



**Town of North Castle
Residential Project Review Committee**

17 Bedford Road Armonk, New York 10504
(914) 273-3542 (914) 273-3554 (fax)

RPRC COMPLETENESS REVIEW FORM

This form represents the standard requirements for a completeness review for all Residential Project Review Committee submissions. Failure to provide all of the information requested will result in a determination that the application is incomplete.

Project Name on Plan: Resnik

Initial Submittal Revised Preliminary

Street Location: 10 Banks Farm Road

Zoning District: _____ Property Acreage: 2 acres Tax Map Parcel ID: 553801-95.1-2-44

Date: November 11, 2020

DEPARTMENTAL USE ONLY

Date Filed: _____ Staff Name: _____

Preliminary Plan Completeness Review Checklist

Items marked with a are complete, items left blank are incomplete and must be completed, "NA" means not applicable.

1. Plan prepared by a registered architect or professional engineer
2. Aerial photo (Google Earth) showing the applicant's entire property and adjacent properties and streets
3. Map showing the applicant's entire property and adjacent properties and streets
4. A locator map at a convenient scale
5. The proposed location, use and design of all buildings and structures
6. Existing topography and proposed grade elevations
7. Location of drives
8. Location of all existing and proposed site improvements, including drains, culverts, retaining walls and fences

RPRC COMPLETENESS REVIEW FORM

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- 9. Description of method of water supply and sewage disposal and location of such facilities
- 10. The name and address of the applicant, property owner(s) if other than the applicant and of the planner, engineer, architect, surveyor and/or other professionals engaged to work
- 11. Submission of a Zoning Conformance Table depicting the plan's compliance with the minimum requirements of the Zoning District
- 12. If a tree removal permit is being sought, submission of a plan depicting the location and graphical removal status of all Town-regulated trees within the proposed area of disturbance. In addition, the tree plan shall be accompanied by a tree inventory includes a unique ID number, the species, size, health condition and removal status of each tree.
- 13. If a wetlands permit is being sought, identification of the wetland and the 100-foot wetland buffer.

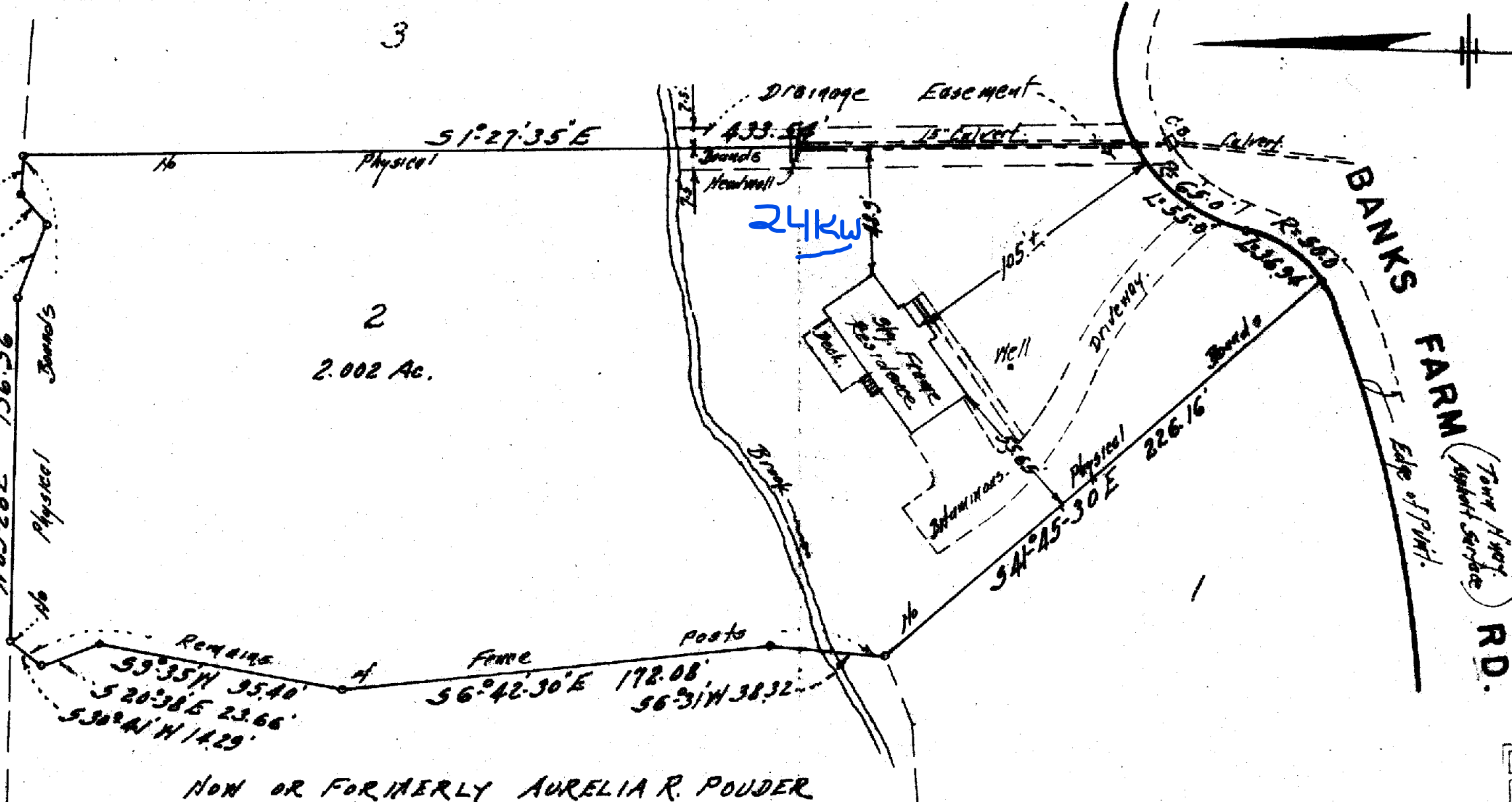
More information about the items required herein can be obtained from the North Castle Planning Department. A copy of the Town Code can be obtained from Town Clerk or on the North Castle homepage: <http://www.northcastleny.com/townhall.html>

