

## ZONING BOARD OF APPEALS

City of Beacon, New York

### APPLICATION FOR APPEAL

OWNER: Dwight Healey

ADDRESS: 409 Fishkill Avenue Beacon NY 12508

TELEPHONE: 845-220-9400

E-MAIL: dhealey@healeybrothers.com

APPLICANT (if not owner): Sign Here Sign Company

ADDRESS: 808 Pennsylvania Ave Matamoras PA 18336

TELEPHONE: 570-491-4373

E-MAIL: signhere@signheresignco.com

REPRESENTED BY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PROPERTY LOCATION: 409 Fishkill Avenue

ZONING DISTRICT: GB

TAX MAP DESIGNATION: SECTION 6055

BLOCK 80 LOT 416064

Section of Zoning Code appealed from or Interpretation desired:

223-15E (1)(B)- No sign shall exceed 2' in height and Section 223-15(E)(1) to install three new signs affixed to the building's outer wall (one sign permitted)

Reason supporting request:


Per Dealership agreement dealer is obligated to utilize a larger sign than code allows.

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

Attached is survey from Mitsubishi with their Sign package

Date: 11-21-17

  
Owner's Signature

  
Applicant's Signature

#### Fee Schedule

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

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

## APPLICATION PROCESSING RESTRICTION LAW

### Affidavit of Property Owner

Property Owner: DKH REALTY

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:

410 Fishkill Avenue Beacon NY 12508

Applicant Address: 2528 Route 17M Goshen NY

Project Address: 409 Fishkill Avenue Beacon NY 12508


Project Tax Grid # \_\_\_\_\_

Type of Application Sign Variance

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, Dwight Healey, 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      | <u>x</u> |
| 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                                       | <u>x</u> |
| 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      | <u>x</u> |

  
\_\_\_\_\_  
Signature of Owner

MEM. MGR  
\_\_\_\_\_  
Title if owner is corporation

Office Use Only:	NO	YES	Initial
Applicant has violations pending for ANY parcel owned within the City of Beacon (Building Dept.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>EH</u>
ALL taxes are current for properties in the City of Beacon are current (Tax Dept.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>A</u>
ALL Special Assessments, i.e. water, sewer, fines, etc. are current (Water Billing)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>g</u>

**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: Dwight HealeyAddress of Applicant: 409 Fishkill Avenue Beacon NY 12508Telephone Contact Information: 845-220-9400**SECTION B. List all owners of record of the subject property or any part thereof.**

<b>Name</b>	<b>Residence or Business Address</b>	<b>Telephone Number</b>	<b>Date and Manner title was acquired</b>	<b>Date and place where the deed or document of conveyance was recorded or filed.</b>

**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

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

(Print)

DW/BH/HEATH

(Signature)



**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
Place where such business entity was created	Official Registrar's or Clerk's office where the documents and papers creating entity were filed
Date such business entity or partnership was created	Telephone Contact Information

**IF AFFIANT IS A CORPORATION:**

Name of Entity HEALEY BROTHERS MITSU	Telephone Contact Information 8 914- 474-3305
Principal Place of Business of Entity Goshen NY	Place and date of incorporation GOSHEN NY, 6-26-2000
Method of Incorporation L.L.C.	Official place where the documents and papers of incorporation were filed GOSHEN NY

**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.

[illegible]

**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.
DKH REALTY	2528 ROUTE 17m Goshen NY	914-474-3305	6-26-2000 REAL ESTATE TRANSACTION	BEACON TOWN HALL

BEACON NY

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



YES



NO

Name	Employer	Position
Dwight Heavey	DKH Realty	Principle

**SECTION E.** Is any party identified in Sections A- C 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 F.** Was any person referred to in Sections A-D known by any other name within five (5) years preceding the date of the application?

☐ YES ☒ NO

[illegible]



**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	Address
DKH REALITY	2520 Route 17 m GOOSHEN NY 10925

**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

I, Dwight Healey being first duly sworn, according to law, deposes and says that I am (Title) Principle, an active and qualified member of the DKH Reality, a 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.

(Print) DWIGHT HEALEY

(Signature) [Signature]