



VILLAGE OF DOBBS FERRY

Building Department
112 Main Street, Dobbs Ferry, NY 10522
Phone: (914) 231-8509 | Fax: (914) 693-3470

Daniel Roemer
Building Inspector

RECEIVED

APR 20 2022

VILLAGE OF DOBBS FERRY
BUILDING DEPARTMENT

Permit Application

Application Number AT2022-0027

Date 04/03/2022

Job Location 23 SENECA ST

Lot # 3.50-7-4

Owner: Gregg Winiarski
16 Sherman Avenue
Dobbs Ferry, New York 10522
917-596-8367

Applicant: Chris Niemiec
PO Box 587
Yonkers, NY 10703
914-739-4874
paulbunyantreewestchester@gmail.com

Application Type: Tree Removal Estimated Cost of Construction: \$

Description of Work: Paul Bunyan's Tree Service has inspected 1 Silver Maple tree at 23 Seneca St.,m Dobbs Ferry. We have determined that there is a significant amount of ivy growing on it. This is causing severe structural damage to the home.

Form Questions:

Application Parcel Owner Contact:

Parcel Owner Email	Gregg.winiarski@iac.com
Parcel Owner Phone	917596-8367

Job Location: 23 SENECA ST

Parcel Id: 3.50-7-4

AFFIDAVIT OF APPLICANT

Chry Moeie being duly sworn, depose and says: That s/he does business as: _____ with offices at: _____ and that s/he is:

___ The owner of the property described herein.

___ The _____ of the New York Corporation _____ with offices at: _____ duly authorized by resolution of the Board of Directors, and that

said corporation is duly authorized by the owner to make this application.

___ A general partner of _____ with offices _____ and that said Partnership is duly authorized by the Owner to make this application.

___ The Lessee of the premises, duly authorized by the owner to make this application.

___ The Architect of Engineer duly authorized by the owner to make this application.

___ The contractor authorized by the owner to make this application.

That the information contained in this application and on the accompanying drawings is true to the best of his knowledge and belief. The undersigned hereby agrees to comply with all the requirements of the New York State Uniform Fire Prevention and Building Code, the Village of Dobbs Ferry Building Code, Zoning Ordinance and all other laws pertaining to same, in the construction applied for, whether or not shown on plans or specify in this application.

Sworn to before me this 19 day of April of 2022



Notary Public / Commission of Deeds

LIM KIM A.

Notary Public, State of New York

No. 01L16144154

Qualified in Westchester County
Commission Expires Apr. 24, 2022

Applicant's Signature



PROPERTY OWNER'S AUTHORIZATION

I Gregg Winiarski as the owner of the subject premises and have authorized the contractor named above to perform the work under the subject application.

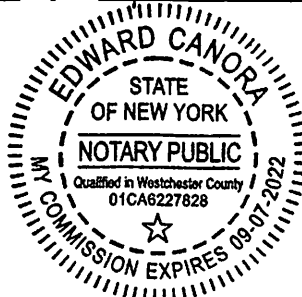
Owner phone number 917596-8367. Owner email address Gregg.winiarski@ic.com gmail.com

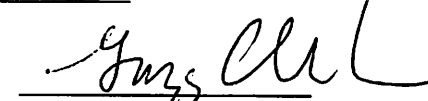
_____ I hereby acknowledge that it is my responsibility as the property owner to ensure that if the permit (if issued) receives a Final Certificate of Approval from the Building Department and further that if a Final Certificate of Approval is not obtained upon completion of the construction, a property violation may be placed on the property for which this permit is being requested.

Sworn to before me this 5th day of April of 2022



Notary Public / Commission of Deeds





PROPERTY OWNER'S SIGNATURE

Kathleen A. Dunne, P.E.
44 Dennis Lane
Pleasantville, NY 10570

Opacic Architects
24 N. Astor St.
Irvington, NY 10533

Attn: Rad Opacic

Re: 23 Seneca St.
Dobbs Ferry, NY

Dear Rad,

I have viewed the location and situation of the large ivy covered tree immediately adjacent to the referenced house. In my opinion, the tree location poses an on-going issue with the house foundation. The tree root pattern for this tree, along with its age, indicate that the roots are already encroaching on the foundation, and especially on the base of the column holding up a corner of the second floor. It also poses a falling hazard if the roots favor one direction away from the house, since that could destabilize the tree. My advice is to remove this tree as soon as possible,

Sincerely yours,



Kathleen A. Dunne, P.E.





