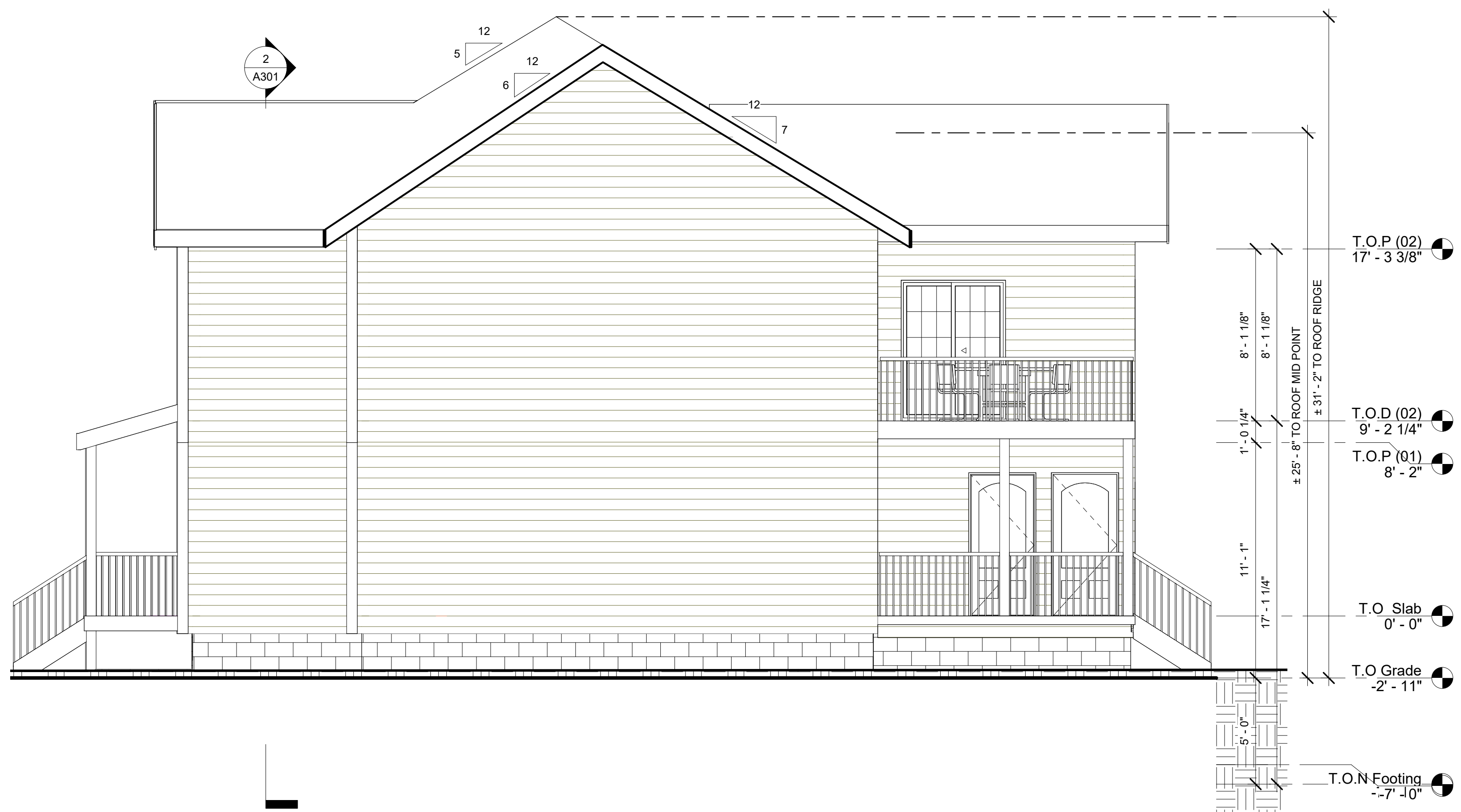
Project number 2105
Date 09/14/22
Drawn by Author
Checked by Checker

A2-0

Scale 1/4" = 1'-0"



② North
1/4" = 1'-0"



① South
1/4" = 1'-0"

ALFRED A. CAPPELLI Jr., AIA
ARCHITECT
1136 ROUTE 9 WAPPINGERS FALLS, NY 12590
Phone: (609) 333-0000
alfred@aacapelli.com

Consultant
Address
Address
Phone
Fax
e-mail

Consultant
Address
Address
Phone
Fax
e-mail

QUEZADA RESIDENCE
40 CLAPP ADDITION

N & S ELEVATIONS

No.	Description	Date

Project number 2105
Date 09/14/22
Drawn by Author
Checked by Checker

A2-1
Scale 1/4" = 1'-0"



VILLAGE OF WAPPINGERS FALLS

BUILDING DEPARTMENT
OFFICE OF CODE ENFORCEMENT
OFFICE OF THE FIRE INSPECTOR
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR PLANNING BOARD REVIEW

Submission Date: 08/03/2022

Date of Meeting: 09/01/2022

Meetings are held at the American Legion Hall, 7 Spring Street on the first Thursday of the month at 7:00 p.m. All information must be completely filled out and returned no later than 15 business days before meeting date. For the complete list of Planning Meeting Dates and Deadlines go to the Building, Planning and Zoning page on the village website www.wappingersfallsny.gov.

A filing fee is required in connection with any application to the Planning Board for approval.

The Planning Board is responsible for the review and approval of all applications concerning:

- Opening a new business in the Village
- Installing a new sign
- Building a new structure in a commercial zone
- Subdivision / Site Review/ Lot Line Adjustment

Items to be submitted for review: (Only items pertaining to project)

- PDF Emailed to Building Dept. and Ten (10) hard copy sets of construction/site/elevation/plans - Engineer drawings showing all areas to be affected. Or a sketch of the proposed floor plan layout (*All sets of plans must be folded*)
- Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form (*The applicant must provide consent form, from homeowner authorizing him/her to file for Planning Review*)
- Application fee
- Application for proposed sign - Including Renderings/sketch of proposed sign/ Elevation/size exact color samples.

(Separate Application)



VILLAGE OF WAPPINGERS FALLS

BUILDING DEPARTMENT
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR PLANNING BOARD REVIEW

All information must be completely filled out and returned no later than the stated submission date.

Date Submitted: 08/03/2022 Date of Meeting: 09/01/2022

Property Identification:

Address: 2667 E. MAIN ST. WAPPINGERS FALLS, NY. 12590
Zoning District: VC VILLAGE COMMERCIAL Existing site area: 2,865.5 S.F.

Owner Information:

Name: GREENACRE HOLDINGS LLC.
Address: 14 DEER RUN RD.
City: POUGHKEEPSIE State: NY Zip: 12603
Contact Numbers: (H) (845) 554-5295 (C) (718) 288-3625
(E-mail) MICHAEL@TREYBICHLAW.COM

Applicant Information:

(Please provide if someone other than the property owner is the applicant)

Name: JOE POTOCKI
Address: 266 SHEAR HILL RD.
City: MAHOPAC State: NY Zip: 10541
Contact Numbers: (H) 845 621-4000 (C) 914 714-5214
E-mail Address: RAYEXDESIGN@GMAIL.COM

Lead Design Professional: (If applicable)

(Indicate the primary design professional associated with this application)

Name: ROY A. FREDRIKSEN
Title: _____
 Architect Engineer
Company: RAYEX DESIGN GROUP
Address: 266 SHEAR HILL RD. MAHOPAC, NY. 10541
Telephone #: 845 621-4000
E-mail Address: RAYEXDESIGN@GMAIL.COM



VILLAGE OF WAPPINGERS FALLS
APPLICATION FOR PLANNING BOARD REVIEW
 (Continued)

Proposed Site:

(Property where improvements are proposed)

Existing Use(s): RESTAURANT (TAKE OUT)

Proposed square footage: EXISTING

Project Description : *(Please print or type)*

(Describe the project in detail indicating all areas of work, type(s) of improvement and materials to be used as a part of the proposed improvements. Use additional sheets if necessary.)

REPAIR/RENOVATION OF EXISTING FRONT FACADE. NEW SIGNS. NEW PLANTING AREA IN REAR PARKING LOT.

Items to be submitted for review: (Only items pertaining to project)

- Ten (10) sets of plans.
- Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form
- Application for proposed sign
- Application Fee
- Proof that the taxes, utility bills and fines for the property are paid in full.

With the completion of this application, I hereby state that the information provided and all Accompanying documentation is accurate to the best of my knowledge, and that the attached plans contain all information required by the appropriate checklist.


 Signature of Applicant Signed

07/29/2022
 Date

Office use only:

[] FEE : _____ Receipt No. : _____ Cash / Check # _____ Date: _____

Revised by : _____ Revision date : _____
 Zoning Administrator/Code Enforcement Officer



VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning
2582 South Avenue
Wappingers Falls, NY 12590
Phone: (845) 297-5277 Fax: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

CONSENT FORM

Name of property owner: Greenace Holdings LLC
Address of property owner: 14 Deer Run Road
City: Poughkeepsie State: NY Zip: 12603
Phone number of property owner: (Include home, work, mobile number and e-mail address):
(H) _____ (C) (718) 288-3625
(W) (845) 554-5295 (Email) michael@freylaw.com

Address of site where work is being conducted: _____
2667 E. MAIN ST. WAPPINGERS FALLS, NY 12590

Description of work: REPAIR/RENOVATION OF EXISTING FRONT FACADE.
NEW SIGNS. NEW PLANTING AREA IN REAR PARKING LOT.

Name of person doing work: JOE POTOCKI
Address of person doing work: 266 SHEAR HILL RD.
City: MAHOPAC State: NY Zip: 10541
Phone number of person doing work (Include home, work, mobile numbers and e-mail address):
(H) 845 621-4000 (C) 914714-5214
(W) _____ (Email) RAYEXDESIGN@GMAIL.COM

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

Signature of Property Owner

9/2/2022

Date Signed

617.20
Appendix B
Short Environmental Assessment Form

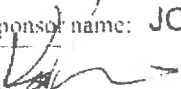
Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: KENNEDY FRIED CHICKEN FACADE RENOVATION			
Project Location (describe, and attach a location map): 2667 E. MAIN ST. WAPPINGERS FALLS, NY. 12590			
Brief Description of Proposed Action: REPAIR/RENOVATION OF EXISTING FRONT FACADE. NEW SIGNS. NEW PLANTING AREA IN REAR PARKING LOT.			
Name of Applicant or Sponsor: JOE POTOCKI		Telephone: (914) 714-5214	
		E-Mail: RAYEXDESIGN@GMAIL.COM	
Address: 266 SHEAR HILL RD.			
City PO: MAHOPAC		State: NY.	Zip Code: 10541
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO	YES
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO	YES
PLANNING BOARD APPROVAL AND SIGN APPROVAL		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		.066 acres	
b. Total acreage to be physically disturbed?		.012 acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.066 acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input checked="" type="checkbox"/> Urban	<input type="checkbox"/> Rural (non-agriculture)	<input type="checkbox"/> Industrial	<input checked="" type="checkbox"/> Commercial
<input type="checkbox"/> Forest Agriculture Parkland	<input type="checkbox"/> Aquatic	<input type="checkbox"/> Residential (suburban)	
Other (specify): _____			

5. Is the proposed action: a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation service(s) available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: Shoreline Forest Agricultural grassland Early mid-successional Wetland			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems off and storm drains? If Yes, briefly describe: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	NO	YES
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant sponsor name: JOE POTOCKI Date: 07/29/2022 Signature: 		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

	No. or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.	
<input type="checkbox"/> Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.	
_____ Name of Lead Agency	_____ Date
_____ Print or Type Name of Responsible Officer in Lead Agency	_____ Title of Responsible Officer
_____ Signature of Responsible Officer in Lead Agency	_____ Signature of Preparer (if different from Responsible Officer)

PART "A"
OWNER AFFIDAVIT

State of New York
County of Dutchess

}
} ss:
}

Michael Teybich being duly sworn, deposes and says.

1. That I/we are the Owner(s) of the within property as described in the foregoing application for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That I/we hereby authorize JOE POTOCKI to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.
4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
6. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

[Signature]
Applicant/Owner

Michael Teybich
Applicant/Owner

Sworn to before me this 2nd day of August, 2022.

Tammara Dooley
Notary Public

TAMMARA A. DOOLEY
Notary Public, State of New York
Qualified in Columbia County
No. 01705016728
Commission Expires Dec. 3, 2023

PART "B"
APPLICANT / AGENT AFFIDAVIT

State of New York
County of Putnam

ss:

Joseph M Potocki being duly sworn, deposes and says:

1. That I/we are the Applicant/Agent named in the foregoing application for Planning Board for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That he/she resides at or conducts business at 266 Shear Hill Rd. Malabar in the County of Putnam and the State of New York.
3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
4. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
5. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we has examined this affidavit and that it is true and correct.

Joseph Potocki
Applicant/Agent

[Signature]
Applicant/Agent

Sworn to before me this 3 day of August, 2022.

[Signature]
Notary Public

LOUISA SCARANO
Notary Public, State of New York
Qualified in Putnam County
Reg. No. 01SC6146201
My Commission Expires 05-15-2026

GENERAL NOTES

- THESE PLANS ARE PREPARED IN ACCORDANCE WITH THE EXISTING BUILDING CODE OF NEW YORK STATE.
- THE CONTRACTOR SHALL PROVIDE ALL LABOR, MATERIALS AND EQUIPMENT REQUIRED TO COMPLETE ALL WORK, ETC., AS SHOWN ON THE DRAWINGS NECESSARY FOR A COMPLETE JOB, UNLESS OTHERWISE SPECIFIED. ALL MATERIAL AND WORKMANSHIP SHALL BE OF BEST QUALITY.
- ALL WRITTEN FIGURES (NOTES AND DIMENSIONS) ON THE FLOOR PLANS OR SPECIFICATIONS SHALL TAKE PRECEDENCE OVER ANY DRAWN FIGURES (ELEVATIONS). DO NOT SCALE PRINTS. ALL DIMENSIONS MUST BE VERIFIED BY THE CONTRACTOR BEFORE START OF CONSTRUCTION. ANY DISCREPANCIES ON THE PLANS OR SPECIFICATIONS MUST BE REPORTED TO THE OWNER OR THE DESIGNER PRIOR TO THE START OF CONSTRUCTION. ALL WORK AND MATERIALS MUST CONFORM TO ALL LOCAL AND THE RESIDENTIAL CODE OF N.Y.S., NATIONAL BOARD OF FIRE UNDERWRITERS, ENERGY CONSERVATION CODE OF NEW YORK STATE AND REQUIREMENTS OF THE BOARD OF HEALTH.
- SITE CONDITIONS: THE GENERAL CONTRACTOR SHALL VERIFY ALL CONDITIONS BEFORE SUBMITTING HIS PROPOSAL. NO ALLOWANCE FOR EXTRA CHARGES WILL BE PERMITTED BECAUSE OF LACK ON KNOWLEDGE OF THE CONDITIONS PECULIAR THERETO EXCEPT AS OTHERWISE SPECIFIED ELSEWHERE IN THE CONTRACT DOCUMENTS. THE CONTRACTOR SHALL VERIFY ALL LINES, LEVELS AND DIMENSIONS SHOWN ON THE DRAWINGS AND WILL BE HELD RESPONSIBLE FOR THE CORRECTNESS AND SETTING OUT OF HIS WORK.
- SUBCONTRACTORS: THESE CONDITIONS ARE BINDING ON THE GENERAL CONTRACTOR AND EACH SUBCONTRACTOR INsofar AS THEY APPLY TO THE WORK OF EITHER.
- INSURANCE: THE GENERAL CONTRACTOR SHALL PROTECT THE JOB FROM CLAIMS UNDER WORKMAN'S COMPENSATION AND PUBLIC LIABILITY ACTS AND FROM ANY CLAIMS FOR PERSONAL INJURY, INCLUDING DEATH, WHICH MAY ARISE UNDER THIS CONTRACT, WHETHER BY HIMSELF BY ANY SUB-CONTRACTOR OR ANYONE DIRECTLY OR INDIRECTLY EMPLOYED BY HIM. CERTIFICATES OF INSURANCE SHALL BE FILED WITH THE OWNER BEFORE STARTING JOB AND SHALL BE SUBJECT TO OWNER'S APPROVAL.
- CONTRACTOR AND/OR ANY SUB-CONTRACTOR ARE TO PERFORM ALL WORKS AS SHOWN, IMPLIED OR THAT IS REQUIRED TO PROVIDE A COMPLETE AND FINISHED KEY-IN LOCK JOB EVEN IF EACH AND EVERY SPECIFIC ITEM IS NOT SPECIFICALLY CALLED FOR.
- WHILE EVERY ATTEMPT HAS BEEN MADE IN PREPARATION OF THESE PLANS TO AVOID MISTAKES, THE REPAIRER CANNOT GUARANTEE AGAINST HUMAN ERROR. THE CONTRACTOR ON THE JOB MUST CHECK AND CONFIRM ALL DETENTIONS AND DETAILS AND BE RESPONSIBLE FOR SAME.

