

TOWN OF NORTH CASTLE

WESTCHESTER COUNTY 17 Bedford Road Armonk, New York 10504-1898

RESIDENTIAL PROJECT REVIEW COMMITTEE Adam R. Kaufman AICP, Chair Telephone: (914) 273-3000 x 43 Fax: (914) 273-3554 www.nortcastleny.com

RESIDENTIAL PROJECT REVIEW COMMITTEE (RPRC) APPLICATION

| Section I- PROJECT | Γ | | | | |
|-----------------------------------|---------------------|--------|--|--|--|
| ADDRESS: | ADDRESS: | | | | |
| Section III- DESCR | RIPTION OF WORK: | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| C 4 III CONT | A CEL INTORNA ETON | | | | |
| Section III- CONTA | ACT INFORMATION: | | | | |
| APPLICANT: | | | | | |
| | | | | | |
| PHONE: | MOBILE: | EMAIL: | | | |
| PROPERTY OWNER: | | | | | |
| | | | | | |
| PHONE: | MOBILE: | EMAIL: | | | |
| PROFESSIONAL:: | | | | | |
| ADDRESS: | | | | | |
| PHONE: | MOBILE | : | | | |
| EMAIL: | | | | | |
| Section IV- PROPERTY INFORMATION: | | | | | |
| Zone: | Tax ID (lot designa | tion) | | | |



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: | | | | | |
|-----------------------|---|--|--|--|--|
| Init | ☐Initial Submittal ☐Revised Preliminary | | | | |
| Stree | t Location: | | | | |
| Zonin | g District: Property Acreage: Tax Map Parcel ID: | | | | |
| Date: | | | | | |
| DEP | ARTMENTAL USE ONLY | | | | |
| Date | Filed: Staff Name: | | | | |
| Items | minary Plan Completeness Review Checklist marked with a "\sum" are complete, items left blank "\sum" are incomplete and must be leted, "NA" means not applicable. | | | | |
| □1. | Plan prepared by a registered architect or professional engineer | | | | |
| <u>□</u> 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

Page 2

| 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. |



TOWN OF NORTH CASTLE

WESTCHESTER COUNTY 17 Bedford Road Armonk, New York 10504-1898

PLANNING DEPARTMENT Adam R. Kaufman, AICP Director of Planning

Telephone: (914) 273-3542 Fax: (914) 273-3554 www.northcastleny.com

GROSS LAND COVERAGE CALCULATIONS WORKSHEET

| Appli | cation Name or Identifying Title: Jonathan Bernstein | Date: 4-19-21 |
|--------|--|---------------|
| Tax M | Map Designation or Proposed Lot No.: 108.01-2-55 | |
| Gross | Lot Coverage | |
| 1. | Total lot Area (Net Lot Area for Lots Created After 12/13/06): | 14,205 |
| 2. | Maximum permitted gross land coverage (per Section 355-26.C(1)(b)): | 5,009 |
| 3. | BONUS maximum gross land cover (per Section 355-26.C(1)(b)): | |
| | Distance principal home is beyond minimum front yard setback x 10 = | 80 |
| 4. | TOTAL Maximum Permitted gross land coverage = Sum of lines 2 and 3 | 5,089 |
| 5. | Amount of lot area covered by principal building: 2015 existing + proposed = | 2015 |
| 6. | Amount of lot area covered by accessory buildings: o existing + o proposed = | 0 |
| 7. | Amount of lot area covered by decks: o existing + o proposed = | 0 |
| 8. | Amount of lot area covered by porches: 278 existing + 0 proposed = | 278 |
| 9. | Amount of lot area covered by driveway, parking areas and walkways: 1734 proposed = | 1734 |
| 10. | Amount of lot area covered by terraces: 249 existing + 465 proposed = | 714 |
| 11. | Amount of lot area covered by tennis court, pool and mechanical equip: o existing + o proposed = | 0 |
| 12. | Amount of lot area covered by all other structures: 101 existing + 0 proposed = | 101 |
| 13. Pr | roposed gross land coverage: Total of Lines $5 - 12 =$ | 4842 |
| the pr | e 13 is less than or equal to Line 1. Our proposal complex with the Town's maxim oject may proceed to the residential Broom Review Committee for review. If Line not comply with the Town's transfer of the complex with the Town's transfer of the complex with the Town's maxim of the complex with the town of the complex with the Town's maxim of the complex with | |
| Signa | ture and Seal of Profession Date | |