Paul Bunyan's Tree Service
PO Box 587, Honkers, NY 10703
(914)739-4874
Paulbunyantreewestchester@gmail.com

Village of Dobbs Ferry
112 Main St., Dobbs Ferry, NY 10522

3 April 2022

To whom it may concern,

Paul Bunyan's Tree Service has inspected one Silver Maple tree at 23 Seneca St., Dobbs Ferry. We have determined that this has an extensive amount of ivy growing on it and is causing severe structural damage. This tree poses a threat to both persons and property and should be removed as soon as possible.

Thank you



Chris Niemiec
Paul Bunyan's Tree Service, Inc.

Mr. Gregg Winiarski
16 Sherman Ave
Dobbs Ferry, NY 10522

March 25, 2022

Dear Mr. Winiarski,

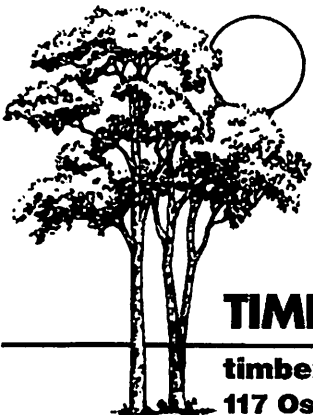
As per your request I inspected the 40" DBH silver maple tree located near the back left corner of the house located at 23 Seneca St.

The tree has an extensive amount of ivy growing on it, so a full assessment of the structural competence is difficult to ascertain. There are, however, several visible defects and known characteristics of the variety that are conclusive.

1. The base of the tree on one side bulges outward and then curls back in rather than having the typical flare of the buttress roots that anchor the tree. Unusual trunk growth is a sign of trouble to come. Without well-developed buttress roots, a tree is far more likely to break at the base or uproot.
2. There is a cavity in the trunk where the main leaders converge. A large section is prone to breaking off at this junction.
3. The tree has been previously cut back which has helped keep the tree from losing large limbs. While this is a great short-term measure to mitigate storm damage potential, poor new branching results and decay tends to invade where the cuts were made. Breakage is much more likely at the site of these old wounds.
4. The tree is in such proximity to the house that roots have grown into the basement and are damaging the foundation.
5. Silver maple trees grow rapidly and consequently have weak wood. This variety is prone to losing large sections in high winds even when no defects are present.

Even though all trees have environmental benefits with regards to carbon sequestering, stormwater absorption, and provide the cooling effects of transpiration and shade, this particular tree has numerous safety concerns whose threats far outweigh these benefits. It is my professional opinion that this tree should be removed.

John Gurtler
ISA Certified arborist NY 5735A



TIMBERLAND TREE CARE INC

timberlandtreecareinc@gmail.com

117 Oscaleta Road, South Salem, NY 10590

(914) 763-9461

1:15



Shared By (917) 596-8367

1:14 PM





George Latimer
Westchester County Executive

Westchester
gov.com

James Maisano
Director, Consumer Protection

Department of Consumer Protection Home Improvement License

PAUL BUNYAN'S TREE SERVICE INC

PO BOX 587

YONKERS, NY-10703

This license is issued in accordance with Article XVI of the Westchester County Consumer Protection Code and is valid only upon presence of the official department seal. Proof of citizenship or immigration status is not required for issuance of this license.

NOT FOR FEDERAL PURPOSES

License Number

WC-23026-H10



Date of Expiration

05/25/2022

ART 1. To be completed by NYS disability and Paid Family Leave benefits carrier or licensed insurance agent of that carrier

Legal Name & Address of Insured (use street address only) JUL BUNYANS TREE SERVICE, INC PO BOX 587 JUNKERS, NY 10703	1b. Business Telephone Number of Insured 914-739-4874
Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., Wrap-Up Policy)	1c. Federal Employer Identification Number of Insured or Social Security Number 133486099
Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder) Village of Dobbs Ferry 2 Main Street Dobbs Ferry, NY 10522	3a. Name of Insurance Carrier ShelterPoint Life Insurance Company 3b. Policy Number of Entity Listed in Box "1a" DBL425750 3c. Policy effective period 01/01/2022 to 12/31/2022

Policy provides the following benefits:

- ☒ A. Both disability and paid family leave benefits.
☐ B. Disability benefits only.
☐ C. Paid family leave benefits only.