SITE PREPARATIONS AND LANDSCAPING

- CLEARING OF TREES IF ANY SHALL BE AS PER CONTRACT DIRECTION OR AS MINIMUM AS POSSIBLE TO ACCOMMODATE NEW GARAGE AND DRIVEWAY.
- TOP SOIL IN CLEARED AREA TO BE REMOVED AND STORED FOR REUSE.
- PROTECT ANY EXISTING LANDSCAPING OR TREES AGAINST DAMAGE.
- GRADING, CUTTING AND FILLING SHALL BE AS MINIMUM AS POSSIBLE TO TRANSFORM EXISTING GRADES TO GRADES SHOWN ON DRAWINGS OR AS REQUIRED FOR ALL WORK.
- CERTIFY THAT ALL PROPER SETBACKS HAVE BEEN MET AFTER FOOTINGS HAVE BEEN FORMED AND PRIOR TO CONCRETE BEING POURED.

EXCAVATION

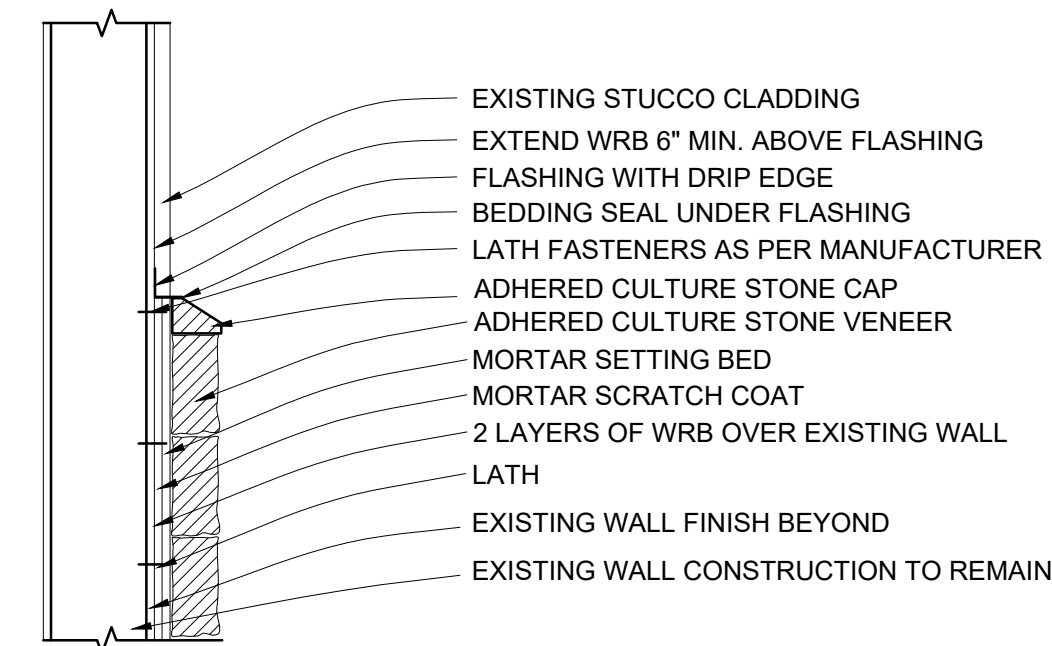
- EXCAVATE AS REQUIRED TO ALLOW FOR THE CONSTRUCTION OF RETAINING WALL AS SHOW ON PLANS.
- EXCAVATE ALL EARTH, BOULDERS, LOOSE AND SOFT ROCK TO THE LINES AND DEPTHS INDICATED ON THE DRAWINGS. ALL FOOTINGS TO BEAR ON SOLID, UNDISTURBED EARTH. EXCAVATE FOR ALL UTILITIES AS REQUIRED.
- FINISH GRADING SHALL BE ESTABLISHED TO PROVIDE SURFACE DRAINAGE IN ALL DIRECTIONS AWAY FROM THE HOUSE AND EXCAVATED AREAS.

EXTERIOR FINISH

- FASCIA, TRIM AND EXTERIOR AS SHOWN ON ELEVATIONS.

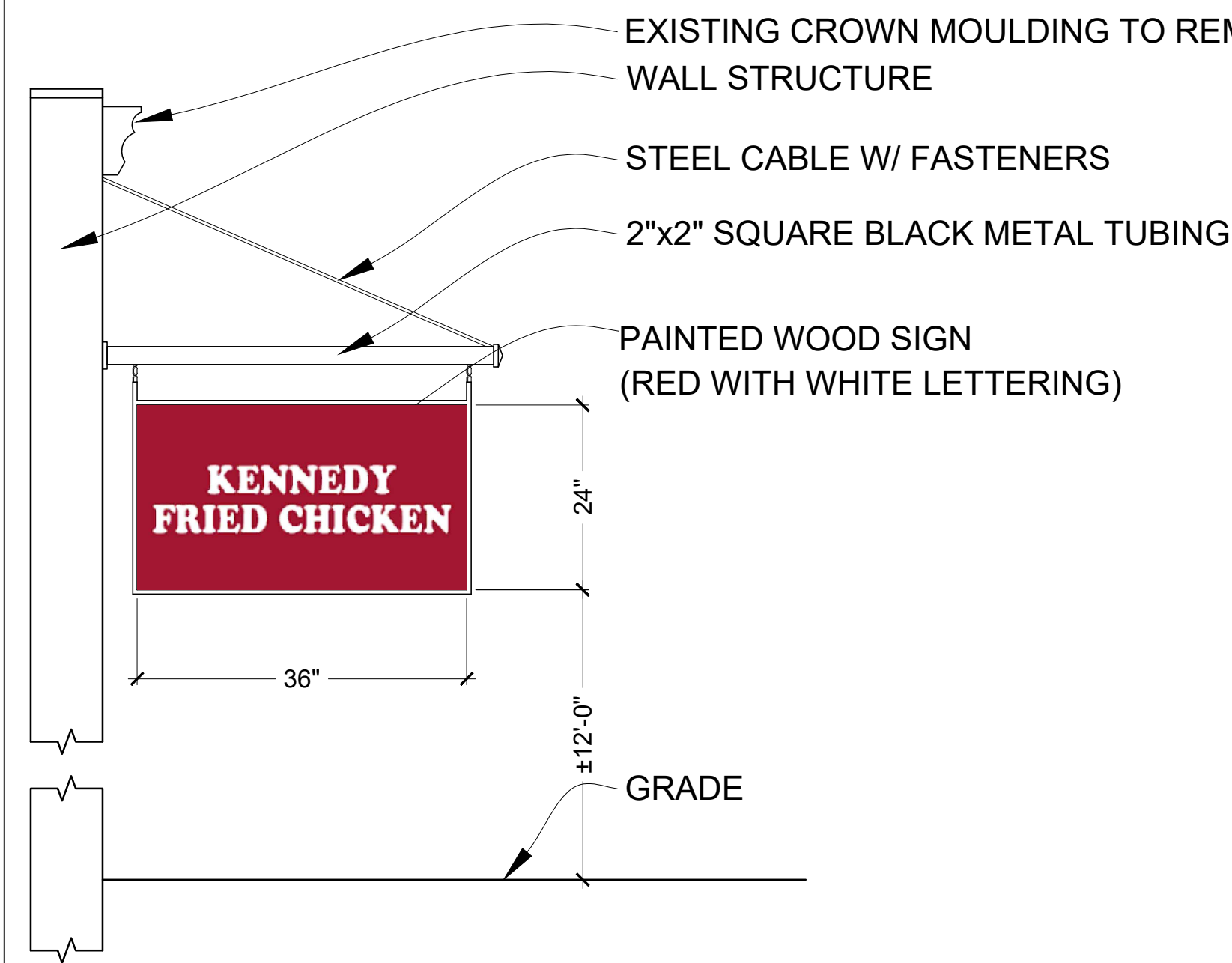
ELECTRICAL

- ALL ELECTRICAL WORK TO BE IN ACCORDANCE WITH THE 2017 EDITION OF THE NATIONAL ELECTRICAL CODE.



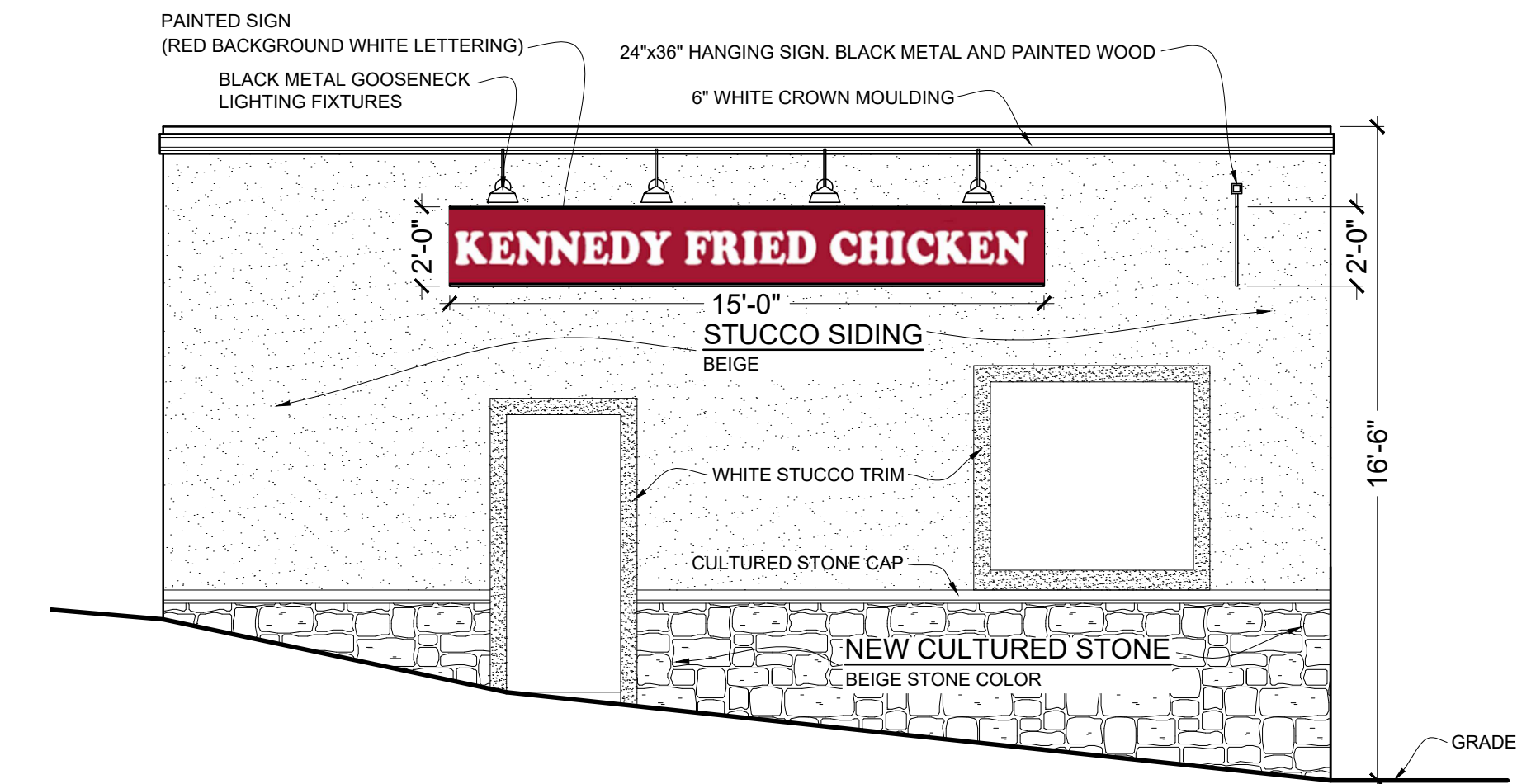
CULTURE STONE DETAIL

N.T.S.



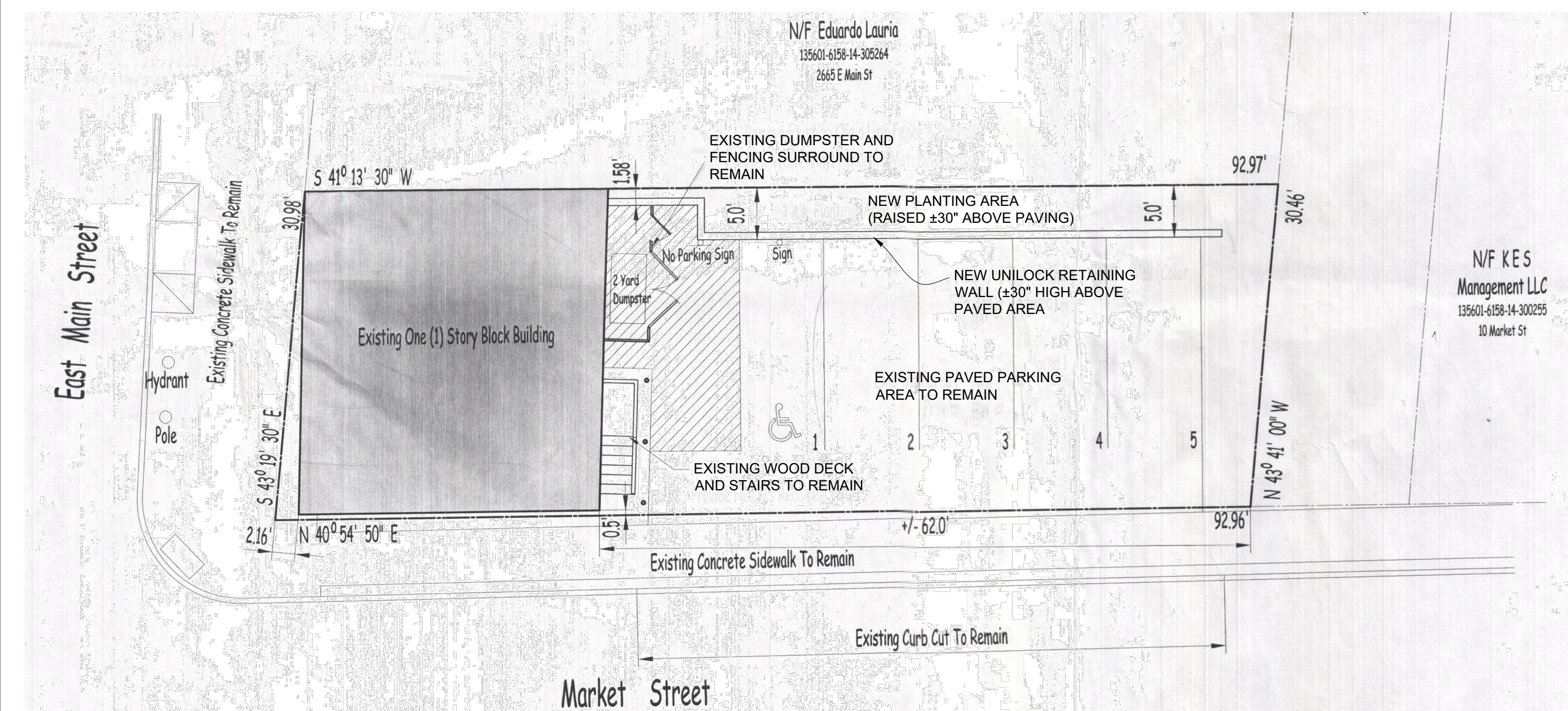
HANGING SIGN DETAIL

N.T.S.



