

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

MAY 0 8 2024

VILLAGE OF DOBBS FERRY BUILDING DEPARTMENT

Date 05/03/2024

Permit Application

Application Number AT2024-0056

Job Location 28 LEFURGY AVE

Owner: SEAN PATRICK KERSTEN

28 LEFURGY AVE

DOBBS FERRY, NY 10522

914 525 8791

Applicant: Kersten, Sean and Tanya

28 LEFURGY AVE

DOBBS FERRY, NY 10522

914-231-6049 samdogk@earthlink.net

Lot #3.100-79-18

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

Description of Work: Removal of dying tree, sap from tree damages cars parked in driveway, branches are intertwined with power lines.

Form Questions:

Diameter of Tree to be Removed	18-inch
Diameter of Tree to be Removed	18-11101

Application Parcel Owner Contact:

Parcel Owner Email	samdogk@earthlink.net
Parcel Owner Phone	9144138890

Job Location: 28 LEFURGY AVE

Parcel ld: 3.100-79-18

	depose and says: That s/he does business as:	with offices at:
	and that s/he is:	
The owner of the property describ	ped 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 authorize	ed 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 auti	norized by the owner to make this application.	
The contractor authorized by the or	wner to make this application.	
Building Code, the Village of Dobbs Ferry construction applied for, whether or not show to before me this		vs pertaining to same, in the
Sworn to before the this	uay 0101	
Notary Public / Commission of Deeds	Applicant's	Signature
OPERTY OWNER'S AUTHORIZATION		
``		
FRA) REPETTA) as the owner of the subject	t premises and have authorized the contractor na	med above to perform the wo
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der the subject application.		med above to perform the wo
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