_____ On this date, all items necessary for a technical review of the proposed site plan have been submitted and constitute a COMPLETE APPLICATION.

NOW OR FORMERLY PEI-YUAN & FRANCES CHIA

58°19'30"E 17.00'
151°40"E 15.90'
56°42'E 28.94'

N80°28'E 136.56'



NOW OR FORMERLY AURELIA R. POWDER

RECEIVED
NOV 17 1983

TOWN OF NORTH CASTLE, N. Y.
BUILDING DEPARTMENT

The above premises are shown as lot no 2 on,
"subdivision map of Hobby Hills" on file in the West-
chester County Clerk's Office, Division of Land Records
as map no. 19608.

This is to certify that the field work
for this survey was completed July 5,
1983 and that this map was completed
July 12, 1983.

Guaranteed to the Title Guarantee Co. and
Westchester Federal Savings in accordance with
minimum standards for Title Surveys of the N.Y.
State Land Title Ass'n.

Ralph L. Macdonald

SURVEY OF PROPERTY
PREPARED FOR
PAUL HUTCHINSON

TOWN OF NORTH CASTLE WEST. CO. N.Y.

SCALE 1" = 50' JULY 12, 1983

Brought to Date Nov. 15, 1983
Ralph L. Macdonald
N.Y. State Lic. No. 9080.

All certifications hereon are valid for this map and
copies thereof only if said map or copies bear the impressed
seal of the surveyor whose signature appears hereon.



Town of North Castle Building Department

17 Bedford Road

Armonk, New York 10504-1898

Telephone: (914) 273-3000 ext. 44 Fax: (914) 273-3554

www.northcastleny.com

Residential Building Permit Application

NOTE: TWO (2) SETS OF ALL REQUIRED DOCUMENTS MUST BE SUBMITTED WITH THIS APPLICATION

Section I- PROJECT ADDRESS: 10 Banks Farm Road DATE: 9-16-20

Section II- CONTACT INFORMATION: (Please print clearly. All information must be current.)

APPLICANT: Karen Resnik

ADDRESS: 10 Banks Farm Road

PHONE: 914-879-4338 MOBILE: _____ EMAIL: _____

PROPERTY OWNER: same as above

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: resnikmom@optonline.net

Section III- DESCRIPTION OF WORK: (Any work conducted outside of the house requires approval from the RPRC unless the proposed action is minor in nature and complies with 355-26 C (3) of the Town of North Castle code.)

24kw Generator- propane

Section IV- USE AND OCCUPANCY:

EXISTING/ CURRENT USE: _____

PROPOSED RESIDENTIAL:

- One Family Dwelling
- Two Family Dwelling
- Townhouse
- Detached Accessory Structure

Section V- PERMIT FEES: (\$100 app fee plus \$14 per \$1000, cost of construction and a \$75 CO fee.)


ESTIMATED COST OF CONSTRUCTION (Based on fair market value labor & material) \$ 12,000

AFFIDAVIT OF CONSTRUCTION COST: This affidavit must be completed by the Design Professional if the estimated cost is \$20,000 or more.