FRONT ELEVATION

SCALE 1/4" = 1'-0"



PLOT PLAN

BASED ON SITE PLAN PREPARED BY MALIARCHITECT DATED 08/27/2004.

SCALE 1" = 10'

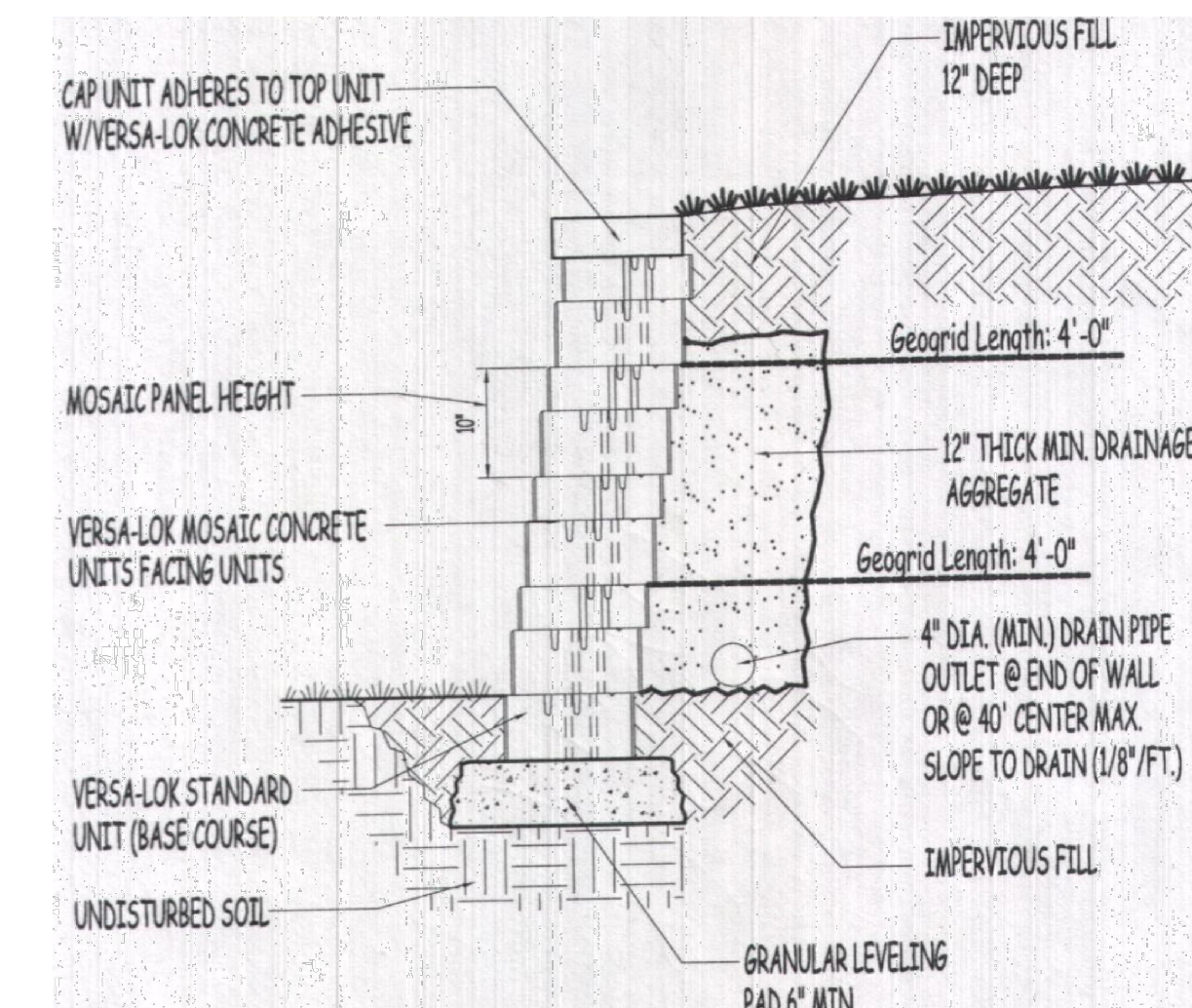
FLOOR PLAN

SCALE: 1/4" = 1'-0"

2667 E Main St



LOCATION MAP



PLANTER RETAINING WALL DETAIL

NOT TO SCALE

ZONING CALCULATIONS		
ADDRESS: 2667 E. MAIN ST. WAPPINGERS FALLS, NY.		
TAXMAP #: 135601-6158-14-302265		
ZONING DISTRICT: VC VILLAGE COMMERCIAL		
USE: RESTAURANT		
BULK REGULATIONS	REQUIRED	PROVIDED
LOT AREA		2,867.5 S.F.
MIN. LOT WIDTH @ BLDG LINE	20'	30.98'
SETBACKS		
FRONT (PRIMARY)	2' MIN. / 12' MAX.	.5' (EXISTING)
FRONT (SECONDARY)	2' MIN. / 12' MAX.	.5' (EXISTING)
SIDE YARD:	0' MIN. / 24' MAX.	.5' (EXISTING)
REAR (AT RESIDENTIAL ZONE)	3' MIN.	62' (EXISTING)
MAX. LOT COVERAGE		2,475 S.F.
BLDG HEIGHT / STORIES		16.5' / 1 STORY (EXISTING)
PARKING	RESTAURANT (TAKEOUT) NONE REQUIRED	5 SPACES

CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND SPEED		SEISMIC DESIGN CATEGORY	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP.	ICE BARRIER UNDERLAYMENT REQUIRED	FLOOD HAZARDS
	SPEED (MPH)	TOPO EFFECTS		WEATHERING	FROST LINE DEPTH	TERMITE			
35 PSF	105 mph	NO	C	SEVERE	42"	MODERATE HEAVY	SLIGHT MODERATE	7	YES

NOTES:

- IT IS A VIOLATION OF ARTICLE 145 OF THE NEW YORK STATE EDUCATION LAW FOR ANY PERSON TO ALTER THIS DOCUMENT IN ANY WAY WITHOUT THE WRITTEN VERIFICATION OR ADOPTION BY A N.Y.S. LICENSED ENGINEER IN ACCORDANCE WITH SECTION 7209(2).
- A GREASE TRAP WAIVER AND APPROVAL FOR AN INTERNAL GREASE TRAP WAS GRANTED BY THE PLANNING BOARD ON 11/21/2016.



ROY A. FREDRIKSEN, PE
DESIGN • PLANNING • CONSULTING ENGINEERING
266 SHEAR HILL RD. • MAHOPAC, NY 10541 • 845-621-4000
RAYEXDESIGN@GMAIL.COM

OWNER: MICHAEL TREYBICH
LEASEE: TARIQ MAHMOOD
DBA: KENNEDY FRIED CHICKEN

PROJECT: FACADE RENOVATION AND NEW PLANTER WALL AT 2667 E. MAIN ST. IN WAPPINGERS FALLS, NY.

SHEET TITLE: PLOT PLAN & 1 OF 1 ELEVATION

8/23/2022
REVISIONS:

DATE: 7/29/2022





VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning

2582 South Avenue

Wappingers Falls, NY 12590

Phone: (845) 297-5277 Fax: (845) 296-0379

www.wappingersfallsny.gov

SIGN PERMIT APPLICATION

Name of Applicant JOE POTOCKI
Address 266 SHEAR HILL RD.
MAHOPAC, NY. 10541
Email RAYEXDESIGN@GMAIL.COM
Phone (914)714-5214

Owner of Property GREENACRE HOLDINGS, LLC.
Address 14 DEER RUN
POUGHKEEPSIE, NY. 12603
Phone (718) 288-3625

Location of Property 2667 E. MAIN ST. WAPPINGERS FALLS, NY. 12590
Linear Frontage of building 31' Zoning District VC

Types of Signs Post & Arm Projecting Seasonal Multi-Tenant
 Wall Window Awning Free Standing Sidewalk

Sign Design All applications must be accompanied by a detailed scaled drawing showing all sign dimensions, graphic design (including lettering and pictorial matter), visual message (text, copy or content of sign), sign colors with color swatches, lighting, and landscaping.

Sign Location All applications must be accompanied by a plan, drawn to scale showing the following:
Freestanding signs- the position of the sign in relation to adjacent buildings, structures, roads, driveways, property lines, other signs, lighting fixtures, walls and fences.
Awning, Window, Wall or Projecting signs-the location on awning, window, wall or building, size of awning, total window area of principal façade, or linear frontage of building (as appropriate), projection from building, if relevant, proposed signs position in relation to adjacent signs and lighting fixtures.

Sign Specifications Type AFFIXED TO BUILDING Placement FRONT FACADE
Landscaping ___ Yes No Size of Sign 24" Height 36" and 15'-0" Width
 Single Faced Double Faced Lighted
Material Wood Metal _____ other Durable

The undersigned respectfully petitions the Village of Wappingers Falls Code Enforcement Officer for a Sign Permit.

Application is being made in accordance with the Village Zoning Code. The undersigned acknowledges that permanent signs require review and approval of the Planning Board. In order to be considered complete and ready for review by the Planning Board, the following needs to be submitted to the Zoning Clerk no less than 15 days prior to the scheduled Planning Board Meeting:

- Application form (ten sets)
- Sign design drawings (ten sets)
- Color swatch (if any color other than black/white)
- Fee for sign permit of \$75.00 per side (to be paid after Planning Board Approval)

Applicant Name JOE POTOCKI

Applicant Signature  Date: 07/29/2022

Owner of Property Signature  Date: 8/2/2022

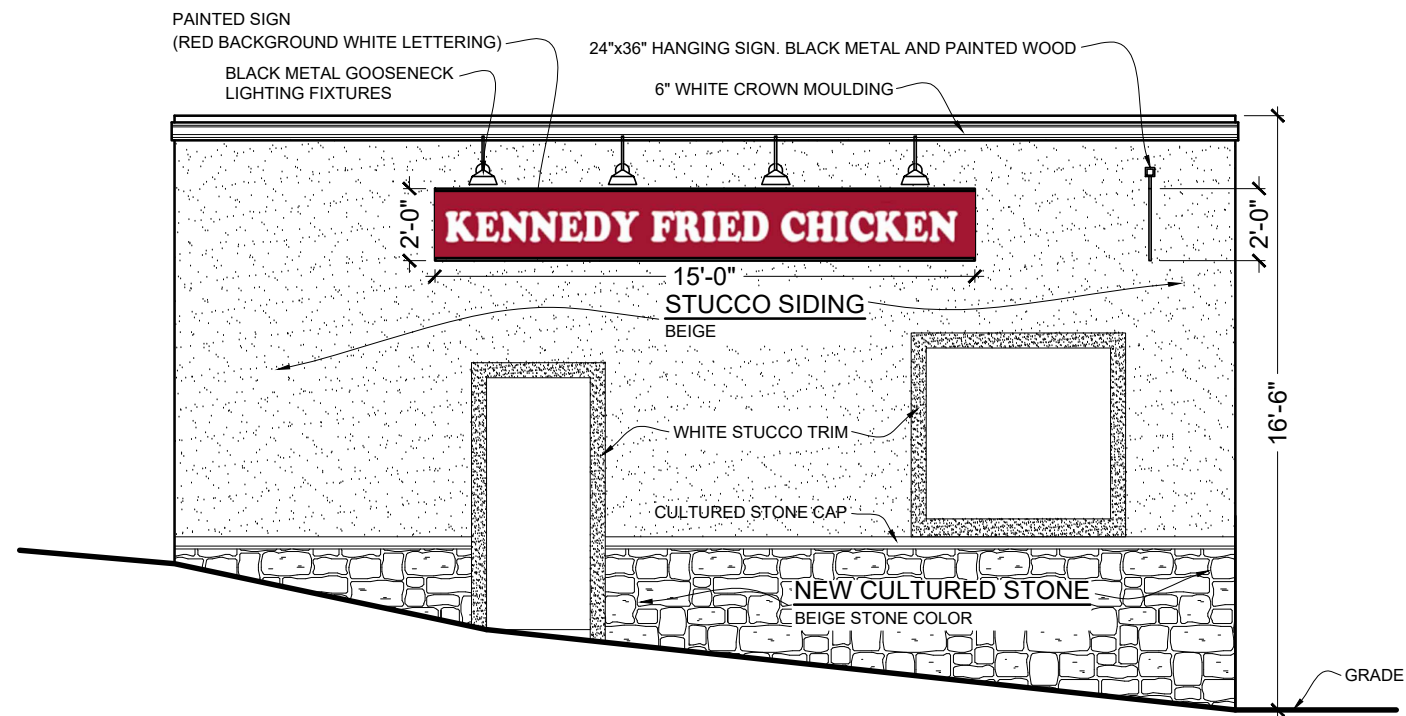
THIS SECTION TO BE COMPLETED BY THE CODE ENFORCEMENT OFFICER

Sign Permit Granted: Date _____ Permit # issued _____

Permit Fee \$ _____ Receipt # _____ Date _____

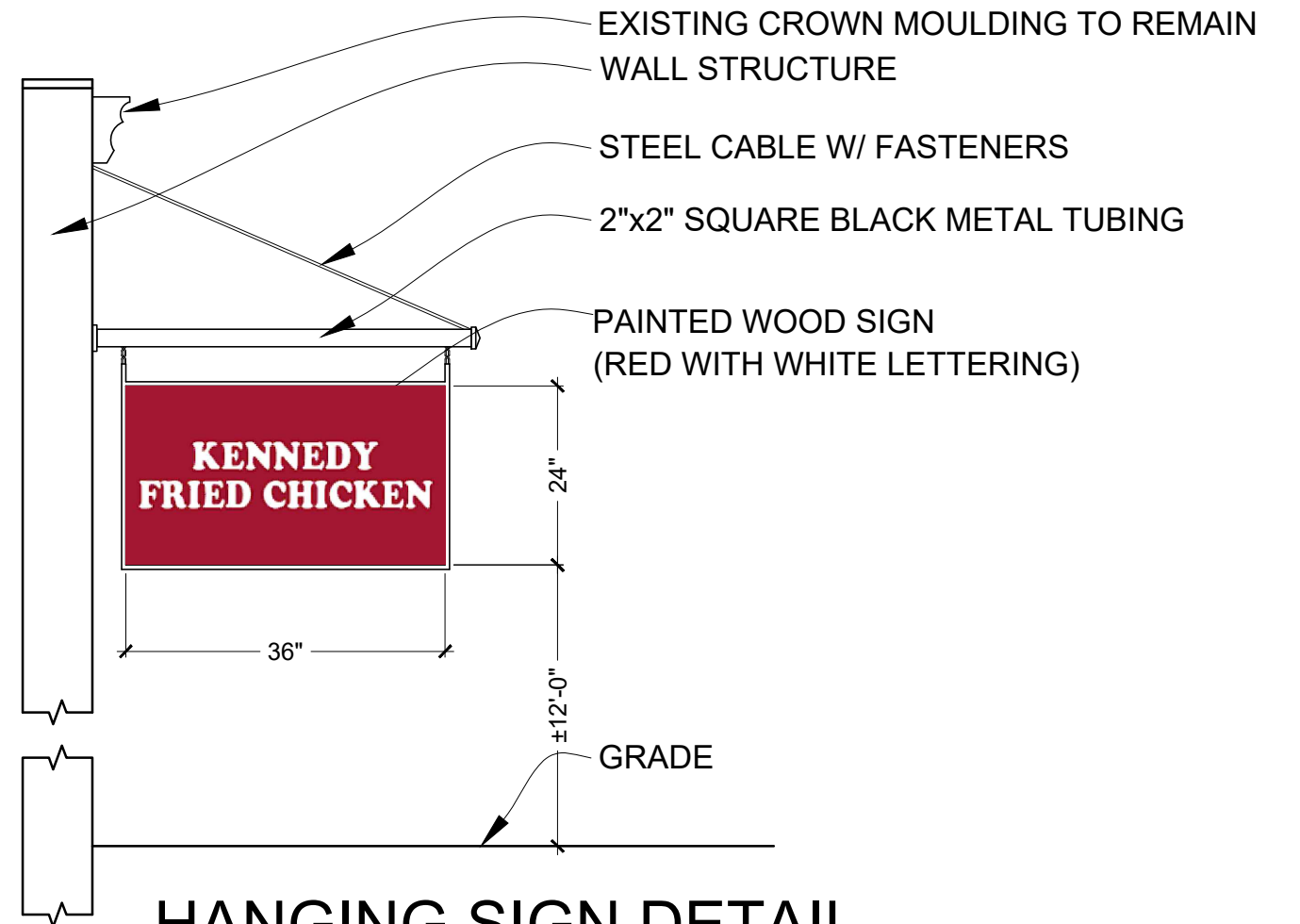
Sign Permit Application referred to Planning Board Date _____

