

Section I- PROJECT

TOWN OF NORTH CASTLE

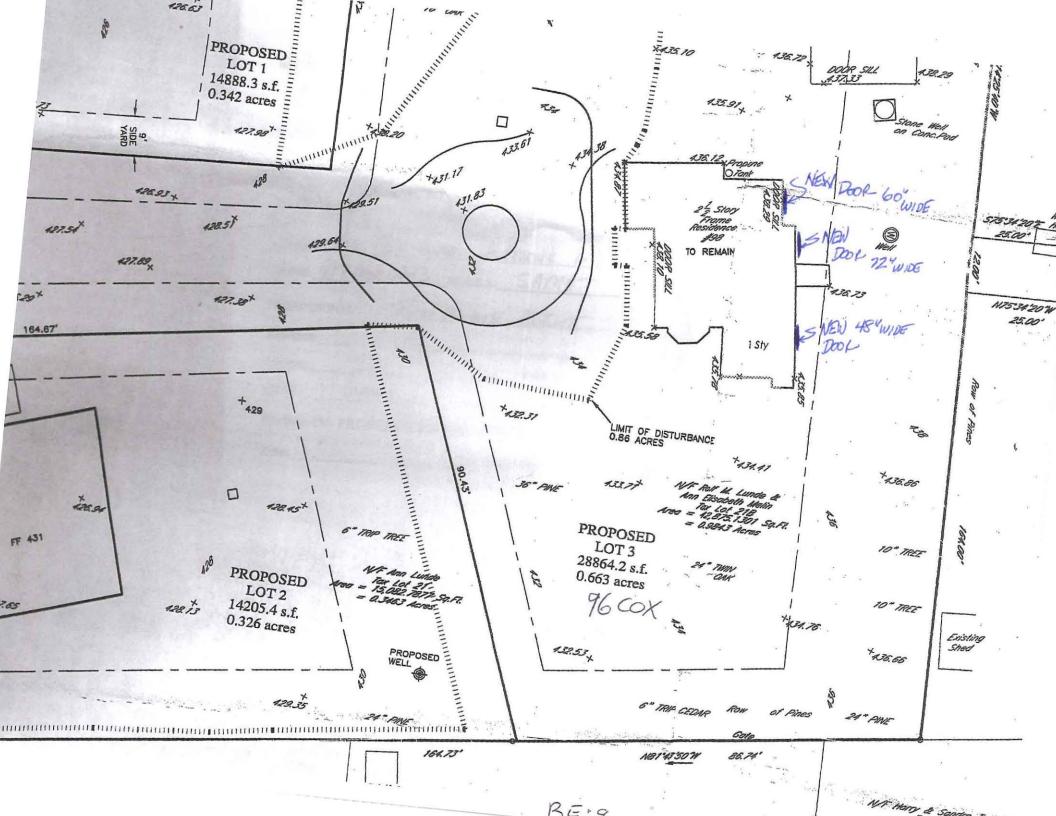
WESTCHESTER COUNTY 17 Bedford Road Armonk, New York 10504-1898

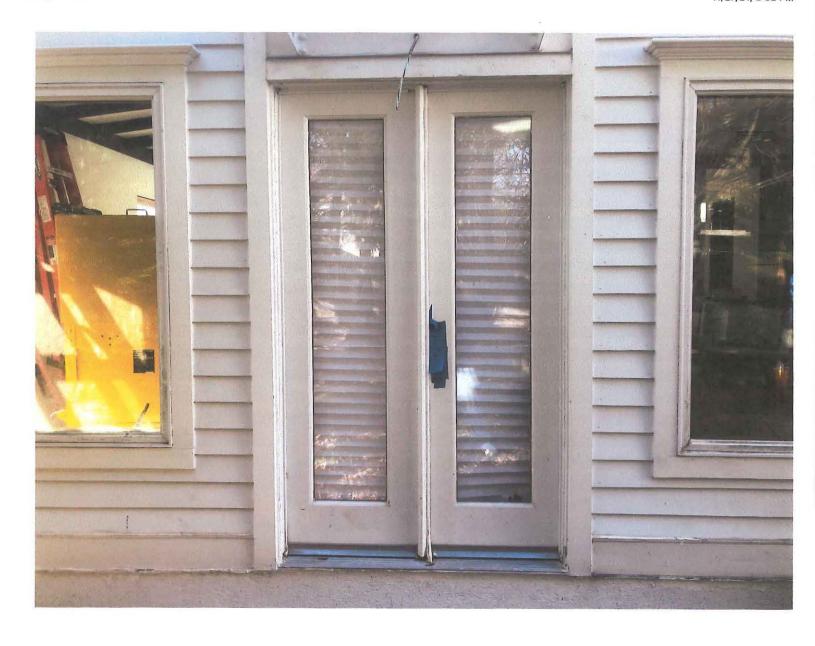
RESIDENTIAL PROJECT REVIEW COMMITTEE Adam R. Kaufman AICP, Chair Telephone: (914) 273-3000 x 43 Fax: (914) 273-3554 www.nortcastleny.com

