

## **Plan Submittal Form**

Address: 78 PRICE STREET

Application #: A2022-0413

Project: REPLACE EXISTING DECK/SIDING AND NEW FRONT CANOPY

Name: MUKTA THAKER

Email: rjt.thaker@gmail.com

Phone: 914-589-6210

Plans attached are being submitted for (check appropriate box):

- ☐ Building permit application 1 PDF copy & 2 paper copies ¼ scale
- ☐ Amendment to an application or permit, 2 sealed copies
- ☐ Final As Built to close permit, 1 sealed copy
- ☐ Final survey to close permit, 1 sealed copy

Plans attached are submitted at the direction of the Building Inspector for review by the following board (check all that apply):

- ☐ BOT- 1 PDF copy + 5 paper copies ¼ scale
- ☐ PB - 1 PDF copy + 4 paper copies ¼ scale
- ☒ ZBA - 1 PDF copy + 4 paper copies ¼ scale
- ☐ AHRB – 1 PDF copy + 2 paper copies ¼ scale

Received Stamp:



**APPLICATION TO ZONING BOARD OF APPEALS  
VILLAGE OF DOBBS FERRY**

**Note:** Four copies of the application must be filed with the Clerk of the Board, no later than 2:00 p.m., twenty-one (21) days prior to the date of the meeting.

**Date Filed:** 8/23/22

**Applicant's Name:** MUKTA THAKER **Telephone:** 914-589-6210

**Property Location:** 78 PRICE STREET

**Sheet:** 3.140 **Block:** 125 **Lots/Parcel:** 2

The undersigned applicant requests a hearing before the Zoning Board of Appeals based on the following: (check one)

X Appeals decision of Building Inspector \_\_\_\_\_ Special Permit

Every application or appeal must be accompanied by an accurate plot plan to scale showing location of all existing structures, and also drawings showing the exact location, dimensions, and the nature of all proposed structures. These requirements will ordinarily be best met with surveys and architect's drawings. The Board may require that surveys and/or drawings be prepared and signed by duly accredited surveyors, engineers, or architects. Applicant is required to show proof of title to or legal interest in the premises, by deed or contract of sale, or other document. This application or appeal is made pursuant to the authorization contained in the Building Zoning Ordinance:

**Article:** X **Section:** 300 **Subdivisions:** 35

The basis of the relief sought by the undersigned pursuant to the provisions of the Building Zoning Ordinance is as follows: (Set forth briefly all pertinent facts and use additional sheets if necessary).

\* Requesting 5.7' Rear Yard Variance \*

MUKTA THAKER  
Applicant

STATE OF NEW YORK  
COUNTY OF WESTCHESTER ) ss:

On this 23 day of August, 20 22 before me personally came Mukta Thaker, who came duly sworn deposes and says that he/she read the foregoing application and knows the content thereof and that the same is true to his/her own knowledge.

Monica Mitter  
Notary Public

MONICA MITTER  
Notary Public, State of New York  
Reg. No. 01MI6232408  
Qualified in Westchester County  
Commission Expires 12-13-2022

# Short Environmental Assessment Form

## Part 1 - Project Information

### Instructions for Completing

**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

<b>Part 1 – Project and Sponsor Information</b>							
Name of Action or Project: REPLACE EXISTING DECK/SIDING AND,NEW FRONT CANOPY ON PRIVATE SF RESIDENCE							
Project Location (describe, and attach a location map): 78 PRICE STREET DOBBS FERRY NY 10522							
Brief Description of Proposed Action:  REPLACE EXISTING DILAPIDATED DECK REPLACE EXISTING BROKEN VINYL SIDING							
Name of Applicant or Sponsor:  MUKTA THAKER		Telephone: 914-589-6210  E-Mail: rjt.thaker@gmail.com					
Address: 78 PRICE STREET							
City/PO: DOBBS FERRY		State: NY	Zip Code: 10522				
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NO</td> <td style="text-align: center;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NO</td> <td style="text-align: center;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
3. a. Total acreage of the site of the proposed action? _____ acres b. Total acreage to be physically disturbed? <u>0</u> acres c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres							
4. Check all land uses that occur on, are adjoining or near the proposed action: <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic      Other(Specify): Parkland							

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span><input type="checkbox"/> Shoreline</span> <span><input type="checkbox"/> Forest</span> <span>Agricultural/grasslands</span> <span>Early mid-successional</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span>Wetland</span> <span><input type="checkbox"/> Urban</span> <span>Suburban</span> </div>		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, <div style="margin-left: 20px; margin-top: 10px;">           a. Will storm water discharges flow to adjacent properties?         </div> <div style="margin-left: 20px; margin-top: 10px;">           b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?         </div> If Yes, briefly describe: <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div> <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div>	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment: <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div> <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div>	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div> <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div>	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div> <div style="border-bottom: 1px solid black; margin-top: 5px; height: 1.2em;"></div>	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b></p> <p>Applicant/sponsor/name: _____ Date: _____</p> <p>Signature: <u>MUKTA THAKER</u> Title: <u>OWNER</u></p>		