Town of North Castle Building Department

Section V- (Continued)

I Angelo Zaccagnino do hereby affirm and certify as follows: (i) I am the architect/engineer (circle one) licensed by the State of New York; (ii) I have reviewed the plans, drawings and specifications for this application and am fully familiar with the proposed construction; (iii) based on my experience, I estimate the total cost of construction including all labor, all materials, all professional fees and all associated costs to be approximately \$ _____, and (iv) pursuant to Penal Law 210.45, I acknowledge that a false statement made knowingly is a Class A misdemeanor.

Signature:  Date: _____

Sign and Affix Seal Here

Section VI- CONTACT INFORMATION: (Please print clearly. All information must be current)

ARCHITECT/ ENG: _____

ADDRESS: _____

PHONE: _____ MOBILE: _____

EMAIL: _____

CONTRACTOR: Zaccagnino Electric

ADDRESS: 81 Maple Ave Rye NY 10580

PHONE: 914-921-3244 MOBILE: 914-906-1160 EMAIL: info@zaccagninonet

PLUMBER: _____

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: _____

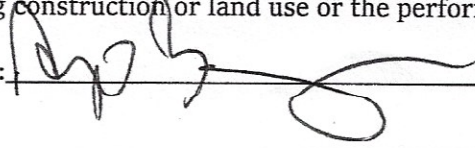
ELECTRICIAN: Zaccagnino Electric

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: _____

Section VII- APPLICANT CERTIFICATION

I hereby certify that I have read the instructions & examined this application and know the same to be true & correct. All provisions of laws & ordinances covering this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or land use or the performance of construction.

Signature:  Date: _____

Town of North Castle Building Department

Section VIII- AFFIDAVIT OF OWNER AUTHORIZATION IF APPLICABLE: (To be notarized)

STATE OF NEW YORK }
COUNTY OF WESTCHESTER } SS:

The applicant Angelo Zaccagnina has proper consent from said owner to make this application as submitted and said owner agrees to all terms and conditions placed upon same.

Owner's Name (PRINT) Karen Resnik Owner's Signature Karen Resnik

Sworn to before me this day of , 20

Notary Signature [Handwritten Signature]

STEVEN J. GAGNON
NOTARY PUBLIC STATE OF NEW YORK
No. 91CA/100333
Qualified in Westchester County
My Commission Expires October 14, 2023

Notary Stamp Here

OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

Zone: Section: Block: Lot:

Building Department Checklist:

- Does this permit require RPRC approval? Yes No
GC License Work. Comp. Liability. Ins. Disability Two sets of documents
Permit Fee Payment: Check #: Cash Credit Card

Name on check:

Received By: Application No.:

BUILDING INSPECTOR APPROVAL

- Has all the conditions of the RPRC been met? Yes NA
Is a Flood Development permit required? Yes No

Reviewed By: Date:

Building Inspector Approval: Date:

Conditions:



Town of North Castle Building Department

17 Bedford Road

Armonk, New York 10504-1898

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RPRC Exemption Form

Section I- PROJECT ADDRESS: 10 Banks Farm Road DATE: 9-16-20

Section II- CONTACT INFORMATION: (Please print clearly. All information must be current)

PROPERTY OWNER: Karen Resnik

ADDRESS: 10 Banks Farm Road

PHONE: 914-879-4338 MOBILE: _____ EMAIL: _____

Section III- DESCRIPTION OF WORK:

Install 24kw generator

Section IV- TYPE OF EXEMPTION REQUESTED: (Check one)

355-26 B (2)-The owner of any one- or two-family dwelling which exists or is under construction as of My 14, 2008 shall be permitted a one-time gross floor area expansion of up to 10%, provided that such expansion does not exceed the maximum permitted gross floor area by more than 10%. If no wetland or steep slope disturbance permit is required, such expansion shall not require Planning Board approval. If such type of permit is required, then the application shall require Planning Board site plan approval.

355-26 C (3)-The owner of any one- or two-family dwelling shall be permitted a one-time gross land coverage expansion of up to 250 square feet without the need to seek RPRC review as long as the expansion does not require wetland or steep slope disturbance permits.

Section V- AFFIDAVIT: (To be notarized)

STATE OF NEW YORK }
COUNTY OF WESTCHESTER } SS:

I _____ do hereby affirm and certify as follows: (i) I am the owner of the property; (ii) I have reviewed the Chapter 355-26 C (3) of the Town of North Castle which states "The owner of any one- or two-family dwelling shall be permitted a one-time gross land coverage expansion of up to 250 square feet without the need to seek RPRC review as long as the expansion does not require wetland or steep slope disturbance permits. (iii) Based on my understanding of this section of the code, I am choosing **NOT** to apply to the RPRC.; (iv) pursuant to Penal Law 210.45, I acknowledge that a false statement made knowingly is a Class A misdemeanor.