RESIDENTIAL PROJECT REVIEW COMMITTEE (RPRC) APPLICATION

ADDRESS: 96 COX AVE. ARMONK MY 10504

Section III- DESCRIPTION OF WORK:
INSTALLED NEW REAL DOORS . OF RESIDENCE.
3 denticul noors installed@ rear of House
60", 72" +48" doors -sample attacked
66 , 12 142 2013 31111
All 3 Doors are sample color and materials
Section III- CONTACT INFORMATION:
APPLICANT: DOMINICK R.221
ADDRESS: 96 COX AVE. ALMONK NY
PHONE: 917-578 4401 MOBILE: SAME EMAIL: BCA MECH O GMAIL, BOWN
PHONE. 777 - TO TO MOBILE. STITUTE EMAIL: DOTT THELIT OF CHATE, CONT.
PROPERTY OWNER: LORI RIZZI
ADDRESS: 96 COX AVE. A RMONK NY
PHONE: 917 4680213 MOBILE: SAME EMAIL: LOW Skilly 2 & GMAIL. COM
PROFESSIONAL: Real ESTATE AGENT
ADDRESS: SAME
PHONE: SAME MOBILE:
EMAIL: SAME
Section IV- PROPERTY INFORMATION:
Zone: <u>R-10</u> Tax ID (lot designation) 108, 61-2-54, 1





RIZZI RESIDENCE

96 COX AVE.

ARMONK NY 10504

484 WIDE



RIZZI PRESIDENCE 96 COX AVE. ALMONE NY 10504 60° WIDE



RIZZI RESIDENCE

96 COX AVE.

ARMONK NY 10504

72" WIDE



Town of North Castle Residential Project Review Committee

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

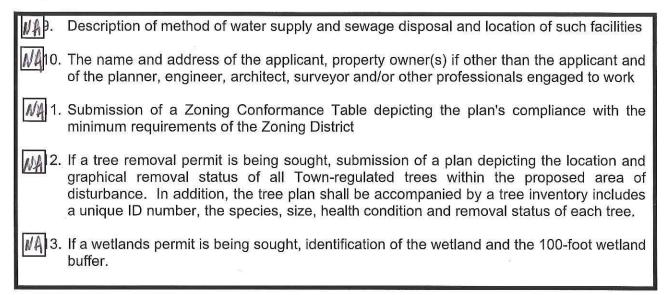
RPRC COMPLETENESS REVIEW FORM

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:
✓Initial Submittal □Revised Preliminary
Street Location: 96 Cox Ave AcMoNk NY 10504
Zoning District: Property Acreage: 98 Tax Map Parcel ID:553800 to8.01-2-54
Date: 11-26-21
DEPARTMENTAL USE ONLY
Date Filed: Staff Name:
Preliminary Plan Completeness Review Checklist Items marked with a X 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
Aerial photo (Google Earth) showing the applicant's entire property and adjacent properties and streets
Map showing the applicant's entire property and adjacent properties and streets
√. A locator map at a convenient scale
The proposed location, use and design of all buildings and structures
√∯s. Existing topography and proposed grade elevations
√A7. Location of drives
NAB. Location of all existing and proposed site improvements, including drains, culverts, retaining walls and fences

RPRC COMPLETENESS REVIEW FORM

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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

11-26.21 On

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