

ZONING BOARD OF APPEALS

City of Beacon, New York

APPLICATION FOR APPEAL

OWNER: AMIT KOCHHAR

ADDRESS: 35 ROMBOUT AVE

TELEPHONE: 917-225-1249

BEACON, NY 12508

E-MAIL: AMITK@ME.COM

APPLICANT (if not owner): _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL: _____

REPRESENTED BY: JEFF WILKINSON, R.A.

ADDRESS: 13 CHAMBERS ST

TELEPHONE: 845-565-1835

NEWBURGH, NY 12550

E-MAIL: HUDSONVALLEYALH@gmail.com

PROPERTY LOCATION: 35 ROMBOUT AVE.

ZONING DISTRICT: R1-7.5

TAX MAP DESIGNATION: SECTION 5954

BLOCK 34 LOT 6888 52

Section of Zoning Code appealed from or Interpretation desired:

RELIEF FROM REQUIRED 15 FOOT SIDEYARD SETBACK. APPROXIMATELY
6 FT X 2 FT OF THE PROPOSED ADDITION WILL NEED A VARIANCE
(12 S.F.) OF 2'-4" TO BE GRANTED A BUILDING PERMIT.

Reason supporting request:

THE AREA IN QUESTION CONTINUES THE LINE OF THE EXISTING HOUSE.

THE ADDITION WILL BE SYMPATHETIC TO THE HISTORIC NATURE OF THE
PROPERTY AND WILL OVERALL IMPROVE THE LOOK AND APPEARANCE OF PROPERTY.

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

SEE ATTACHED DRAWINGS

Date: JUNE 16, 2018

Kochhar

Owner's Signature

Kochhar

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: AMIT KOCHHAR

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:

396 MAIN STREET ✓

Applicant Address: 35 ROMBOUT AVE

Project Address: 35 ROM BOUT AVE ✓

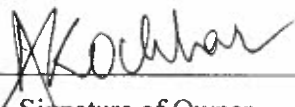
Project Tax Grid # 5954-34-68852

Type of Application ZBA AREA VARIANCE / BUILDING PERMIT

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, AMIT KOCHHAR, 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 NONE
2. Violations are pending on a parcel or parcels owned by me situated within the City of Beacon NONE
3. ALL tax payments due to the City of Beacon are current YES PAID
4. Tax delinquencies exist on a parcel or parcels owned by me within the City of Beacon NONE
5. Special Assessments are outstanding on a parcel or parcels owned by me in the City of Beacon NONE
6. ALL Special Assessments due to the City of Beacon on any parcel owned by me are current NONE


Signature of Owner

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 type="checkbox"/>	<input type="checkbox"/>	
ALL taxes are current for properties in the City of Beacon are current (Tax Dept.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>AK</u>
ALL Special Assessments, i.e. water, sewer, fines, etc. are current (Water Billing)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>AK</u>

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: AMIT KOCHHAR

Address of Applicant: 35 ROMBOUT AVE, BEACON, NY

Telephone Contact Information: 917-225-1249

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.
KAREN REITER	35 ROMBOUT AVE	917-225-1249	11/26/2012	BEACON
AMIT KOCHHAR	"	917-225-1249	"	BEACON

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.

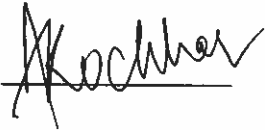
☒ NO

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

(Print) AMIT KOCHHAR

(Signature) 

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

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, _____ being first duly sworn, according to law, deposes and says that I am (Title) _____, an active and qualified member of the _____, 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) _____

(Signature) _____