TOWN OF NORTH CASTLE

WESTCHESTER COUNTY 17 Bedford Road Armonk, New York 10504-1898

PLANNING DEPARTMENT Adam R. Kaufman, AICP Director of Planning

January 29, 2019 Telephone: (914) 273-3542 Fax: (914) 273-3554 www.northcastleny.com

FLOOR AREA CALCULATIONS WORKSHEET

| Applica | tion Name or Identifying Title: | Jonathan Bernstein | | Date: | 4-19-21 |
|-------------------|---|--|-----------------------------|-------|---------|
| Tax Maj | p Designation or Proposed Lot No.: | 108.01-2-55 | <u>.</u> | | |
| Floor A | rea | | | | |
| 1. | Total Lot Area (Net Lot Area for L | ots Created After 12 | 2/13/06): | 5. | 14,205 |
| 2. | Maximum permitted floor area (pe | er Section 355-26.Bo | (4)): | | 4,591 |
| 3. | Amount of floor area contained wit | | :=: | | 1436 |
| 4. - | Amount of floor area contained wit | | · | | 1730 |
| 5. | Amount of floor area contained wit | | ⊱ | | 554 |
| 6. - | Amount of floor area contained wit | | e of being enclosed: | | 899 |
| 7. - | Amount of floor area contained wit | | plicable – see definition): | | 0 |
| 8. | Amount of floor area contained wit | | ble – see definition): | | 593 |
| 9. - | Amount of floor area contained wit | | uildings: | | 0 |
| 10. Pro | posed floor area: Total of Line | s 3 – 9 = _ | | | 5,212 |
| and the pyour pro | 10 is less than or equal to Line 2, yo project may proceed to the Residential posal does not comply with the Townser and Section 10 to 10 | Project Review Co | mmittee for review. If Line | | |
| Signatui | | or o | D | aic | |

COVERED PATIO ADDITION 94 COX AVE. ARMONK, NY APPLICABLE CODES: 2020 RCNYS

PROPOSED

NO CHANGE

NO CHANGE

NO CHANGE

NO CHANGE

NO CHANGE

NO CHANGE

NO CHANGE

NO CHANGE

± 54.75'

ZONING DATA: NORTH CASTLE

10,000 SF

100 FT

100 FT

30FT/ 2.5 ST.

BUILDING COVERAGE 30%(4,261.5 SF)

EXISTING

86 FT

165.75 FT

REFER TO COVERAGE CALCULATION WORKSHEET

15.19'

REFER TO FAR CALCULATION WORKSHEET

16.14%(2,293SF)

14,205.2249 SF

(0.3261 Acres)

TAX MAP #: 108.01-2-55

MINIMUM LOT AREA

GROSS LAND COVER.

MINIMUM HEIGHT

MIN. SIDE (SOUTH)

MIN. REAR (EAST)

SETBACK REQUIREMENTS

MIN, FRONT (WEST) 30

MIN. SIDE (NORTH) 15'

TABLE BUILDING REQUIREMENTS

ZONE: R-10

LOT FRONTAGE

LOT WIDTH

LOT DEPTH

SCOPE OF WORK: DETACHED GARAGE

GENERAL NOTES

1. ALL WORK SHALL CONFORM TO 2020 RCNYS, AND LOCAL CODES. ALL ELECTRICAL, PLUMBING, AND MECHANICAL WORK SHALL CONFORM TO ALL NATIONAL, STATE,

2. MATERIALS, WORKMANSHIP AND INSTALLATION SHALL BE IN STRICT COMPLIANCE WITH NOT ONLY MANUFACTURERS' PRINTED INSTRUCTIONS, BUT ALSO THE STANDARDS OF RECOGNIZED AGENCIES OR ASSOCIATIONS.

