ZONING BOARD OF APPEALS

City of Beacon, New York

APPLICATION FOR APPEAL

OWNER: BEACON TODO LLC	ADDRESS: 4 CROSS ST
	BEACON, NY 12508
TELEPHONE: 646.284.3118	E-MAIL: JDONOVAN@HUDSONTDOD.COM
APPLICANT (if not owner):	ADDRESS:
TELEPHONE:	E-MAIL:
REPRESENTED BY: DPBA Wohleds, PLIC	ADDRESS: 46 VERPLANCK AVE
TELEPHONE: 432.371.6471	E-MAIL: SHASAN @ DPBARHICIECTURE: LON
PROPERTY LOCATION: 18 WEST MAIN STREET BEACON, NY 12508	DBURKE @DPB ARCHITECTURE. LOM ZONING DISTRICT: LINKAGE, L-ZONE
TAX MAP DESIGNATION: SECTION 5954	BLOCK 26 LOT 647966
Section of Zoning Code appealed from or Interpretation de	sired:
RELIEF FROM SECTION 223-15. E.1.C. "NO SECTION 223-15. E.1.C. "NO SECTION SECTION 223-15. E.1.C. "NO SECTION S	
Reason supporting request:	
	ET LEVEL, AND VISIBILITY OF SIGNS LOCATED C., WILL BE OBSCURED BY STREET PARKING. AIL SIGNAGE ABOVE THE ROOF EAVE.
Supporting documents submitted herewith: Site Plan, Surv	rey, etc. as required:
Date: 19 DECEMBER 2017 Fee Schedule	Owner's Signature
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: DSEPH DONOVAN If owned by a corporation, partnership or organization,	please list names of persons holding over 5% in	terest.
List all properties in the City of Beacon that you hold a SEE ATTACHED UST OF OWNED PROPER	and the same of th	
Applicant Address: 4 GROSS STREET, BOA		
Project Address: 18 W. MAIN STREET, BE	ACON, NY 1250B	
Project Tax Grid # 647966		
Type of Application Variance Please note that the property owner is the applicant. "A percent (5%) interest in a corporation or partnership or	·	s at least five
I, JOE DONOVAN hereby affirm that I have reviewed my records and veri	the undersigned owner of the above refere fy that the following information is true.	nced property,
1. No violations are pending for ANY parcel owner	ed by me situated within the City of Beacon	
2. Violations are pending on a parcel or parcels ov	wned by me situated within the City of Beacon	ND_
3. ALL tax payments due to the City of Beacon ar	e current	YES
4. Tax delinquencies exist on a parcel or parcels o	wned by me within the City of Beacon	NO
5. Special Assessments are outstanding on a parce	el or parcels owned by me in the City of Beacon	ND
6. ALL Special Assessments due to the City of Be	MAIN	YES
_	Signature of Owner	
	Title if owner is corporation	
Office Use Only: Applicant has violations pending for ANY parcel owned within th ALL taxes are current for properties in the City of Beacon are cur ALL Special Assessments, i.e. water, sewer, fines, etc. are current	rent (Tax Dept.)	Initial 9m

FOR OFFICE USE ONLY

Application #

CITY OF BEACON

1 Municipal Plaza, Beacon, NY

Telephone (845) 838-5000 • http://cityofbeacon.org/

ENTITY DISCLOSURE FORM

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

Disclosure of the names and addresses of all persons or entities owning any interest or controlling position of any Limited Liability Company, Partnership, Limited Partnership, Joint Venture, Corporation or other business entity (hereinafter referred to as the "Entity") filing a land-use application with the City is required pursuant to Section 223-62 of the City Code of the City of Beacon. If any Member of the Entity is not a natural person, then the names and addresses as well as all other information sought herein must be supplied about the non-natural person member of that Entity, including names, addresses and Formation filing documents. Applicants shall submit supplemental sheets for any additional information that does not fit within the below sections, identifying the Section being supplemented.

SECTION A.

IF AFFIANT IS A PARTNERSHIP, JOIN VENTURE OR OTHER BUSINESS ENTITY, EXCEPT A CORPORATION:

Name of Entity	Address of Entity
BeaconToddUC	4 Cross St, Beacon, NY 12508
Place where such business entity was created	Official Registrar's or Clerk's office where the documents and papers creating entity were filed
NYS	MYS Pept of State
Date such business entity or partnership was created 28-Nov-2014	Telephone Contact Information 646-284-3118 j Donovan @ Hudson Todd.com

IF AFFIANT IS A CORPORATION:

Name of Entity	Telephone Contact Information
Principal Place of Business of Entity	Place and date of incorporation
Method of Incorporation	Official place where the documents and papers of incorporation were filed

SECTION B. List all persons, officers, limited or general partners, directors, members, shareholders, managers, and any others with any interest in or with the above referenced Entity. List all persons to whom corporate stock has been pledged, mortgaged or encumbered and with whom any agreement has been made to pledge, mortgage or encumber said stock. Use a supplemental sheet to list additional persons.

Name	Resident Address	Resident Telephone Number	Nature and Extent of Interest
Joseph H Ponovai Janet T. ST Goax	4 Cross St.	646284-3118	50%
Janet T. ST Goar	4 Cross St.	917-687-0486	50% 50%
	100 200 = 100		

SECTION C. 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.
Beacon Toddll			27-Jul-2015	Putchess Co.

SECTION D. Is any owner,	, of record or otherwise, an	officer, director,	stockholder, ager	nt or employee of a	ny person
listed in Section B-C?					

X	YES		NO
\boxtimes	YES		NO

Name	Employer	Position
Joseph H Donov	an self	investo/managa/buile
Joseph H Donov Janet T. STGoan	(.	(c (c 11
N-3 (4.31) - 10 PMH		
<u> </u>		
<u> </u>		

	otherwise, to a City Cou		appointed, or employee of appointed, or employee of ard member, zoning boar	
YES	NO NO			
		e, agency or other position identify the agency, title, a	n with the City of Beacon and date of hire.	with which a party
Agency	Title	Date of Hire, Date Elected, or Date Appointed	Position or Nature of Relationship	
	;			_
SECTION F. Was any date of the application?	person referred to in Sect	ions A-D known by any o	other name within five (5)	years preceding the
YES	NO NO			
Current Name		Other Names		
			550	
	· 18 -			
				1

SECTION G. List the names and addresses of each person, business entity, partnership and corporation in the chain of title of the subject premises for the five (5) years next preceding the date of the application.

Name Rahat LLC	GO Cronomer Heights Dr., Hewburgh 12550

SECTION H. 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 I. 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
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I, Joseph H. Donovan being first duly sworn, according to law, deposes and says that I am (Title) Managing mbv, an active and qualified member of the Beacon Todd LUGa business duly authorized by law to do business in the State of New York, and that the statements made herein are true, accurate, and complete.

(Signature)