Comments: _____



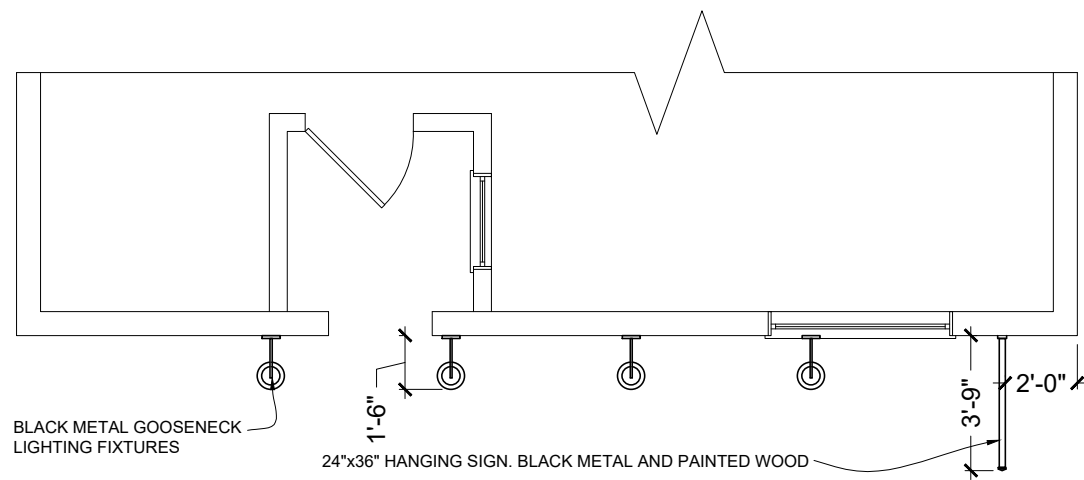
FRONT ELEVATION

SCALE: 3/16" = 1'-0"



HANGING SIGN DETAIL

N.T.S.



FLOOR PLAN

SCALE: 3/16" = 1'-0"



ROY A. FREDRIKSEN, PE
DESIGN . PLANNING . CONSULTING ENGINEERING
 266 SHEAR HILL RD. • MAHOPAC, NY 10541 • 845-621-4000
 RAYEXDESIGN@GMAIL.COM

OWNER: MICHAEL TREYBICH	JOB #
LEASEE: TARIQ MAHMOOD	DRN BY:
DBA: KENNEDY FRIED CHICKEN	CHKD BY:

PROJECT: FACADE RENOVATION AND NEW PLANTER WALL AT 2667 E. MAIN ST. IN WAPPINGERS FALLS, NY.	TAX MAP #: 135601-6158-14-302265
--	----------------------------------

SHEET TITLE: SIGN ELEVATION & 1 OF 1 DETAILS

8/23/2022
 REVISIONS: DATE: 7/29/2022





September 15, 2022

Village of Wappingers Falls, Planning Department
Attn: Mercades Perez
2582 South Avenue,
Wappingers Falls, New York 12590

Re: ***New Business: Mediterranean Cuisine & Grill for
Murat Gunes
Tax Grid I.D. #6159-19-575182 – 4.60 ac.
Village of Wappingers Falls***

SENT VIA HAND DELIVERY & EMAIL (mperez@wappingersfallny.gov) – 1 page + attachments

Dear Chairmen and Board members:

Please see enclosed within this submission the following:

- Ten (10) copies of the plan set (N1 & P1 - P3), dated September 15, 2022
- Ten (10) copies of the Short Environmental Assessment Form
- Ten (10) copies of the Application for Planning Board Review & Supplemental Documents
- One (1) check in the amount of \$750.00 for Escrow

We would respectfully request to be placed on the next planning board meeting and that a review commence at your earliest convenience. If you have any additional questions or concerns, please do not hesitate to call. Thank You.

Very truly yours,

A handwritten signature in cursive script that reads 'Illeana Tucker'.

Illeana Tucker, Associate Engineer
M. Gillespie & Associates, Consulting Engineering, PLLC

cc: file



VILLAGE OF WAPPINGERS FALLS

BUILDING DEPARTMENT
OFFICE OF CODE ENFORCEMENT
OFFICE OF THE FIRE INSPECTOR
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR PLANNING BOARD REVIEW

Submission Date: September 15, 2022 Date of Meeting: _____

Meetings are held at the American Legion Hall, 7 Spring Street on the first Thursday of the month at 7:00 p.m. All information must be completely filled out and returned no later than 15 business days before meeting date. For the complete list of Planning Meeting Dates and Deadlines go to the Building, Planning and Zoning page on the village website www.wappingersfallsny.gov.

A filing fee is required in connection with any application to the Planning Board for approval.

The Planning Board is responsible for the review and approval of all applications concerning:

- Opening a new business in the Village
- Installing a new sign
- Building a new structure in a commercial zone
- Subdivision / Site Review/ Lot Line Adjustment

Items to be submitted for review: (Only items pertaining to project)

- PDF Emailed to Building Dept. and Ten (10) hard copy sets of construction/site/elevation/plans - Engineer drawings showing all areas to be affected. Or a sketch of the proposed floor plan layout (*All sets of plans must be folded*)
- Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form (*The applicant must provide consent form, from homeowner authorizing him/her to file for Planning Review*)
- Application fee
- Application for proposed sign - Including Renderings/sketch of proposed sign/ Elevation/size/ exact color samples.

(Separate Application)



VILLAGE OF WAPPINGERS FALLS

BUILDING DEPARTMENT
2582 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
PHONE: (845) 297-5277 FAX: (845) 296-0379
E-mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR PLANNING BOARD REVIEW

All information must be completely filled out and returned no later than the stated submission date.

Date Submitted: September 15, 2022 Date of Meeting: _____

Property Identification:

Address: 1572 Rt. 9, Imperial Plaza, Space 9-A, Wappingers Falls, NY, 12590

Zoning District: CMU Existing site area: _____

Owner Information:

Name: DLC Management Corp.

Address: 565 Taxter Rd. 4th Flr.

City: Elmsford State: NY Zip: 10523

Contact Numbers: (H) 260-258-5188 (C) _____

(E-mail) gsladek@dlcmgmt.com

Applicant Information:

(Please provide if someone other than the property owner is the applicant)

Name: Murat Gunes

Address: 9 Degamma Hill Rd.

City: Wappingers Falls State: NY Zip: 12590

Contact Numbers: (H) 914-703-5881 (C) _____

E-mail Address: dewran08@hotmail.com

Lead Design Professional: (If applicable)

(Indicate the primary design professional associated with this application)

Name: Michael Gillespie

Title: Professional Engineer

Architect Engineer

Company: M. Gillespie + Associates

Address: 847 Route 376, Wappingers Falls, NY 12590

Telephone #: (845) 227-6227

E-mail Address: mgillespie@mgaengrs.com



VILLAGE OF WAPPINGERS FALLS
APPLICATION FOR PLANNING BOARD REVIEW
 (Continued)

Proposed Site:

(Property where improvements are proposed)

Existing Use(s): Bagel shop / closed

Proposed square footage: 1,800 sf

Project Description : *(Please print or type)*

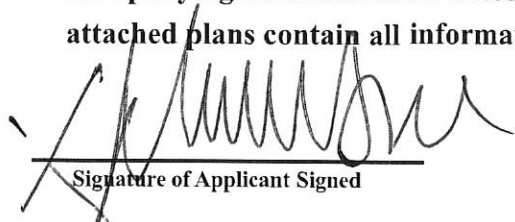
(Describe the project in detail indicating all areas of work, type(s) of improvement and materials to be used as a part of the proposed improvements. Use additional sheets if necessary.)

The applicant is proposing a new business in an existing unit. Interiorly, the applicant is proposing to replace 2 bathroom sinks w/ vanity sinks, 2 toilets, replace kitchen sink w/ new faucets, install new gas stove, remove electrical wall outlets from seating space, remove + replace flooring, paint whole restaurant, remove ceiling saffets of 10 sf + replace w/ sheet rock.

Items to be submitted for review: (Only items pertaining to project)

- Ten (10) sets of plans.
- Legal Documents (Right of Ways/Easements/Lease/Contracts of Sale, etc.)
- Consent Form
- Application for proposed sign
- Application Fee
- Proof that the taxes, utility bills and fines for the property are paid in full.

With the completion of this application, I hereby state that the information provided and all Accompanying documentation is accurate to the best of my knowledge, and that the attached plans contain all information required by the appropriate checklist.


 Signature of Applicant Signed

9/15/22 Date

Office use only:

[] FEE : _____ Receipt No. : _____ Cash / Check # _____ Date: _____

Revised by : _____ Revision date : _____
 Zoning Administrator/Code Enforcement Officer



VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning
2582 South Avenue
Wappingers Falls, NY 12590

Phone: (845) 297-5277 Fax: (845) 296-0379 E-mail:
bmurphy@wappingersfallsny.gov

www.wappingersfallsny.gov

CONSENT FORM

Name of property owner: Imperial Improvements, LLC

Address of property owner: 565 Taxter Rd.

City: Elmsford State: NY Zip: 10523

Phone number of property owner: (Include home, work, mobile number and e-mail address):

(H) _____ (C) _____

(W) 260-258-5188 (Email) gsladek@dlcmgmt.com

Address of site where work is being conducted: 1572 Rt 9, Imperial Plaza, Space 9-A

Wappingers Falls, NY 12590

Description of work: Remove & replace vinyl flooring, replace bathroom toilets, install new bathroom vanity sinks. Remove 10 ft ceiling soffets replacing w/sheetrock, Install new gas stove, install new kitchen sink & faucet. Paint whole resturant.

Name of person doing work: Gallegos Construction Corp

Address of person doing work: 1000 Lower South St.

City: Peekskill State: NY Zip: 10566

Phone number of person doing work (Include home, work, mobile numbers and e-mail address):

(H) _____ (C) 914-382-3759

(W) 914-930-1058 (Email) gmgfabricator@gmail.com

I, as property owner for the above mentioned property, am aware of all work described above and give my consent to the aforementioned person to do the work.

SLC

Signature of Property Owner

5/17/22

Date Signed

PART "A"
OWNER AFFIDAVIT

State of New York }
County of Westchester } ss:

Jordan Colick being duly sworn, deposes and says:

1. That I/we are the Owner(s) of the within property as described in the foregoing application for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That I/we hereby authorize Palmer Business Services James Tyson to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application:
City of Wappingers Falls
3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action.
4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
6. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

Jordan Colick
Applicant/Owner

[Signature]
Applicant/Owner

Sworn to before me this 25 day of October, 2022

Marcelise Doran Watts
Notary Public

Marcelise Doran Watts
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01WA6419286
Qualified in Westchester County
Commission Expires July 6, 2025

PART "B"
APPLICANT / AGENT AFFIDAVIT

New York TB

State of Dutchess
County of Dutchess

ss:

Murat Gunes being duly sworn, deposes and says:

1. That I/we are the Murat Gunes named in the foregoing application for Planning Board for Subdivision / Lot Line Change / Site Plan / Land Contour / Aquatic Resource approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That he/she resides at or conducts business at 1572 Rt 9, Suite 9-A in the County of Dutchess and the State of NEW YORK.
3. That I/we understand that by submitting this application for Planning Board approval that I/we expressly grant permission to the Planning Board and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Planning Board action. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Village related to this application.
4. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Village Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Planning Board, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Village of Wappingers Falls, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Village Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Village official(s) entering the property for the purpose of conducting inspections.
5. That I/we understand that the Village of Wappingers Falls Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we has examined this affidavit and that it is true and correct.

[Signature]
Applicant/Agent

Applicant/Agent

Sworn to before me this 17 day of June, 2022.

[Signature]
Notary Public

TYREIK BROWN
Notary Public, State of New York
Reg. No. 01BR6372312
My Commission Expires 03/19/2026

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD

CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE

<p>1a. Legal Name and address of Insured (Use street address only)</p> <p>GALLEGOS CONTRACTORS CORP. 1000 LOWER SOUTH STREET PEEKSKILL, NEW YORK 10566</p> <p>Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e. a Wrap-Up Policy)</p>	<p>1b. Business Telephone Number of Insured 914-382-3759</p> <p>1c. NYS Unemployment Insurance Employer Registration Number of Insured</p> <p>1d. Federal Employer Identification Number of Insured or Social Security Number 85-4365512</p>
<p>2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)</p> <p>THE VILLAGE OF WAPPINGERS FALLS BUILDING DEPARTMENT 2582 SOUTH AVENUE WAPPINGERS FALLS, NY 12590</p>	<p>3a. Name of Insurance Carrier MERCHANTS MUTUAL INSURANCE CO.</p> <p>3b. Policy Number of entity listed in box "1a": WCA 9103274</p> <p>3c. Policy effective period: 02/17/2022 to 02/17/2023</p> <p>3d. The Proprietor, Partners or Executive Officers are: included. (Only check box if all partners/officers included) <input checked="" type="checkbox"/> all excluded or certain partners/officers excluded.</p> <p>3e. Demolition is: (Definition of Demolition on Reverse) included. <input checked="" type="checkbox"/> excluded.</p>

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. (To use this form, New York (NY) must be listed under **Item 3A** on the INFORMATION PAGE of the workers' compensation insurance policy). The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

The Insurance Carrier will also notify the above certificate holder within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for a maximum of one year after this form is approved by the insurance carrier or its licensed agent.