- 3. ALL MATERIALS SHALL BE NEW, UNLESS OTHERWISE SPECIFIED.
- 4. PROVIDE TEMPORARY PROTECTION OF MATERIALS AND EQUIPMENT

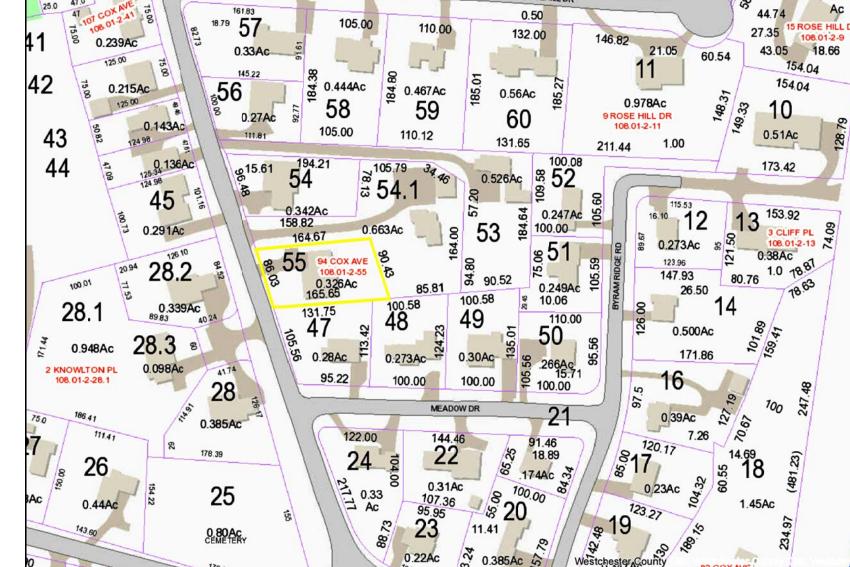
5. IT IS INTENDED THAT THE CONTRACTOR PROVIDE A COMPLETE JOB. ANY OMISSIONS IN THESE GENERAL INSTRUCTIONS OR THE OUTLINE OF WORK ARE NOT TO BE CONSTRUED AS REMOVING SUCH ITEMS FROM THE RESPONSIBILITIES OF THE CONTRACTOR.

6. ALL WORK SHALL BE PERFORMED BY SKILLED AND QUALIFIED WORKMEN IN THE APPROPRIATE TRADES. CONTRACTOR SHALL KEEP SUFFICIENT WORKMEN ON THE JOB AT ALL TIMES TO PERFORM THE WORK IN THE MOST EXPEDITIOUS MANNER CONSISTENT WITH GOOD WORKMANSHIP, SOUND BUSINESS PRACTICE AND IN THE BEST INTERESTS OF THE

7. CONTRACTOR AGREES THAT HE IS SKILLED AND EXPERIENCED IN THE USE AND INTERPRETATION OF PLANS AND SPECIFICATIONS. HE HAS CAREFULLY REVIEWED THE PLANS AND SPECIFICATIONS FOR HIS PROJECT AND HAS FOUND THEM TO BE FREE OF AMBIGUITIES. FURTHER, HE HAS CAREFULLY EXAMINED THE SITE OF THE WORK AND FROM HIS OWN OBSERVATIONS HAS SATISFIED HIMSELF AS TO THE NATURE AND LOCATION OF THE WORK; THE CHARACTER, QUALITY, AND QUANTITY OF MATERIALS; THE DIFFICULTIES LIKELY TO BE ENCOUNTERED AND OTHER ITEMS FOUND ON THE JOB.



LOCATOR MAP



MAP



GOOGLE EARTH

OWNER: JONATHAN BERNSTEIN 94 COX AVE

ARCHITECT: MICHAEL PICCIRILLO ARCHITECTURE 345 KEAR STREET, SUITE 203 YORKTOWN HEIGHTS NY, 10598

SEQUENCE OF CONSTRUCTION

- INSTALL ERPOSION CONTROL AND LIMITS OF DISTURBAMNCE FENCE. PRE-CONSTRUCTION MEETING WITH TOWN OFFICIALS ON SITE. INSTALL TREE PROTECTION.
 STRIP TOPSOIL, CLEAR AND GRADE
- EXCAVATE FOR FOOTINGS. INSTALL FOOTINGS AND SLABS. BEGIN DECK CONSTRUCTION. 3. SPREAD TOPSOIL, SEED AND MULCH. 9. REMOVE EROSION CONTROLS FROM STABILIZED AREAS