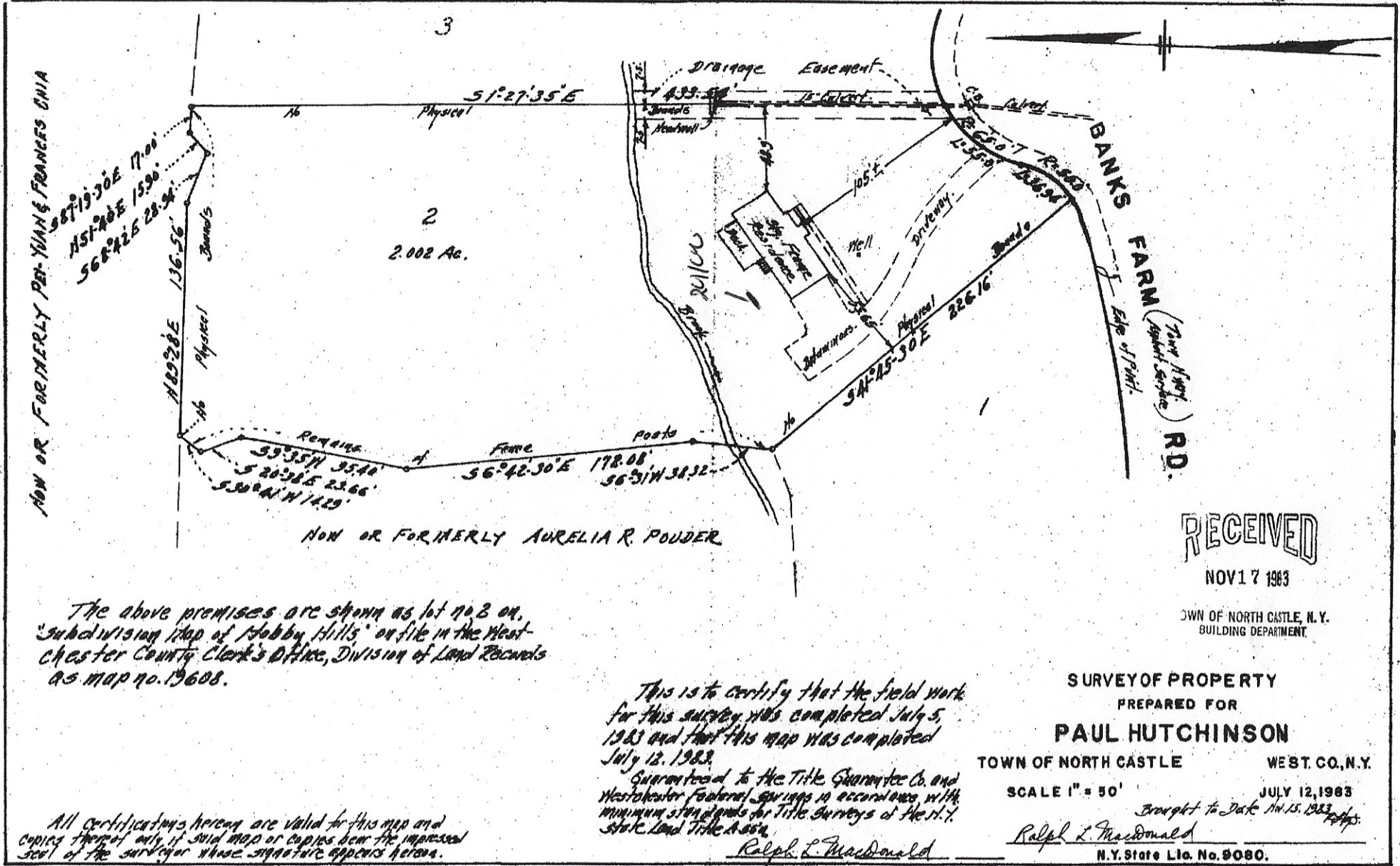
Owner's Name (PRINT): Karen Resnik Owner's Signature: Karen Resnik

STEVEN J. GAGNON
NOTARY PUBLIC-STATE OF NEW YORK
No. 01GA6100238
Qualified in Westchester County
My Commission Expires October 14, 2023

Sworn to before me this _____ day of _____, 20_____

833908

Resub
TITLE No. T61-83-01712



NOW OR FORMERLY FRANCES CHIA

NOW OR FORMERLY AURELIA R. POLDER

The above premises are shown as lot no. 2 on 'Subdivision Map of Hobby Hills' on file in the Westchester County Clerk's Office, Division of Land Records as map no. 19608.

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Guaranteed to the Title Guarantee Co. and Westchester Federal savings in accordance with minimum standards for Title Surveys of the N.Y. State Land Title Act.

All certifications herein are valid for this map and copies thereof only if said map or copies bear the impressed seal of the surveyor whose signature appears herein.

Ralph L. Macdonald

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