Policy covers:

- ☒ A. All of the employer's employees eligible under the NYS Disability and Paid Family Leave Benefits Law.
☐ B. Only the following class or classes of employer's employees:

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 NYS Disability and/or Paid Family Leave Benefits insurance coverage as described above.

Date Signed 3/16/2022 By 
(Signature of Insurance carrier's authorized representative or NYS Licensed Insurance Agent of that insurance carrier)

Telephone Number 516-829-8100 Name and Title Richard White, Chief Executive Officer

IMPORTANT: If Boxes 4A and 5A are checked, and this form is signed by the insurance carrier's authorized representative or NYS Licensed Insurance Agent of that carrier, this certificate is COMPLETE. Mail it directly to the certificate holder.

If Box 4B, 4C or 5B is checked, this certificate is NOT COMPLETE for purposes of Section 220, Subd. 8 of the NYS Disability and Paid Family Leave Benefits Law. It must be emailed to PAU@wcb.ny.gov or it can be mailed for completion to the Workers' Compensation Board, Plans Acceptance Unit, PO Box 5200, Binghamton, NY 13902-5200.

ART 2. To be completed by the NYS Workers' Compensation Board (Only if Box 4B, 4C or 5B have been checked)**State of New York
Workers' Compensation Board**

According to information maintained by the NYS Workers' Compensation Board, the above-named employer has complied with the NYS Disability and Paid Family Leave Benefits Law (Article 9 of the Workers' Compensation Law) with respect to all of their employees.

Date Signed _____ By _____
(Signature of Authorized NYS Workers' Compensation Board Employee)

Telephone Number _____ Name and Title _____

Please Note: Only insurance carriers licensed to write NYS disability and paid family leave benefits insurance policies and NYS licensed insurance agents of those insurance carriers are authorized to issue Form DB-120.1. Insurance brokers are NOT authorized to issue this form.





New York State Insurance Fund

PO Box 88899, Albany, NY 12208

| nysif.com

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

***** 133486099

MCCARTNEY & ROSENBERRY GROUP
DBA MYR AGENCY
477 ASHFORD AVE
ARDSLEY NY 10502



SCAN TO VALIDATE
AND SUBSCRIBE

POLICYHOLDER PAUL BUNYAN'S TREE SERVICE INC P O BOX 587 YONKERS NY 10703		CERTIFICATE HOLDER VILLAGE OF DOBBS FERRY 112 MAIN STREET DOBBS FERRY NY 10522	
POLICY NUMBER W1303 095-2	CERTIFICATE NUMBER 778518	POLICY PERIOD 08/15/2021 TO 08/15/2022	DATE 3/16/2022

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 1303 095-2, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW, AND, WITH RESPECT TO OPERATIONS OUTSIDE OF NEW YORK, TO THE POLICYHOLDER'S REGULAR NEW YORK STATE EMPLOYEES ONLY.

IF YOU WISH TO RECEIVE NOTIFICATIONS REGARDING SAID POLICY, INCLUDING ANY NOTIFICATION OF CANCELLATIONS, OR TO VALIDATE THIS CERTIFICATE, VISIT OUR WEBSITE AT [HTTPS://WWW.NYSIF.COM/CERT/CERTVAL.ASP](https://www.nysif.com/cert/certval.asp). THE NEW YORK STATE INSURANCE FUND IS NOT LIABLE IN THE EVENT OF FAILURE TO GIVE SUCH NOTIFICATIONS.

THIS POLICY DOES NOT COVER CLAIMS OR SUITS THAT ARISE FROM BODILY INJURY SUFFERED BY THE OFFICERS OF THE INSURED CORPORATION.

CHRISTOPHER NIEMIEC-PRES
PAUL BUNYAN'S TREE SERVICE INC
1 OF 1

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

VALIDATION NUMBER: 620050143