Please Note: Upon the cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

Approved by: ERIC UNTERREINER
(Print name of authorized representative or licensed agent of insurance carrier)

Approved by: [Signature] 5/4/2022
(Signature) (Date)

Title: AGENT

Telephone Number of authorized representative or licensed agent of insurance carrier: 914-737-0021

Please Note: Only insurance carriers and their licensed agents are authorized to issue the C-105.2 form. Insurance brokers are NOT authorized to issue it.
C-105.2 (12-03)

Collection: Town & County 2022

Fiscal Year Start: 1/1/2022

Fiscal Year End: 12/31/2022

Warrant Date: 12/13/2021

Total Tax Due (minus penalties & interest) \$0.00

Entered	Posted	Total	Tax Amount	Penalty	Surcharge	Via	Type
2/17/2022	2/17/2022	\$24,076.90	\$24,076.90	\$0.00	\$0.00	Mail	Full Payment - Multi-Payment
Tax Bill #		SWIS		Tax Map #		Status	
000513		135601		6158-15-589264-0000		Payment Posted	
Address			Municipality			School	
1574-1576 Route 9			Town of Wappinger			Wappingers CSD	

Owners	Property Information	Assessment Information
Imperial Improvements	Roll Section: 1	Full Market Value: 5600000.00
Attn: DLC Mgmt Corp	Property Class: Nbh shop ctr	Total Assessed Value: 5600000.00
565 Taxter Rd Fl 4	Lot Size: 7.00	Uniform %: 100.00
Elmsford, NY 10523		

Description	Tax Levy	Percent Change	Taxable Value	Rate	Tax Amount
NON-HOMESTEAD PARCEL		0.0000	0.000	0.00000000	\$0.00
County Tax	99727185	-5.3000	5600000.000	2.84887800	\$15,953.72
Town Inside Tax	400456	3.7000	5600000.000	1.45056700	\$8,123.18

Total Taxes: \$24,076.90

Estimated State Aid - Type	Amount
County	85590144.00
Town	951208.00

Mail Payments To:
 Lee Anne Freno
 Receiver of Taxes
 20 Middlebush Road Wappingers Falls, NY 12590

Collection: Town & County 2022

Fiscal Year Start: 1/1/2022

Fiscal Year End: 12/31/2022

Warrant Date: 12/13/2021

Total Tax Due (minus penalties & interest) \$0.00

Entered	Posted	Total	Tax Amount	Penalty	Surcharge	Via	Type
2/17/2022	2/17/2022	\$1,386.14	\$1,386.14	\$0.00	\$0.00	Mail	Full Payment - Multi-Payment
Tax Bill #		SWIS		Tax Map #		Status	
000514		135601		6158-15-589264-0001		Payment Posted	
Address			Municipality			School	
18 New Hackensack Rd			Town of Wappinger			Wappingers CSD	

Owners	Property Information	Assessment Information
Imperial Improvements	Roll Section: 1	Full Market Value: 322400.00
Attn: DLC Mgmt Corp	Property Class: Auto carwash	Total Assessed Value: 322400.00
565 Taxter Rd Fl 4	Lot Size: 0.41	Uniform %: 100.00
Elmsford, NY 10523		

Description	Tax Levy	Percent Change	Taxable Value	Rate	Tax Amount
NON-HOMESTEAD PARCEL		0.0000	0.000	0.00000000	\$0.00
County Tax	99727185	-5.3000	322400.000	2.84887800	\$918.48
Town Inside Tax	400456	3.7000	322400.000	1.45056700	\$467.66

Total Taxes: \$1,386.14

Estimated State Aid - Type	Amount
County	85590144.00
Town	951208.00

Mail Payments To:

Lee Anne Freno
 Receiver of Taxes
 20 Middlebush Road Wappingers Falls, NY 12590

Collection: Town & County 2022

Fiscal Year Start: 1/1/2022

Fiscal Year End: 12/31/2022

Warrant Date: 12/13/2021

Total Tax Due (minus penalties & interest) \$0.00

Entered	Posted	Total	Tax Amount	Penalty	Surcharge	Via	Type
2/17/2022	2/17/2022	\$14,308.56	\$14,308.56	\$0.00	\$0.00	Mail	Full Payment - Multi-Payment
Tax Bill #		SWIS		Tax Map #		Status	
000515		135601		6158-19-575182-0000		Payment Posted	
Address			Municipality			School	
1572 Route 9			Town of Wappinger			Wappingers CSD	

Owners	Property Information	Assessment Information
Imperial Improvements	Roll Section: 1	Full Market Value: 3328000.00
Attn: DLC Mgmt Corp	Property Class: Nbh shop ctr	Total Assessed Value: 3328000.00
565 Taxter Rd Fl 4	Lot Size: 4.60	Uniform %: 100.00
Elmsford, NY 10523		

Description	Tax Levy	Percent Change	Taxable Value	Rate	Tax Amount
NON-HOMESTEAD PARCEL		0.0000	0.000	0.00000000	\$0.00
County Tax	99727185	-5.3000	3328000.000	2.84887800	\$9,481.07
Town Inside Tax	400456	3.7000	3328000.000	1.45056700	\$4,827.49

Total Taxes: \$14,308.56

Estimated State Aid - Type	Amount
County	85590144.00
Town	951208.00

Mail Payments To:

Lee Anne Freno
 Receiver of Taxes
 20 Middlebush Road Wappingers Falls, NY 12590

Invoices by GL Detail Generated: 05/05/2022 11:24
AM EDT

GL Account	Property	Inv No	Inv Date	Post Period	Line Description	Vendor	Line Amount	Submitted Date	Created By	Last Approved By	Status
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011822-46634	01/18/2022	01/2022	a/c21002546634	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.05	01/26/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3932 2/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011822-48978	01/18/2022	01/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$37.64	01/26/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3933 2/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011922-17015	01/19/2022	01/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$37.51	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3935 2/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011922-17502	01/19/2022	01/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$169.90	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3936 2/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011922-18286	01/19/2022	01/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$99.70	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3937 2/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011922-52459	01/19/2022	01/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$45.34	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3940 2/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	011922A17015	01/19/2022	02/2022	a/c21003017668	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.36	02/09/2022	Kevin Manganello	Alexandra Gatto	Paid(CHK #3956 2/15/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021722-17130	02/17/2022	02/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$40.42	02/28/2022	Kevin Manganello	Alexandra Gatto	Paid(CHK #3977 3/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021722-17502	02/17/2022	02/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$114.71	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3978 3/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021722-17668	02/17/2022	02/2022	a/c21003017668	CENTRAL HUDSON GAS & ELECTRIC CORP	\$35.44	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3979 3/1/2022)

DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021722-18286	02/17/2022	02/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$122.08	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3980 3/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021722-52459	02/17/2022	02/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$73.02	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3984 3/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021822-46634	02/18/2022	02/2022	a/c21002546634	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.01	02/28/2022	Kevin Manganello	Alexandra Gatto	Paid(CHK #3985 3/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	021822-48978	02/18/2022	02/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$107.42	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3986 3/1/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031722-46634	03/17/2022	03/2022	a/c21002546634	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.08	03/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4009 3/29/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031722-48978	03/17/2022	03/2022	a/c 21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$40.64	03/25/2022	Kevin Manganello	Danielle Senande	Paid(CHK #4010 3/29/2022)

GL Account	Property	Inv. No	Inv. Date	Post Period	Line Description	Vendor	Line Amount	Submitted Date	Created By	Last Approved By	Status
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031822-17130	03/18/2022	03/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$46.86	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4012 3/29/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031822-17502	03/18/2022	04/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$134.88	04/06/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4029 4/6/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031822-17668	03/18/2022	03/2022	a/c21003017668	CENTRAL HUDSON GAS & ELECTRIC CORP	\$36.07	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4013 3/29/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031822-18286	03/18/2022	03/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$170.26	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4014 3/29/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	031822-52459	03/18/2022	03/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$76.18	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4016 3/29/2022)

DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	041922-46634	04/19/2022	05/2022	a/c21002546634	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.08	05/03/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4054 5/3/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	041922-48978	04/19/2022	05/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$72.58	05/03/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4055 5/3/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121521-17130	12/15/2021	01/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$40.63	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3913 1/11/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121521-17502	12/15/2021	01/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.21	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3914 1/11/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121521-17668	12/15/2021	01/2022	a/c21003017668	CENTRAL HUDSON GAS & ELECTRIC CORP	\$36.61	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3915 1/11/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121521-18286	12/15/2021	01/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$39.74	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3916 1/11/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121521-46634	12/15/2021	01/2022	a/c21002546634	CENTRAL HUDSON GAS & ELECTRIC CORP	\$33.05	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3918 1/11/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121521-52459	12/15/2021	01/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$72.01	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3921 1/11/2022)
DL60601000 (NON - CAM ELECTRIC)	Imperial Improvements, LLC	121621-48978	12/16/2021	01/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$58.37	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3924 1/11/2022)
DL60601000 (NON - CAM ELECTRIC) Sub-Total:							\$1,939.85				
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	011822-48978	01/18/2022	01/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$273.34	01/26/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3933 2/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	011922-17015	01/19/2022	01/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$3.92	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3935 2/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	011922-17502	01/19/2022	01/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$27.55	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3936 2/1/2022)

DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	011922-18286	01/19/2022	01/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$196.51	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3937 2/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	011922-52459	01/19/2022	01/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$150.63	01/31/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3940 2/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	021722-17130	02/17/2022	02/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$42.96	02/28/2022	Kevin Manganello	Alexandra Gatto	Paid(CHK #3977 3/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	021722-17502	02/17/2022	02/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$42.22	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3978 3/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	021722-18286	02/17/2022	02/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$292.64	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3980 3/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	021722-52459	02/17/2022	02/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$192.19	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3984 3/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	021822-48978	02/18/2022	02/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$298.91	02/25/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3986 3/1/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	031722-48978	03/17/2022	03/2022	a/c 21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$263.94	03/25/2022	Kevin Manganello	Danielle Senande	Paid(CHK #4010 3/29/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	031822-17130	03/18/2022	03/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$93.47	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4012 3/29/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	031822-17502	03/18/2022	04/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$264.07	04/06/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4029 4/6/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	031822-18286	03/18/2022	03/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$204.19	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4014 3/29/2022)

DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	031822-52459	03/18/2022	03/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$123.36	03/29/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4016 3/29/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	041922-48978	04/19/2022	05/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$52.01	05/03/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #4055 5/3/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	121521-17130	12/15/2021	01/2022	a/c21003017130	CENTRAL HUDSON GAS & ELECTRIC CORP	\$81.94	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3913 1/11/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	121521-17502	12/15/2021	01/2022	a/c21003017502	CENTRAL HUDSON GAS & ELECTRIC CORP	\$56.95	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3914 1/11/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	121521-18286	12/15/2021	01/2022	a/c21003018286	CENTRAL HUDSON GAS & ELECTRIC CORP	\$118.72	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3916 1/11/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	121521-52459	12/15/2021	01/2022	a/c21003052459	CENTRAL HUDSON GAS & ELECTRIC CORP	\$70.16	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3921 1/11/2022)
DL60602000 (NON - CAM GAS)	Imperial Improvements, LLC	121621-48978	12/16/2021	01/2022	a/c21002548978	CENTRAL HUDSON GAS & ELECTRIC CORP	\$76.09	01/05/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3924 1/11/2022)
DL60602000 (NON - CAM GAS) Sub-Total:							\$2,925.77				
DL60604000 (NON - CAM WATER/SEWER)	Imperial Improvements, LLC	013122-27400	01/31/2022	02/2022	a/c0000137400	VILLAGE OF WAPPINGERS FALLS	\$154.85	02/17/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3964 2/22/2022)
GL Account	Property	Inv. No	Inv. Date	Post Period	Line Description	Vendor	Line Amount	Submitted Date	Created By	Last Approved By	Status
DL60604000 (NON - CAM WATER/SEWER)	Imperial Improvements, LLC	013122-33900	01/31/2022	02/2022	a/c0000133900	VILLAGE OF WAPPINGERS FALLS	\$154.85	02/17/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3965 2/22/2022)
DL60604000 (NON - CAM WATER/SEWER)	Imperial Improvements, LLC	013122-34200	01/31/2022	02/2022	a/c0000134200	VILLAGE OF WAPPINGERS FALLS	\$154.85	02/17/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3966 2/22/2022)
DL60604000 (NON - CAM WATER/SEWER)	Imperial Improvements, LLC	013122-36000	01/31/2022	02/2022	a/c0000136000	VILLAGE OF WAPPINGERS FALLS	\$154.85	02/17/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3967 2/22/2022)

DL60604000 (NON - CAM WATER/SEWER)	Imperial Improvements, LLC	013122-36800	01/31/2022	02/2022	a/c0000136800	VILLAGE OF WAPPINGERS FALLS	\$154.85	02/17/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3968 2/22/2022)	
DL60604000 (NON - CAM WATER/SEWER)	Imperial Improvements, LLC	013122-37300	01/31/2022	02/2022	a/c0000137300	VILLAGE OF WAPPINGERS FALLS	\$163.52	02/17/2022	Kevin Manganello	Kevin Manganello	Paid(CHK #3969 2/22/2022)	
DL60604000 (NON - CAM WATER/SEWER) Sub-Total:							\$937.77					
tal							\$5,803.39					
							\$5,803.39					

**INVOICES BY GL DETAIL
GENERATED: 05/05/2022 11:24 AM EDT**

**VENDOR: All
PERIOD: 01/2022 - 05/2022
INVOICE STATUS: All**

ASSIGNED GL CODE(s): Non - Cam Electric, Non - Cam Gas, Non - Cam Water/Sewer, Non - Cam Utilities, Non - Cam Telephone/Beeper CREATED

**BY: All
APPROVED BY: All
Unit: All**

**ONLY INVOICES W/O PURCHASE ORDERS: No
ONLY INCLUDE CAPITAL EXPENDITURES: No
PROPERTIES: Imperial Improvements, LLC**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/25/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Kaplan Insurance Agency Inc 12 Barristers Row Wappingers Falls, NY 12590	CONTACT NAME: Harrison Kaplan	
	PHONE (A/C, No, Ext): (845)297-3266	FAX (A/C, No): (845)297-3387
E-MAIL ADDRESS: hkap24@yahoo.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Mediterranean Cuisine & Grill LLC 9 Degarmo Hills Rd Wappingers Falls, NY 12590	INSURER A: New York Central Mutual	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 02025420-36719

REVISION NUMBER: 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> GE <input type="checkbox"/> PRO <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER:	Y		6173231	05/24/2022	05/24/2023	EACH OCCURRENCE	\$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 2,000,000
							GENERAL AGGREGATE	\$ 4,000,000
							PRODUCTS - COMP/OP AGG	\$ 4,000,000
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE	OTHER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

Harrison Kaplan

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Restaurant

Certificate holder is provided additional insured status when required by written contract

CERTIFICATE HOLDER

CANCELLATION

**Imperial Improvements, LLC c/o
DLC Management Corporation
565 Taxter Road
Attn.: General Counsel
Elmsford, NY 10523**

**SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE
THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN
ACCORDANCE WITH THE POLICY PROVISIONS.**

AUTHORIZED REPRESENTATIVE

(HAK)

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ACORD 25 (2016/03)

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Short Environmental Assessment Form

Part 1 - Project Information

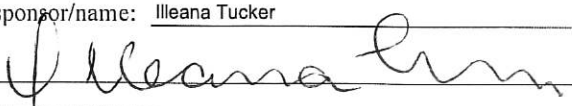
Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

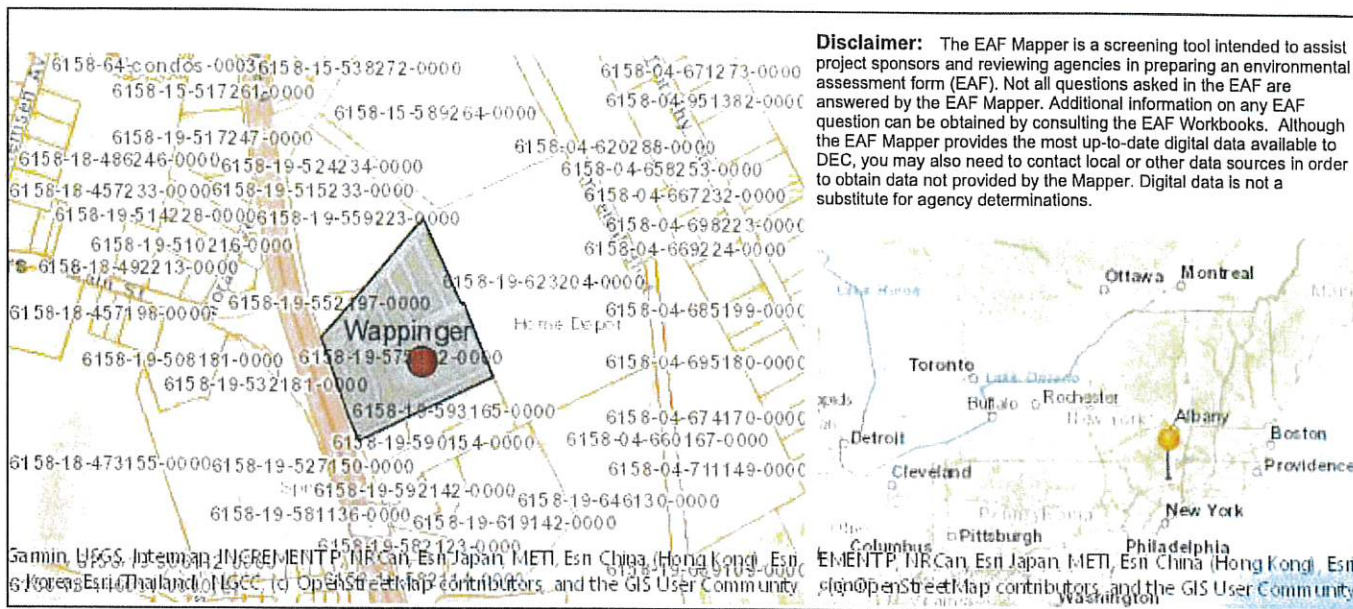
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project: Mediterranean Cuisine & Grill			
Project Location (describe, and attach a location map): 1572 Route 9 (Suite 9A), Wappingers Falls			
Brief Description of Proposed Action: The applicant is propose a new business in an existing plaza.			
Name of Applicant or Sponsor: Murat Gunes		Telephone: (845) 765-0710	
Address: 9 Degarmo Hills Roa		E-Mail: dewran08@hotmail.com	
City/PO: Wappingers Falls		State: NY	Zip Code: 12590
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ 4.60 acres			
b. Total acreage to be physically disturbed? _____ 0.0 acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