Michael Piccirillo Architecture

DO NOT SCALE DRAWINGS. REFER TO WRITTEN MEASUREMENTS FOR ACCURACY, OR CONTACT ARCHITECT. CONTACT ARCHITECT IF THERE ARE ANY DISCREPANCIES UNAUTHORIZED ALTERATIONS OR ADDITIONS TO THIS DRAWING IS A VIOLATION OF NEW COPYRIGHT 2021 MICHAEL PICCIRILLO ARCHITECTURE

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| ARMONK, NY |
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| STERED ARCHITHONY STERED ARCHITHONY OSTERED |
| · // |

PROJECT NAME:

BERNSTEIN

RESIDENCE

PROJECT ADDRESS:

94 COX AVE

1 3/22/21

ISSUED FOR RPRC

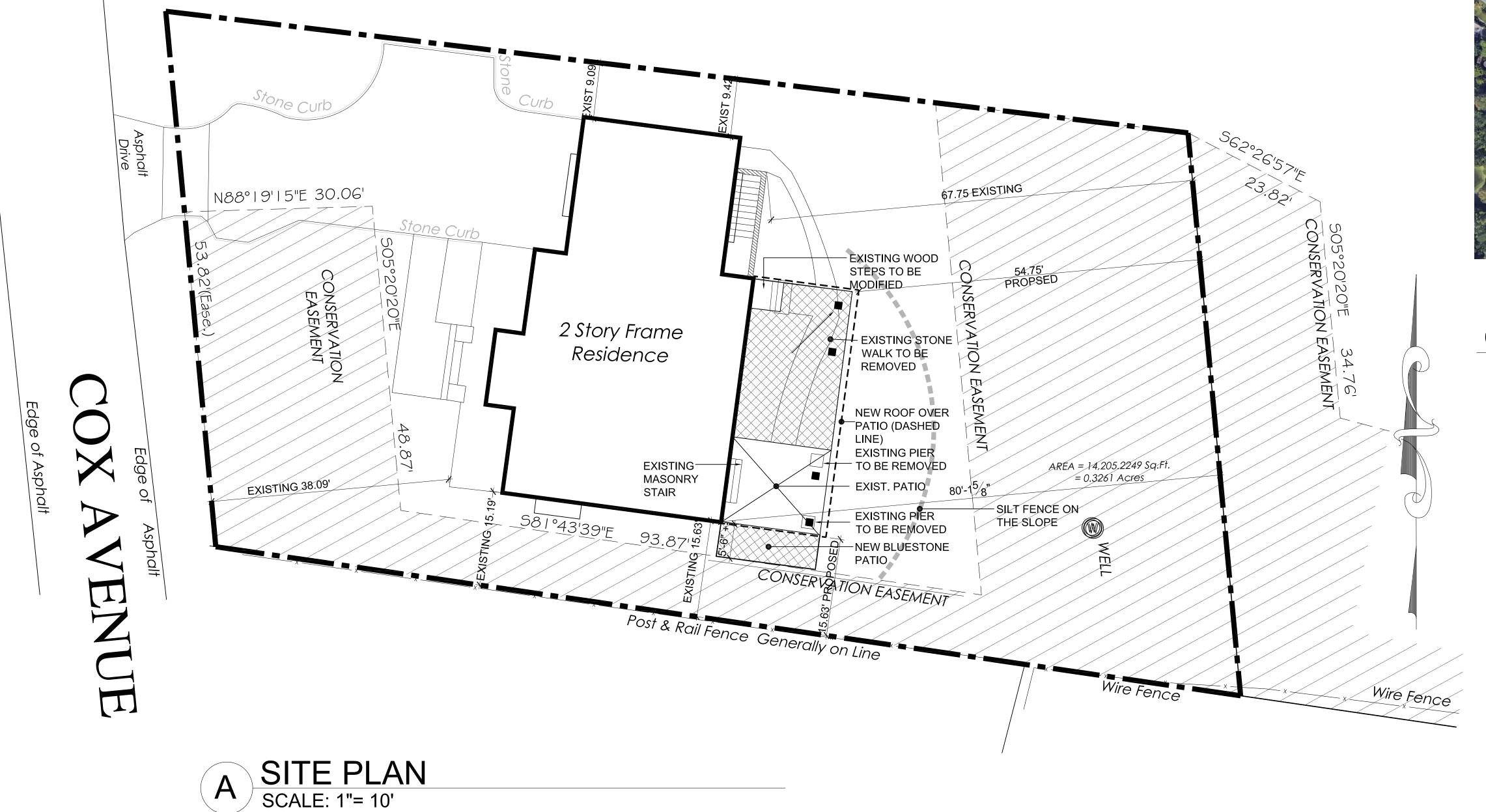
MICHAEL A PICCIRILLO, AIA 345 KEAR STREET, SUITE 203 YORKTOWN HEIGHTS, NY 10598

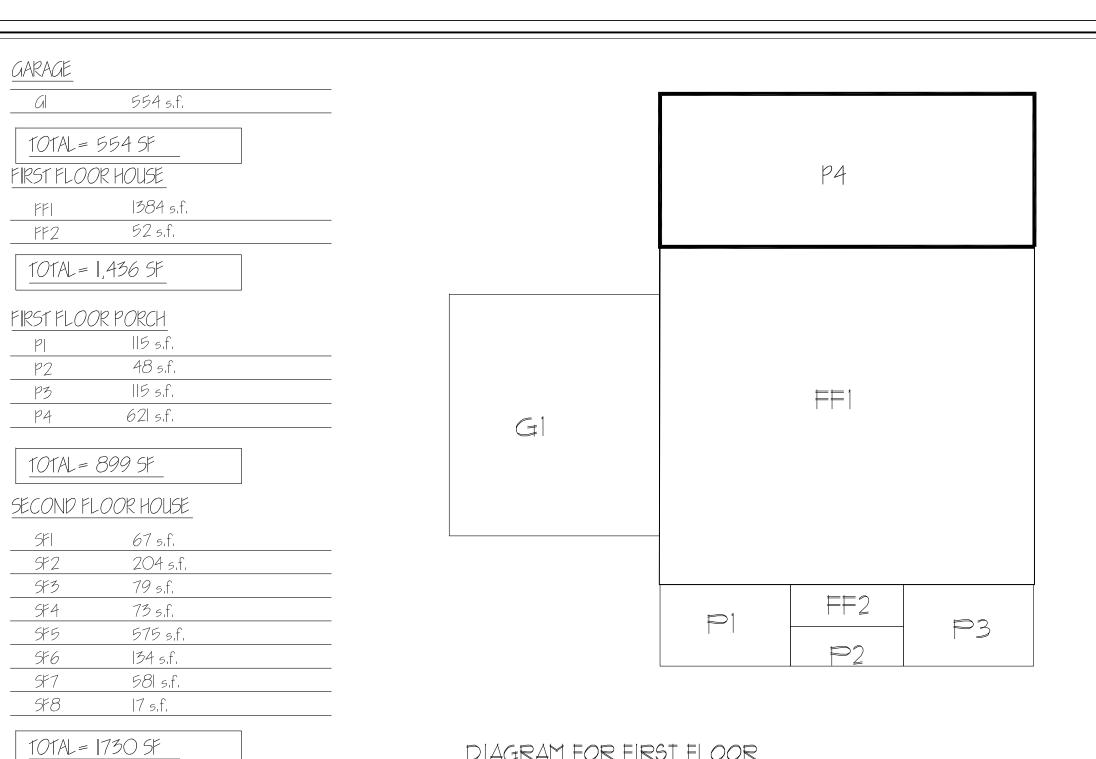
TELEPHONE: 914-368-9838 FACSIMILE: 914-368-9839 michael@mpiccirilloarchitect.com www.mpiccirilloarchitect.com

SITE PLAN

| | Scale |
|--|----------|
| | Drawn by |
| | MAP |

A001





GARAGE GI

ATTIC FLOOR HOUSE

10TAL = 593 SF

GRAND TOTAL = 5212 SF

593 s.f.

