

ZONING BOARD OF APPEALS

City of Beacon, New York

APPLICATION FOR APPEAL

OWNER: Thomas & Lou Ann Doyle

ADDRESS: 136 Washington Ave
Beacon N.Y. 12508

TELEPHONE: 845-831-8636

E-MAIL: thoma452@hotmail.com

APPLICANT (if not owner): _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL: _____

REPRESENTED BY: _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL: _____

PROPERTY LOCATION: 136 Washington Avenue ZONING DISTRICT: R1-10

TAX MAP DESIGNATION: SECTION 0054 BLOCK 32 LOT 389796

Section of Zoning Code appealed from or Interpretation desired:

223.17c

Reason supporting request:

To add more living space, to close in the porch so no
water & cold come into the basement, beautify the house

Supporting documents submitted herewith: Site Plan, Survey, etc. as required:

Date: _____

Thomas Doyle
Owner's Signature

Fee Schedule

AREA VARIANCE	\$ 250
USE VARIANCE	\$ 500
INTERPRETATION:	\$ 250

Applicant's Signature

****escrow fees may apply if required by Chairman****

APPLICATION PROCESSING RESTRICTION LAW

Affidavit of Property Owner

Property Owner: Thom + Joan Joyce

If owned by a corporation, partnership or organization, please list names of persons holding over 5% interest.

List all properties in the City of Beacon that you hold a 5% interest in:

Applicant Address: 136 Washington Ave Beacon N.Y.

Project Address: 136 Washington Ave Beacon N.Y.

Project Tax Grid # 6054-32-389796-0000

Type of Application _____

Please note that the property owner is the applicant. "Applicant" is defined as any individual who owns at least five percent (5%) interest in a corporation or partnership or other business.

I, Thom + Joan Joyce, the undersigned owner of the above referenced property, hereby affirm that I have reviewed my records and verify that the following information is true.

1. No violations are pending for ANY parcel owned by me situated within the City of Beacon
2. Violations are pending on a parcel or parcels owned by me situated within the City of Beacon
3. ALL tax payments due to the City of Beacon are current
4. Tax delinquencies exist on a parcel or parcels owned by me within the City of Beacon
5. Special Assessments are outstanding on a parcel or parcels owned by me in the City of Beacon
6. ALL Special Assessments due to the City of Beacon on any parcel owned by me are current

✓ no violations
no
yes
~~yes~~ no
no
yes

[Signature]
Signature of Owner

Title if owner is corporation _____

Office Use Only:

Applicant has violations pending for ANY parcel owned within the City of Beacon (Building Dept.)
ALL taxes are current for properties in the City of Beacon are current (Tax Dept.)
ALL Special Assessments, i.e. water, sewer, fines, etc. are current (Water Billing)

NO	YES	Initial
<u>✓</u>	<u>✓</u>	<u>[Initials]</u>
<u>✓</u>	<u>✓</u>	<u>[Initials]</u>

pd 1-28-18

FOR OFFICE USE ONLY

Application #

CITY OF BEACON

1 Municipal Plaza, Beacon, NY

Telephone (845) 838-5000 • <http://cityofbeacon.org/>**INDIVIDUAL DISCLOSURE FORM**

(This form must accompany every land use application and every application for a building permit or certificate of occupancy submitted by any person(s))

Disclosure of the names and addresses of all persons filing a land-use application with the City is required pursuant to Section 223-62 of the City Code of the City of Beacon. Applicants shall submit supplemental sheets for any additional information that does not fit within the below sections, identifying the Section being supplemented.

SECTION A

Name of Applicant:

Thom & You Ann Joyce

Address of Applicant:

136 Washington Ave Beacon N.Y. 12508

Telephone Contact Information:

845-831-8636**SECTION B. List all owners of record of the subject property or any part thereof.**

Name	Residence or Business Address	Telephone Number	Date and Manner title was acquired	Date and place where the deed or document of conveyance was recorded or filed.
Thom Joyce	Residence	831-8636		
You Ann Joyce	Residence	831-8636		

SECTION B. Is any owner of record an officer, elected or appointed, or employee of the City of Beacon or related, by marriage or otherwise, to a City Council member, planning board member, zoning board of appeals member or employee of the City of Beacon?

☐

YES

☒

NO

If yes, list every Board, Department, Office, agency or other position with the City of Beacon with which a party has a position, unpaid or paid, or relationship and identify the agency, title, and date of hire.

Agency	Title	Date of Hire, Date Elected, or Date Appointed	Position or Nature of Relationship

SECTION C. If the applicant is a contract vendee, a duplicate original or photocopy of the full and complete contract of purchase, including all riders, modification and amendments thereto, shall be submitted with the application.

SECTION D. Have the present owners entered into a contract for the sale of all or any part of the subject property and, if in the affirmative, please provide a duplicate original or photocopy of the fully and complete contract of sale, including all riders, modifications and amendments thereto.

☐

YES

☒

NO

Tom Ann Joye

I, Tom Ann Joye being first duly sworn, according to law, deposes and says that the statements made herein are true, accurate, and complete.

(Print) X THOM and JOU ANN JOYE

(Signature) X *Tom Ann Joye*
[Signature]