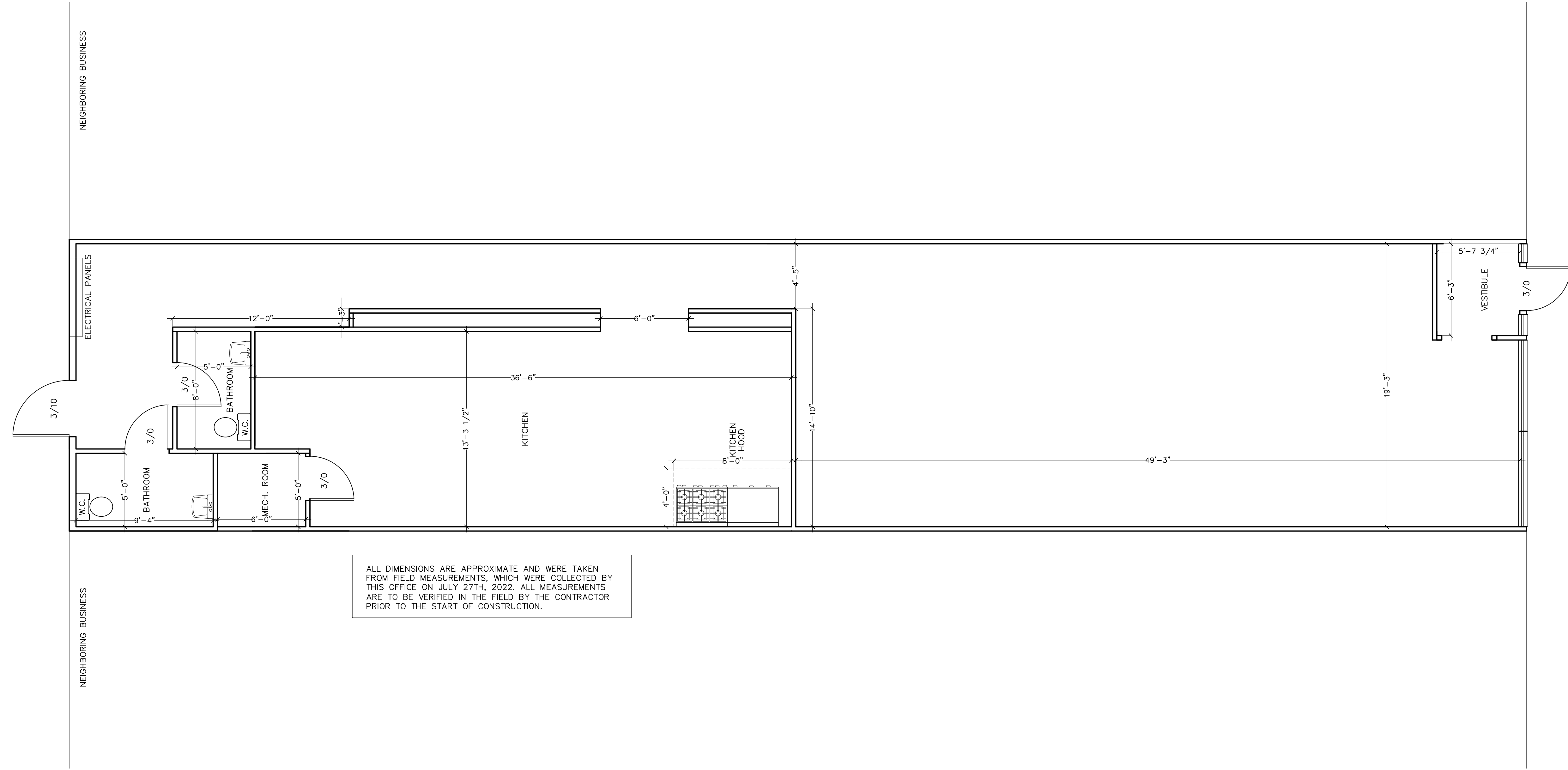
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: Meet energy code requirements _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:		
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered? Pied-billed Grebe, Indiana Bat	NO	YES
	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:_____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>Ileana Tucker</u> Date: <u>September 15, 2022</u>		
Signature:  Title: <u>Agent</u>		

PRINT FORM



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	No
Part 1 / Question 15 [Threatened or Endangered Animal]	Yes
Part 1 / Question 15 [Threatened or Endangered Animal - Name]	Pied-billed Grebe, Indiana Bat
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	No



ALL DIMENSIONS ARE APPROXIMATE AND WERE TAKEN FROM FIELD MEASUREMENTS, WHICH WERE COLLECTED BY THIS OFFICE ON JULY 27TH, 2022. ALL MEASUREMENTS ARE TO BE VERIFIED IN THE FIELD BY THE CONTRACTOR PRIOR TO THE START OF CONSTRUCTION.

EXISTING FLOOR PLAN

SCALE: 1/4" = 1'-0"



PROJECT No. 2022-108
DRAWN BY: P.B.
CHECKED BY: M.E.G.
REVISIONS:

NYSPE #074666

SHEET No.

P1

RESTAURANT PLAN

SARA'S MEDITERRANEAN GRILL
1572 ROUTE 9, SUITE A, VILLAGE OF WAPPINGERS FALLS, NEW YORK- SEPTEMBER 15, 2022

DIVISION 1 - GENERAL CONDITIONS:

CODES: ALL WORK & MATERIALS MUST CONFORM TO THE NEW YORK STATE BUILDING CODE, LOCAL BUILDING CODES, NATIONAL BOARD OF FIRE UNDERWRITERS CODE AND TO THE REQUIREMENTS OF THE BOARD OF HEALTH & N.Y.S. ENERGY CONSERVATION CODE.

OMISSION: ANYTHING NOT SPECIFICALLY SHOWN HEREON AND/OR SPECS, BUT WHICH IS REASONABLY IMPLIED, SHALL BE FURNISHED AS THOUGH SET FORTH IN THE PLANS AND/OR SPECIFICATIONS. ALL WRITTEN FIGURES, NOTES & DIMENSIONS ON THE FLOOR PLANS, OR SPECIFICATIONS SHALL TAKE PRECEDENCE OVER ANY DRAWN FIGURES. DO NOT SCALE PRINTS. ALL DIMENSIONS MUST BE VERIFIED IN THE FIELD BY THE CONTRACTOR BEFORE START OF CONSTRUCTION. ANY DISCREPANCIES ON THE PLANS, OR SPECIFICATIONS, MUST BE REPORTED TO THE ENGINEER PRIOR TO THE START OF CONSTRUCTION.

ALL PERMITS ARE NOT THE RESPONSIBILITY OF THE ENGINEER.

MATERIALS: ALL MATERIALS SHALL BE NEW AND INSTALLED IN ACCORDANCE WITH THE MANUFACTURER'S SPECIFICATIONS.

SUBSTITUTIONS: SUBSTITUTIONS MADE FOR STRUCTURAL MATERIALS SPECIFIED BY NAME MAY BE MADE ONLY IF APPROVED BY ENGINEER.

OWNERSHIP OF PLANS: THESE PLANS ARE PROPERTY OF M. GILLESPIE & ASSOC. CONSULTING ENGINEERING. ANY USE OR REPRODUCTION, IN WHOLE OR PART, WITHOUT THE WRITTEN CONSENT OF M. GILLESPIE & ASSOC. IS PROHIBITED. ANY PERSON, OR CORPORATION, USING PLANS WITHOUT CONSENT WILL BE RESPONSIBLE TO COMPENSATE M. GILLESPIE & ASSOC.

ENGINEER'S STATUS: THE ENGINEER HAS NOT BEEN RETAINED BY OWNER TO PROVIDE PERIODIC JOB INSPECTIONS OR JOB ADMINISTRATION AND SHALL NOT BE RESPONSIBLE FOR CHANGES MADE IN THE FIELD WITHOUT WRITTEN OR GRAPHIC AUTHORIZATION.

DIVISION 3 - CONCRETE:

ALL CONCRETE USED SHALL HAVE A MINIMUM COMPRESSIVE STRENGTH OF 3,500 PSI AT 28 DAYS UNLESS OTHERWISE NOTED. ALL CONCRETE WORK SHALL BE DONE IN COMPLETE CONFORMANCE TO APPLICABLE ACI CODES.

DIVISION 7 - THERMAL & MOISTURE PROTECTION:

INSULATION: ALL INSULATION SHALL BE INSTALLED IN ACCORDANCE WITH THE N.Y.S. ENERGY CONSERVATION CODE.

CAULKING: ALL EXTERIOR JOINTS BETWEEN WINDOWS, DOORS AND OTHER SURFACES SHALL BE CAULKED USING A WEATHERPROOF CAULKING.

DIVISION 8 - DOORS & WINDOWS:

WINDOWS: ALL WINDOWS SHALL MEET THE MINIMUM REQUIREMENTS FOR LIGHT, VENTILATION AND EGRESS. ALL WINDOWS SHALL BE OF SUFFICIENT CONSTRUCTION SO AS TO MEET THE N.Y.S. ENERGY CONSERVATION CODE.

DIVISION 9 - FINISHES:

DRYWALL: DRYWALL SHALL BE 5/8" GYPSUM BOARD SECURELY SCREWED ACCORDING TO THE MANUFACTURER'S SPECIFICATIONS. ALL JOINTS ARE TO BE TAPED AND SHALL RECEIVE (3) COATS OF JOINT COMPOUND. FINISHES TO BE SMOOTH, EVEN AND READY FOR PAINTING.

DIVISION 15 - MECHANICAL:

FLASHING: ALL PIPES PASSING THROUGH ROOF SHALL BE MADE WATER-TIGHT.

TESTING: THE CONTRACTOR SHALL TEST ALL WATER SUPPLY AND DRAIN, WASTE AND VENT PIPING IN ACCORDANCE WITH ALL CODES.

DIVISION 16 - ELECTRICAL:

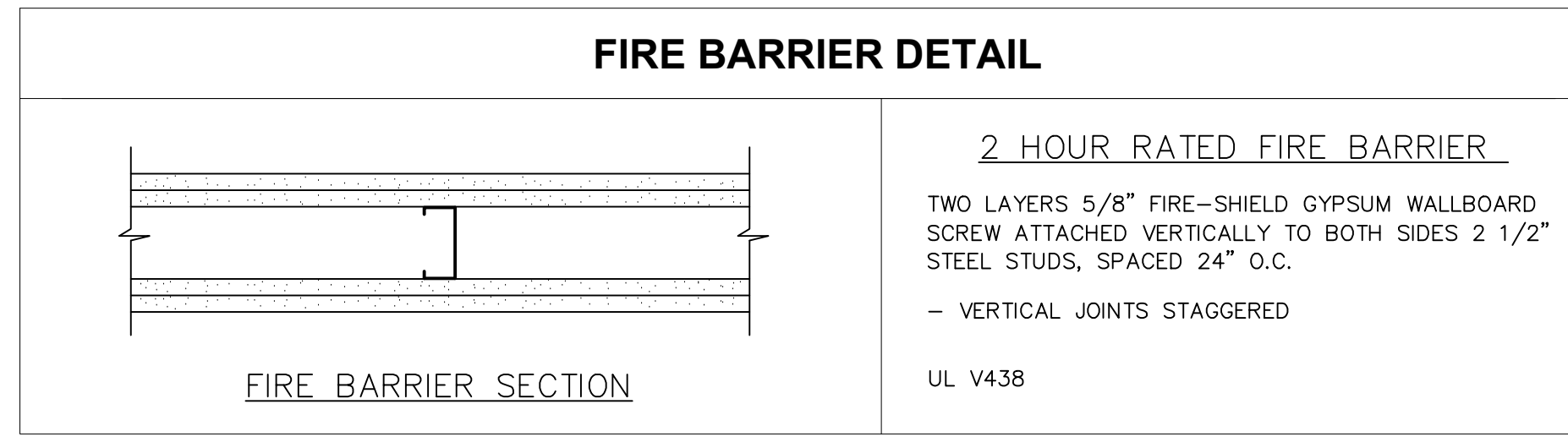
ALL ELECTRICAL WORK SHALL BE DONE IN STRICT CONFORMANCE WITH THE NATIONAL BOARD OF FIRE UNDERWRITERS AND LOCAL CODES.

LEGEND	
	QUANTUM EXIT/UNIT COMBO W/ 2 LAMP HEADS & BATTERY
	PORTABLE FIRE EXTINGUISHER

THE REQUIRED PORTABLE FIRE EXTINGUISHERS ARE TO BE LOCATED IN PLAIN VIEW. THE EXTINGUISHERS ARE TO BE READILY ACCESSIBLE AND IMMEDIATELY AVAILABLE FOR USE. THE EXTINGUISHERS MAY BE HOUSED IN A CABINET, BUT MAY NOT BE LOCKED. EXTINGUISHER THAT WEIGHS 40 POUNDS OR LESS CAN BE INSTALLED SO THAT THE TOP IS NOT MORE THAN 5 FEET ABOVE THE FLOOR. EXTINGUISHER THAT WEIGHS MORE THAN 40 POUNDS SHALL BE INSTALLED SO THAT THE TOP IS NOT MORE THAN 3 1/2 FEET ABOVE THE FLOOR.

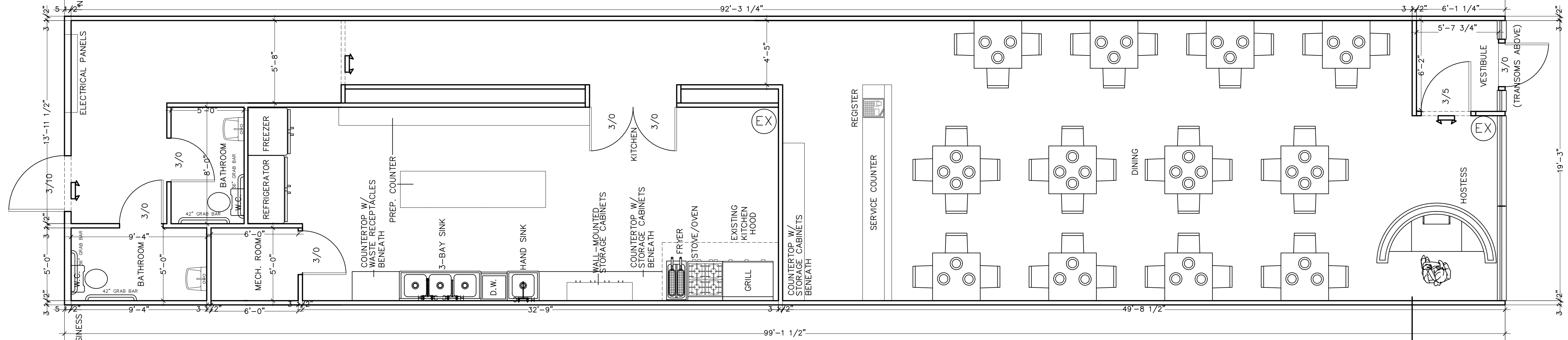
MINIMUM PLUMBING REQUIREMENTS (TABLE 2902.1) RESTAURANT	
WATER CLOSETS:	1 PER 75 (MALE & FEMALE)
LAVATORIES	1 PER 200 (MALE & FEMALE)
DRINKING FOUNTAINS:	1 PER 500**
OTHER:	1 SERVICE SINK

**WHERE WATER IS SERVED IN RESTAURANTS, DRINKING FOUNTAINS ARE NOT REQUIRED (410.3)



FINISH SCHEDULE	
1)	ALL INTERIOR WALL FINISHES TO BE 1/2" GYPSUM WALL BOARD.
2)	ALL PAINT TO BE BENJAMIN MOORE OR EQUAL. COLOR TO BE SELECTOR BY OWNER.
3)	ALL FLOORING TO BE LOCATED AS PER OWNER. COLORS AND TYPES TO BE SELECTED BY OWNER.
4)	ANY CARPET IS TO BE A HEAVY DUTY COMMERCIAL CARPET. MANUFACTURER TO BE CONTRACTORS CHOICE, COLOR TO BE SELECTED BY OWNER. CONTRACTOR TO SUBMIT SAMPLE TO OWNER PRIOR TO INSTALLATION. CARPET NOT TO BE LESS THAN CLASS II MATERIALS AND TO BE LABELED AS SUCH.
5)	ALL TRIM AS PER OWNER, COLOR AND STYLE TO BE SELECTED BY OWNER.
6)	ALL FIRE EXTINGUISHER CABINETS, BRACKETS AND FIRE EXTINGUISHERS AS SUPPLIED BY "LARSEN" OR EQUAL.
7)	PROVIDE VINYL SIGNS IN BOTH WRITTEN AND BRAILLE AT THE DOORS OF THE REST ROOMS
8)	ALL FURNITURE SHOWN ON PLANS IS CONCEPTUAL. OWNER TO MAKE ALL FINAL FURNITURE PLACEMENT/LAYOUT DECISIONS.