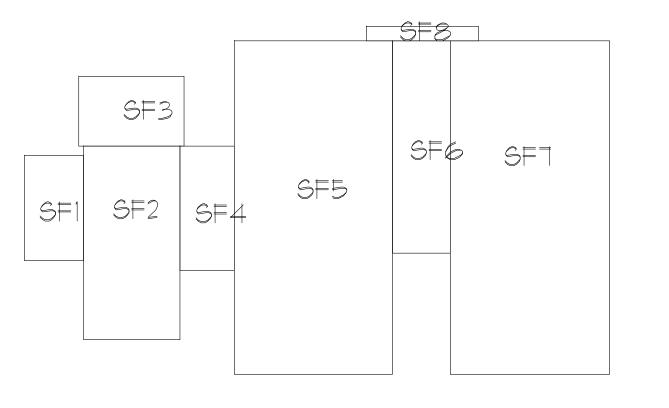


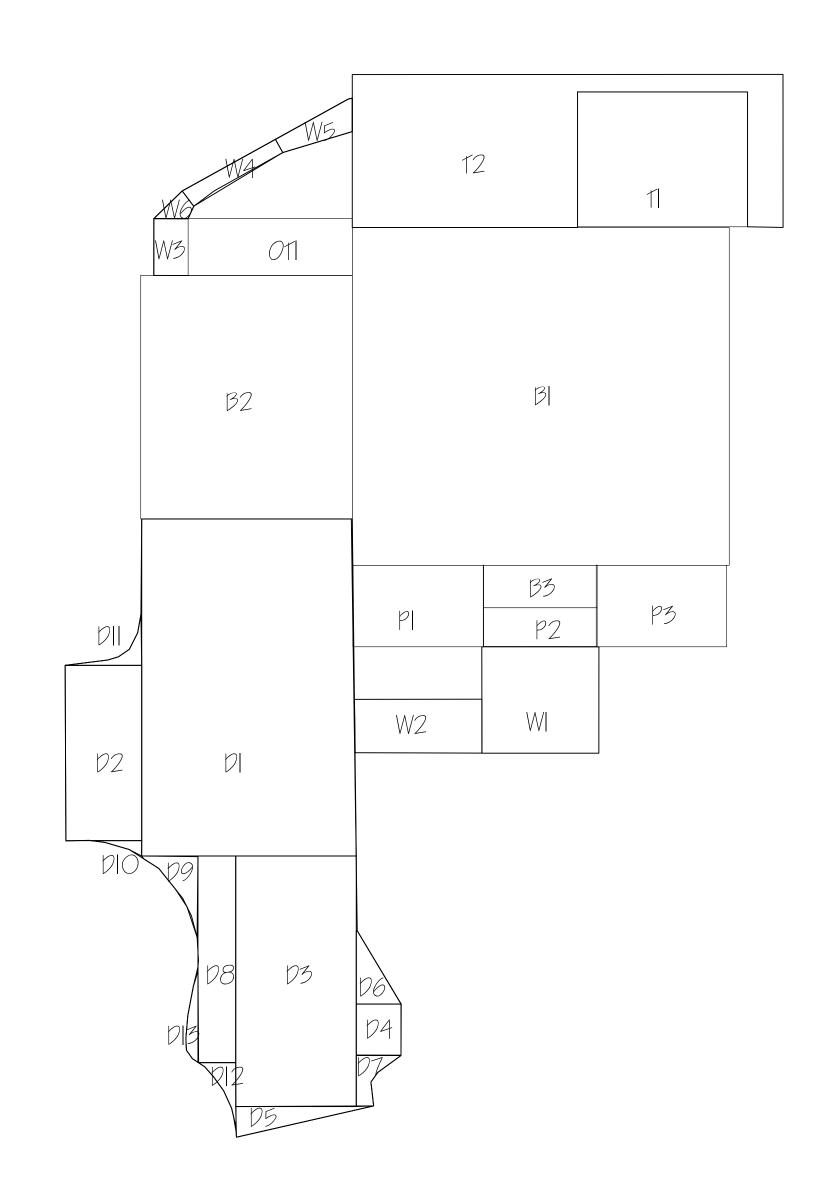


DIAGRAM FOR ATTIC FLOOR AREA CALCULATIONS

DIAGRAM FOR FIRST FLOOR AREA CALCULATIONS

DIAGRAM FOR SECOND FLOOR AREA CALCULATIONS

FLOOR AREA CALCULATION DIAGRAMS



| B2 | 560 SF | |
|------------------|-----------------|--|
| B3 | 52 SF | |
| *O*^1 | | |
| 101AL= | 2015 SF | |
| | \\/ \\/\\\\\ | |
| DRIVEWA | Y, WALKWAYS | |
| WI | 135 SF | |
| W2 | 74 SF | |
| W3 | 21 SF | |
| W4 | 20 SF | |
| W5 | 20 SF | |
| W6 | 6 SF | |
| DI | 777 SF | |
| D2 | 145 SF | |
| D3 | 328 SF | |
| D4 | 25 SF | |
| D5 | 23 SF | |
| D6 | 18 SF | |
| D7 | 12 SF | |
| 118 | 85 SF | |
| D9 | 18 SF | |
| DIO | 3 SF | |
| ווט | 7 SF | |
| DI2 | 9 SF | |
| D13 | 854 | |
| | | |
| 101AL= | 1734 | |
| | | |
| OTHER _ | - 101 SF | |
| 011 | IOI F | |
| TERRACES | _ | |
| 1 | 249 SF | |
| 12 | 465 SF | |
| <u>101AL = 1</u> | 714 | |
| PORCHES |) | |
| PI | 115 s.f. | |
| P2 | 48 s.f. | |
