



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

JUN 08 2022

VILLAGE OF DOBBS FERRY
BUILDING DEPARTMENT

Permit Application

Application Number AT2021-0148

Date 06/08/2022

Job Location 76 OGDEN PLACE WEST Lot # 3.130-119-3

Owner: CARL M.R. VAN DER ZANDT
76 OGDEN PLACE WEST
DOBBS FERRY, NY 10522
646-270-3494

Applicant: Elizabeth van der Zandt
76 Ogden Place
Dobbs Ferry, NY 10522
6462703494 lizvdzandt@gmail.com

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

Description of Work: We would like permission to remove two trees on our property: one Spruce tree and one Locust tree.

Form Questions:

Application Parcel Owner Contact:

Parcel Owner Email	lizvdzandt@gmail.com
Parcel Owner Phone	6462703494

Job Location: 76 OGDEN PLACE WEST

Parcel Id: 3.130-119-3

AFFIDAVIT OF APPLICANT

I _____ 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 8th day of June of 2022


Notary Public / Commission of Deeds

ELIZABETH A. DREAPER
Notary Public, State of New York
No: 01DR6177050


Applicant's Signature

Qualified In Westchester County
Commission Expires November 5, 2023

PROPERTY OWNER'S AUTHORIZATION


I Carl van der Zandt 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 6462703494. Owner email address lizvdzandt@gmail.com

Carl van der Zandt

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 1st day of June of 2022


Notary Public / Commission of Deeds
Gregory F. Hauser
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 02HA4758384
New York County
Commission Expires January 31, 2023


PROPERTY OWNER'S SIGNATURE





George Latimer
Westchester County Executive

Westchester
gov.com

James Maisano
Director, Consumer Protection

Department of Consumer Protection Home Improvement License

TIGRE TREE CARE AND LANDSCAPING INC.

134 MAIN STREET - #2

DOBBS FERRY, NY-10522

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-25963-H13



Date of Expiration

05/21/2023



PO Box 66699, Albany, NY 12206
| nysif.com

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

***** 462504663
J & Y ASSOCIATES OF BREWSTER
86 MAIN ST
BREWSTER NY 10509



SCAN TO VALIDATE
AND SUBSCRIBE

POLICYHOLDER

TIGRE TREE CARE AND LANDSCAPING INC
70 BROADWAY
DOBBS FERRY NY 10522

CERTIFICATE HOLDER ARDSLEY COUNTRY CLUB

VILLAGE OF DOBBS FERRY
112 MAIN STREET
DOBBS FERRY NY 10522

POLICY NUMBER	CERTIFICATE NUMBER	POLICY PERIOD	DATE
W2531 885-8	825017	12/08/2021 TO 12/08/2022	4/14/2022

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 2531 885-8, 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 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: 615948189