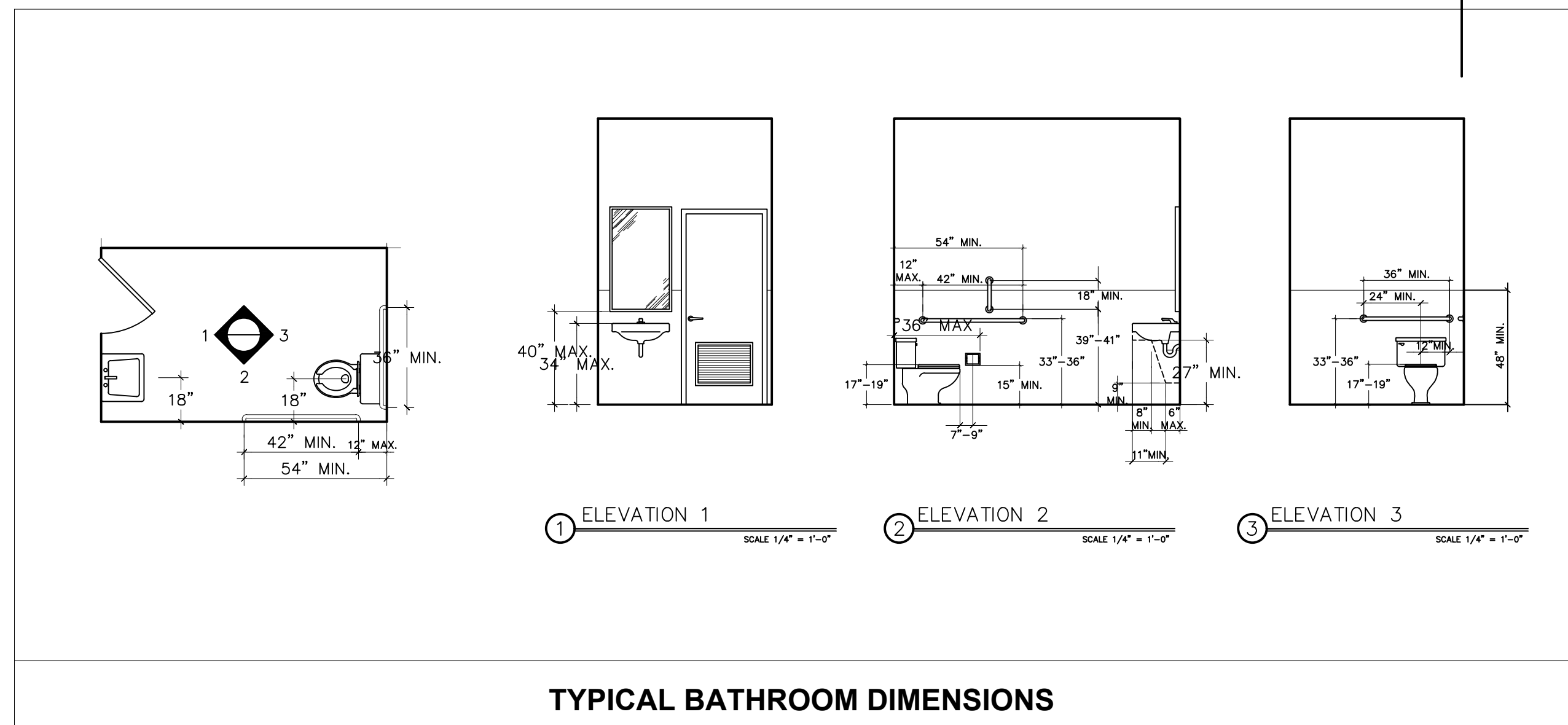
CODE CONFORMANCE	
2020 NEW YORK STATE BUILDING CODE:	
GROSS AREA OF NEW RESTAURANT SPACE:	1,919 SQ. FT.
OCCUPANCY CLASSIFICATION	ASSEMBLY GROUP "A-2" (303.3)
DINING AREA: ASSEMBLE UNCONCENTRATED NET AREA:	989 SQ.FT./15 SQ.FT. PER OCCUPANT = 65 OCCUPANTS, WHICH IS TO BE POSTED NEAR MAIN EXITS (TABLE 1004.1.1)
KITCHEN GROSS AREA	522.5 SQ.FT./200 SQ.FT. PER OCCUPANT = 2
AN AUTOMATIC SPRINKLER SYSTEM IS NOT REQUIRED FOR GROUP A-2 OCCUPANCIES WHERE THE OCCUPANT LOAD IS LESS THAN 100 (903.2.1.2)	
NUMBER OF EXITS REQUIRED: (2), NUMBER OF EXITS PROVIDED (2), (1015.1)	
A TYPE I HOOD IS TO BE INSTALLED ABOVE ALL COMMERCIAL COOKING APPLIANCES COMPLETE WITH A FIRE-EXTINGUISHING SYSTEM. HOOD TO BE INSPECTED AND MAINTAINED IN ACCORDANCE WITH NFPA 96.	
A FIRE BARRIER WITH 2-HOUR FIRE RATING IS TO BE PROVIDED BETWEEN THE "A-2" OCCUPANCY AND A "B" OCCUPANCY (TABLE 508.3.3)	
INTERIOR FINISHES:	
ROOMS AND ENCLOSED SPACES - CLASS B FLAME SPREAD 26-75; SMOKE-DEVELOPE 0-450	
AN AUTOMATIC SMOKE DETECTION SYSTEM IS TO BE PROVIDED FOR UNIT. DETECTORS ARE TO RECEIVE PRIMARY POWER FROM BUILDING WIRING AND WILL BE EQUIPPED WITH BATTERY BACKUP. DETECTORS TO BE INTERCONNECTED AND TIED INTO THE BUILDINGS SECURITY SYSTEM.	
ALL DIMENSIONS ARE TO BE FIELD VERIFIED PRIOR TO THE START OF CONSTRUCTION.	



CONTRACTOR ENSURE THERE IS A FIRE BARRIER WITH 2-HOUR FIRE RATING BETWEEN THE "A-2" OCCUPANCY AND A "B" OCCUPANCY. PARTITION IS TO BE A METAL STUD WALL WITH TWO LAYERS OF 5/8" FIRE RATED GYPSUM BOARD INSTALLED ON EACH SIDE OF WALL. WALL TO EXTEND FROM TOP OF SLAB TO THE UNDERSIDE OF THE ROOF AND TO BE SECURELY ATTACHED. THE WALLS SHALL BE CONTINUOUS THROUGH THE SUSPENDED CEILING. (706.5)

ALL DIMENSIONS ARE APPROXIMATE AND WERE TAKEN FROM FIELD MEASUREMENTS, WHICH WERE COLLECTED BY THIS OFFICE ON JULY 27TH, 2022. ALL MEASUREMENTS ARE TO BE VERIFIED IN THE FIELD BY THE CONTRACTOR PRIOR TO THE START OF CONSTRUCTION.

PROPOSED FLOOR PLAN
SCALE: 1/4" = 1'-0"



M. GILLESPIE & ASSOCIATES
CONSULTING ENGINEERING, P.L.L.C.
847 ROUTE 376 WAPPINGERS FALLS, NY 12590
TEL: 518-255-1000
WWW.MGILLESPIEASSOCIATES.COM

PROJECT No.	2022-108
DRAWN BY:	F.B.
CHECKED BY:	M.E.G.
REVISIONS:	

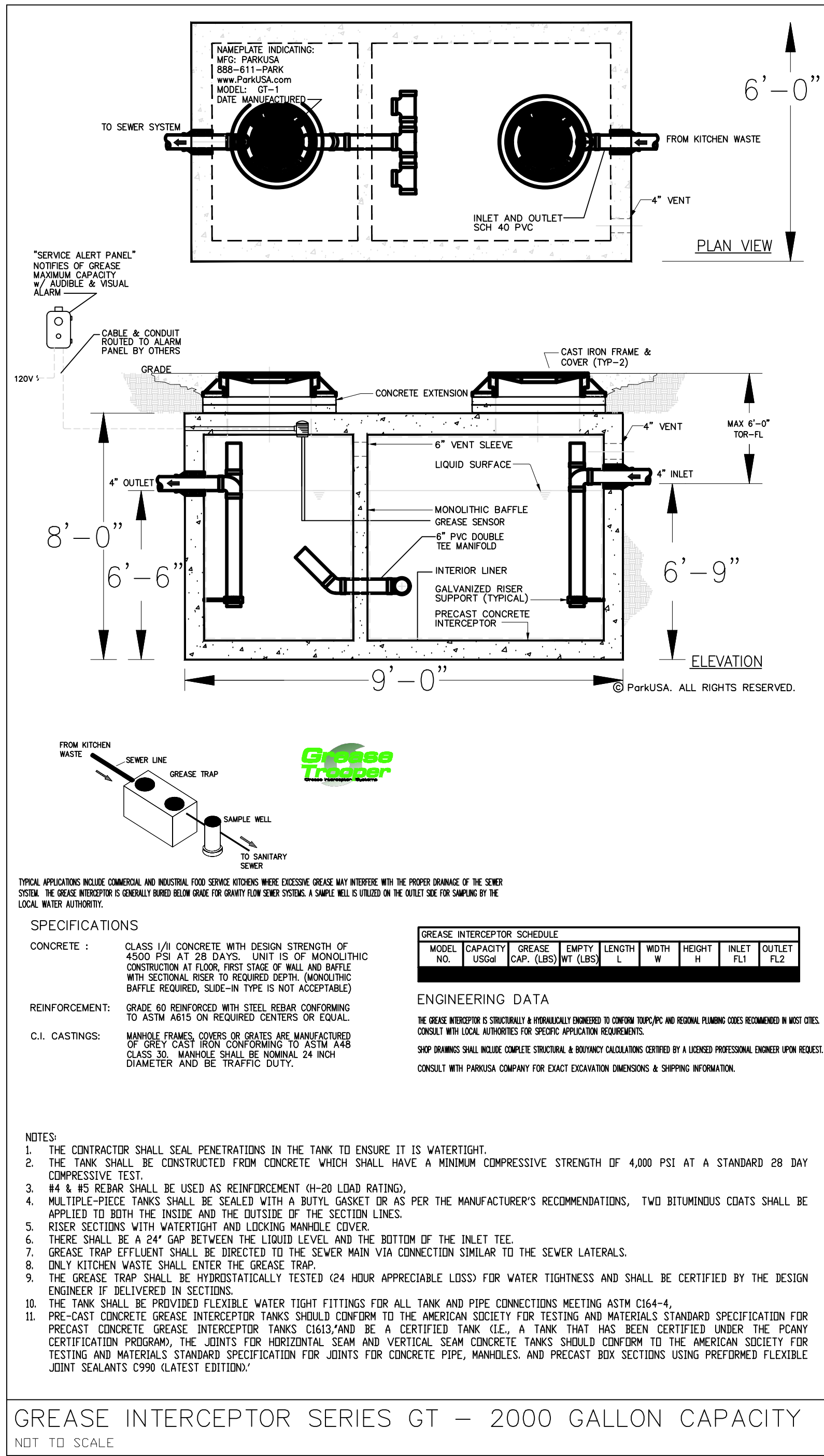
NYSPE #074666

SHEET No.



PARTIAL SITE PLAN

SCALE: 1" = 250'



GREASE INTERCEPTOR SCHEDULE

NO.	USGAL CAP.	WT (LBS)	LENGTH L	WIDTH W	HEIGHT H	INLET FL1	OUTLET FL2
1	2000	1200	9'-0"	6'-0"	8'-0"	4"	4"

ENGINEERING DATA

THE GREASE INTERCEPTOR IS STRUCTURALLY HYDRAULICALLY ENGINEERED TO CONTROL TRAPLOSS AND RETURN PLUMBING CODES RECOMMENDED IN MOST CODES. CONSULT WITH LOCAL AUTHORITIES FOR SPECIFIC APPLICATION REQUIREMENTS.

SHOP DRAWINGS SHALL INCLUDE COMPLETE STRUCTURAL & BOTANY CALCULATIONS CERTIFIED BY A LICENSED PROFESSIONAL ENGINEER UPON REQUEST. CONSULT WITH PARKUSA COMPANY FOR EXACT EXCAVATION DIMENSIONS & SHIPPING INFORMATION.

NOTES:

- THE CONTRACTOR SHALL SEAL PENETRATIONS IN THE TANK TO ENSURE IT IS WATERTIGHT.
- THE TANK SHALL BE CONSTRUCTED FROM CONCRETE WHICH SHALL HAVE A MINIMUM COMPRESSIVE STRENGTH OF 4,000 PSI AT A STANDARD 28 DAY COMPRESSIVE TEST.
- #4 & #5 REBAR SHALL BE USED AS REINFORCEMENT (4-20 LOAD RATING).
- MULTIPLE-PIECE TANKS SHALL BE SEALED WITH A BUTYL GASKET OR AS PER THE MANUFACTURER'S RECOMMENDATIONS. TWO BITUMINOUS COATS SHALL BE APPLIED TO BOTH THE INSIDE AND THE OUTSIDE OF THE SECTION LINES.
- RISER SECTIONS WITH WATERTIGHT AND LOCKING HANDLE COVER.
- THERE SHALL BE A 24" GAP BETWEEN THE LIQUID LEVEL AND THE BOTTOM OF THE INLET TEE.
- GREASE TRAP EFFLUENT SHALL BE DIRECTED TO THE SEWER MAIN VIA CONNECTION SIMILAR TO THE SEWER LATERALS.
- ONLY KITCHEN WASTE SHALL ENTER THE GREASE TRAP.
- THE GREASE TRAP SHALL BE HYDROSTATICALLY TESTED (24 HOUR APPRECIABLE LOSS) FOR WATER TIGHTNESS AND SHALL BE CERTIFIED BY THE DESIGN ENGINEER IF DELIVERED IN SECTIONS.
- THE TANK SHALL BE PROVIDED FLEXIBLE WATER TIGHT FITTINGS FOR ALL TANK AND PIPE CONNECTIONS MEETING ASTM C154-4.
- PRE-CAST CONCRETE GREASE INTERCEPTOR TANKS SHOULD CONFORM TO THE AMERICAN SOCIETY FOR TESTING AND MATERIALS STANDARD SPECIFICATION FOR PRECAST CONCRETE GREASE INTERCEPTOR TANKS C1613 AND BE A CERTIFIED TANK (I.E., A TANK THAT HAS BEEN CERTIFIED UNDER THE PCANY CERTIFICATION PROGRAM). THE JOINTS FOR HORIZONTAL SEAM AND VERTICAL SEAM CONCRETE TANKS SHOULD CONFORM TO THE AMERICAN SOCIETY FOR TESTING AND MATERIALS STANDARD SPECIFICATION FOR JOINTS FOR CONCRETE PIPE, MANHOLES, AND PRECAST BOX SECTIONS USING PREFORMED FLEXIBLE JOINT SEALANTS C990 (LATEST EDITION).