| P3 | 115 s.f. | |
| 10TAL= | 778 SF | |
| 101/1/ | | |
| | | |
| GRAND 1 | OTAL = 4,842 SF | |
| | | |

PRINCIPAL BUILDING

1386 SF

| No. | DATE: | ISSUE: |
|-----|---------|------------------|
| 1 | 3/22/21 | ISSUED FOR PERMI |
| 2 | 4/20/21 | ISSUED FOR RPRC |
| | | |
| | | |
| | | |
| | | |

Michael Piccirillo Architecture

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PROJECT NAME:

BERNSTEIN RESIDENCE

PROJECT ADDRESS:

94 COX AVE ARMONK, NY



MICHAEL A PICCIRILLO, AIA 345 KEAR STREET, SUITE 203 YORKTOWN HEIGHTS, NY 10598

TELEPHONE: 914-368-9838 FACSIMILE: 914-368-9839 michael@mpiccirilloarchitect.com www.mpiccirilloarchitect.com

COVERAGE DIAGRAMS

MAP

A002

GROSS LAND COVERAGE CALCULATION DIAGRAMS









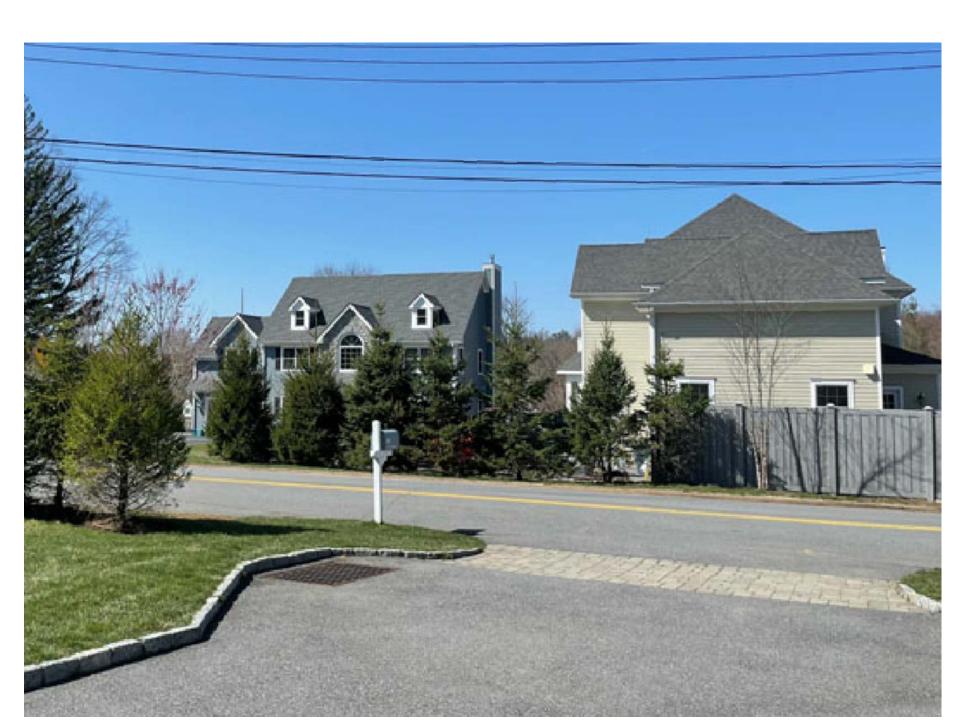


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| No. | DATE: | ISSUE: |
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EXISTING HOUSE PICS

Scale

Drawn by

A003