GREASE INTERCEPTOR SERIES GT - 2000 GALLON CAPACITY
NDT TO SCALE



LOCATION MAP

SCALE: 1" = 200'

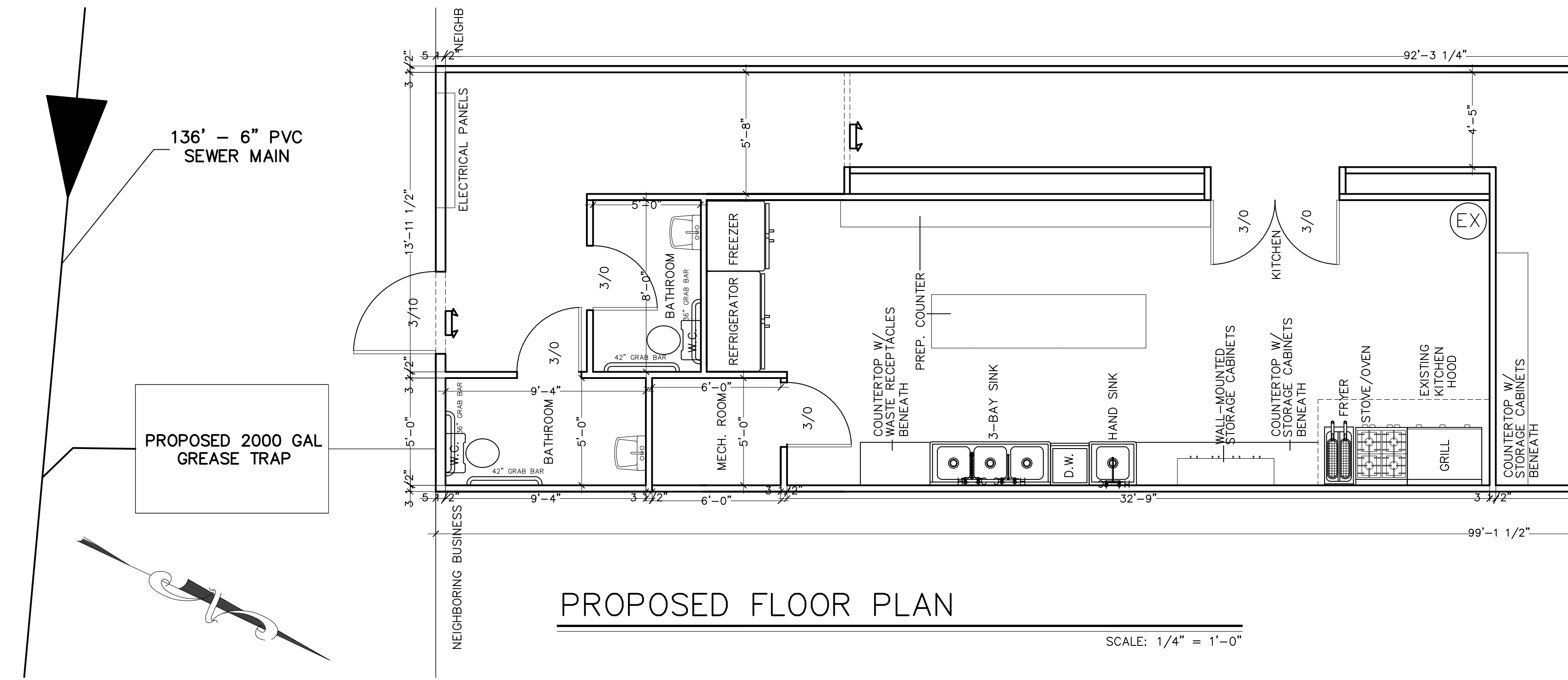
PARCEL INFORMATION

TAX GRID PARCEL NUMBER(S)	135601-6158-19-575182
ZONING DISTRICT	CB- 30
TOTAL AREA	4.60 ACRES
ADDRESS	1572 ROUTE 9
SCHDL DISTRICT	WAPPINGERS FALLS
FIRE DISTRICT	WAPPINGERS FALLS
SANITARY DISPOSAL	MUNICIPAL SEWER
WATER SUPPLY	MUNICIPAL WATER

PARTIAL SITE PLAN & GREASE TRAP DETAILS

SARA'S MEDITERRANEAN GRILL

1572 ROUTE 9, SUITE A, VILLAGE OF WAPPINGERS FALLS, NEW YORK- SEPTEMBER 15, 2022



PROPOSED FLOOR PLAN

SCALE: 1/4" = 1'-0"

M. GILLESPIE & ASSOCIATES

CONSULTING ENGINEERING, P.L.L.C.

847 ROUTE 376 - WAPPINGERS FALLS, NY 12590

WWW.MGILLESPIEASSOCIATES.COM

PROJECT No.	2022-108
DRAWN BY:	P.B.
CHECKED BY:	M.E.G.
REVISIONS	

NYSPE #074666

SHEET No.

P3



VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning
2582 South Avenue

Wappingers Falls, NY 12590

Phone: (845) 297-5277 Fax: (845) 296-0379

www.wappingersfallsny.gov

SIGN PERMIT APPLICATION

Name of Applicant Murat GUNES
Address 9 DEGANIMA Hill Rd.
WAPPINGERS FALLS, NY 12590
Email dewran08@hotmail.com
Phone 914-703-5881

Owner of Property DLC Management Corp.
Address 565 Taxter Rd, 4th FLR.
Elmsford, NY 10523
Phone 260-258-5188

Location of Property 1572 Route 9, Imperial Plaza, Suite 9-A, Wappingers
Near Frontage of building _____ Zoning District NY, 12590

Types of Signs Post & Arm Projecting Seasonal Multi-Tenant
 Wall Window Awning Free Standing Sidewalk

Sign Design All applications must be accompanied by a detailed scaled drawing showing all sign dimensions, graphic design (including lettering and pictorial matter), visual message (text, copy or content of sign), sign colors with color swatches, lighting, and landscaping

Sign Location All applications must be accompanied by a plan, drawn to scale showing the following
Freestanding signs- the position of the sign in relation to adjacent buildings, structures, roads, driveways, property lines, other signs, lighting fixtures, walls and fences.
Awning, Window, Wall or Projecting signs- the location on awning, window, wall or building, size of awning, total window area of principal façade, or lineal frontage of building (as appropriate), projection from building, if relevant, proposed signs position in relation to adjacent signs and lighting fixtures.

Sign Specifications Type WALL Placement Building Façade
Landscaping ___ Yes ___ No Size of Sign 36^{inches} Height 143 Width
 Single Faced Double Faced Lighted

The undersigned respectfully petitions the Village of Wappingers Falls Code Enforcement Officer for a Sign Permit.

Application is being made in accordance with the Village Zoning Code. The undersigned acknowledges that permanent signs require review and approval of the Planning Board. In order to be considered complete and ready for review by the Planning Board, the following needs to be submitted to the Zoning Clerk no less than 15 days prior to the scheduled Planning Board Meeting:

- Application form (ten sets)
- Sign design drawings (ten sets)
- Color swatch (if any color other than black/white)
- Fee for sign permit of \$75.00 per side (to be paid after Planning Board Approval)

Applicant Name MUPAT GUNES

Applicant Signature [Signature] Date: 8-9-2022

Owner of Property Signature Stephanie Baldwin Date: 8/9/2022

THIS SECTION TO BE COMPLETED BY THE CODE ENFORCEMENT OFFICER

Permit Granted: Date _____ Permit # issued _____

Permit Fee \$ _____ Receipt # _____ Date _____

Permit Application referred to Planning Board Date _____

Comments: _____



143"



36"

3/16" polycarbonate panel with printed / UV gloss laminated vinyl applied. Sign will fit into existing cabinet box.
Overall size is 143"w x 36"h. Blue background with white lettering and logo.



Customers Name: Sara's Mediterranean Grill

FASTSIGNS

PH: 845-298-5600
FAX: 845-297-0105

FASTSIGNS.COM/455

1839 South Rd Suite 2B, Wappingers Falls, NY 12590

SIGNS AND GRAPHICS REMAIN THE PROPERTY OF FASTSIGNS UNTIL PAID IN FULL

PLEASE CHECK EACH:

- FONT
- COLOR
- SPELLING
- POSITIONING
- SIZE

SIGNATURE OF APPROVAL

DATE



8/9/22

File Name:

Order #:

68550

COLORS OF PRINT ARE NOT EXACT * CHANGES ARE CHARGED SEPARATELY



VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning
2582 South Avenue

Wappingers Falls, NY 12590

Phone: (845) 297-5277 Fax: (845) 296-0379

www.wappingersfallsny.gov

SIGN PERMIT APPLICATION

Name of Applicant MURAT GUNES
Address 9 DEGAMMA Hill Rd.
Wappingers Falls, NY 12590
Email dewran08@hotmail.com
Phone 914-703-5881

Owner of Property DLC Management Corp.
Address 565 Taxter Rd. 4th FLR
Elmsford, NY 10523
Phone 260-258-5188 / 914-631-3131

Location of Property 1572 Route 9, Imperial Plaza, Suite 9-A, Wappingers Falls,
Linear Frontage of building _____ Zoning District _____ NY 12590

Types of Signs Post & Arm Projecting Seasonal Multi-Tenant
 Wall Window Awning Free Standing Sidewalk

Sign Design All applications must be accompanied by a detailed scaled drawing showing all sign dimensions, graphic design (including lettering and pictorial matter), visual message (text, copy or content of sign), sign colors with color swatches, lighting, and landscaping.

Sign Location All applications must be accompanied by a plan, drawn to scale showing the following:

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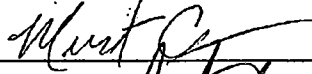
Sign Specifications
Type Window Decor Placement Front Window
Landscaping Yes No Size of Sign 40" Height 148 Width _____
 Single Faced Double Faced Lighted _____
Material _____ Wood _____ Metal Water paint other Durable _____

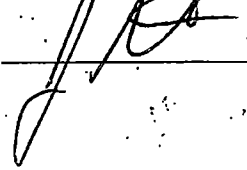
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Applicant Name Murat Gunes

Applicant Signature  Date: 10-15-22

Owner of Property Signature  Date: 10/21/22

THIS SECTION TO BE COMPLETED BY THE CODE ENFORCEMENT OFFICER

Sign Permit Granted: Date _____ Permit # issued _____

Permit Fee \$ _____ Receipt # _____ Date _____

Sign Permit Application referred to Planning Board Date _____

Comments: _____

DLC
MANAGEMENT CORP.
LEASING - RESTAURANT
866-352-6468
WWW.DLCMGMT.COM

90.5"

74"

74"

17"

30"

17"

DLC
FOR LEASING CALL
866-352-6468
WWW.DLCMGMT.COM

OPEN
SO...
Plu...
Heating

We pay \$\$\$

HAMMOND



45"
Sara's
Mediterranean
Grill

74"
40"
Grill Kabab

74"
Soup Salad

17"
17"

17"



VILLAGE OF WAPPINGERS FALLS

Office of Building, Planning & Zoning

2582 South Avenue

Wappingers Falls, NY 12590

Phone: (845) 297-5277 Fax: (845) 296-0379

www.wappingersfallsny.gov

SIGN PERMIT APPLICATION

Name of Applicant Kate Baumann
Address 42 Mill St.
Wappingers Falls NY 12590
Email Katelynn.baumann@gmail.com
Phone 845-554 9151

Owner of Property West Main Lofts Hartung Harvitz St
Address 2701 W Main
Phone 845 592 7509

Location of Property 2701 W. main st. Wappingers Falls NY 12590
Linear Frontage of building _____ Zoning District _____

Types of Signs Post & Arm Projecting Seasonal Multi-Tenant
 Wall Window Awning Free Standing Sidewalk

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Sign Specifications Type Projecting Placement on building
Landscaping ___ Yes No Size of Sign 36" Height 36" Width
Single Faced _____ Double Faced Lighted
Material _____ Wood Metal _____ other Durable

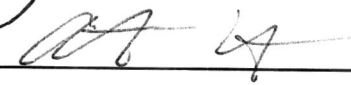
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- ___ Sign design drawings (ten sets)
- ___ Color swatch (if any color other than black/white)
- ___ Fee for sign permit of \$75.00 per side (to be paid after Planning Board Approval)

Applicant Name Kate Baumann

Applicant Signature  Date: 9/29/22

Owner of Property Signature  Date: 10-4-22

THIS SECTION TO BE COMPLETED BY THE CODE ENFORCEMENT OFFICER

Sign Permit Granted: Date _____ Permit # issued _____

Permit Fee \$ _____ Receipt # _____ Date _____

Sign Permit Application referred to Planning Board Date _____

Comments: _____

9:03

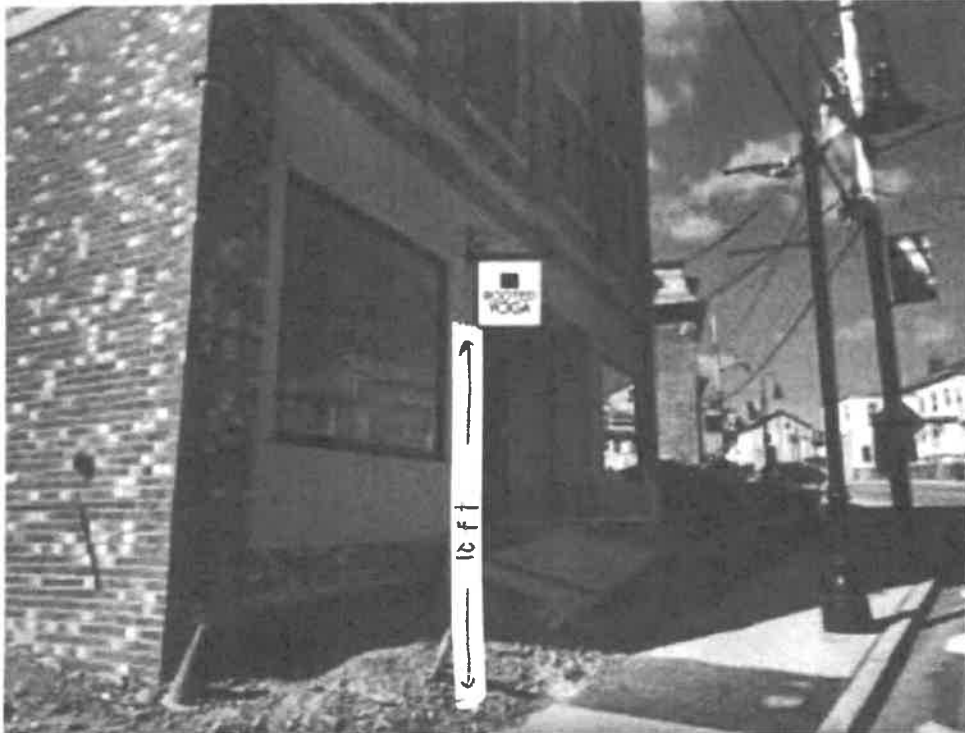


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FASTSIGNS.
Make Your Statement

View proof for Installation



9:03

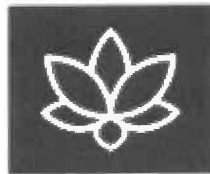
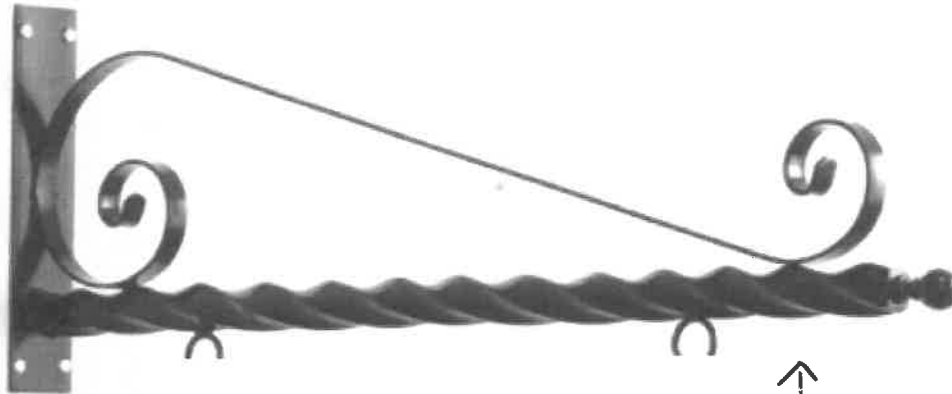


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FASTSIGNS
Make Your Statement™

View proof for 6mm Aluminum Composite ✕



ROOTED
YOGA

