

Application Date: 7/11/25
Fees Paid: \$725

SP# 3845

INCORPORATED VILLAGE OF FREEPORT
SITE PLAN REVIEW APPLICATION
PLANNING BOARD

NOTE: ACCEPTANCE OF THIS APPLICATION BY THE VILLAGE CLERK'S OFFICE DOES NOT CONSTITUTE A COMPLETE APPLICATION

PROPERTY ADDRESS: 157 SPORTSMAN AV FREEPORT ZONING DISTRICT Res A.
SECTION 02 BLOCK 89 LOT 4 LOT SIZE: 2500 SQF

| <input type="checkbox"/> TENANT <u>APPLICANT</u> | <input type="checkbox"/> LESSEE | <u>PROPERTY OWNER</u> |
|--|---------------------------------|---|
| Name: <u>SAWF</u> | | Name: <u>RALPH LUNATI</u> |
| Address: | | Address: <u>160 W. INDUSTRY COURT</u> <u>DEER PARK, SUITE E W41129</u> |
| Telephone #: | | Telephone #: <u>50 631-831-1649</u> |

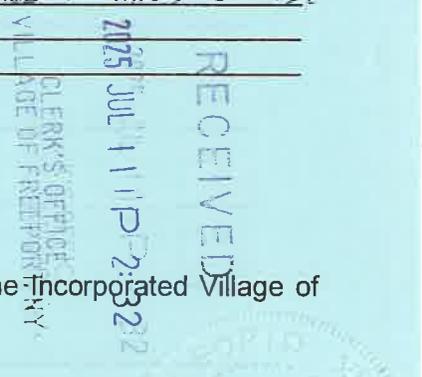
Attorney Name: _____ Address: _____
(optional) Phone #: _____

Present Land Use: Rest. Proposed Land Use: Rest.

Description of Proposed Work: RAISE THE HOUSE & REMODEL INSIDE AND OUTSIDE

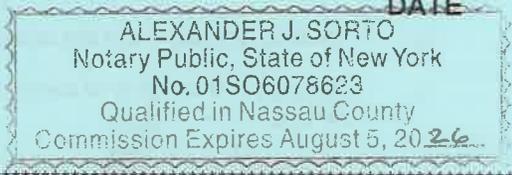
I request a preliminary meeting: YES NO

I request a waiver of the public hearing and hereby certify the following:
A. The subject property is zoned Residence A or Residence AA.
B. The proposed construction is not a new building or dwelling.
C. It is my belief that the criteria contained in §209-7 of the Code of the Incorporated Village of Freeport are satisfied. YES NO



APPLICANT'S SIGNATURE _____ DATE 06-30-25

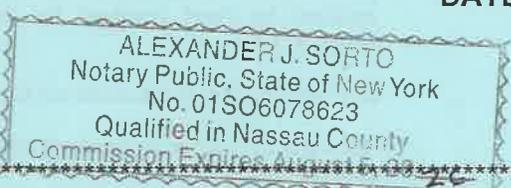
Sworn to before me this 30 day of JUNE, 2025.
Notary Public



Property Owner's Consent: _____ am (are) the owner(s) of the subject property and consent to the filing of this application.

PROPERTY OWNER'S SIGNATURE _____ DATE 06-30-25

Sworn to before me this 30 day of JUNE, 2025.
Notary Public



FOR VILLAGE USE ONLY

| | |
|---|--|
| Site Plan Public Hearing Required: <input type="checkbox"/> YES <input type="checkbox"/> NO | Date of Hearing: _____ Date of Decision: _____ |
| Village Clerk's Signature: _____ | <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____ |
| Planning Board Signature: _____ | Date: _____ |



INC. VILLAGE OF FREEPORT

Department of Buildings

46 NORTH OCEAN AVENUE
FREEPORT, NEW YORK 11520
(516) 377-2242
FAX (516) 377-2493

ROBERT T. KENNEDY
MAYOR

E-MAIL BUILDINGDEPT@FREEPORTNY.GOV

SERGIO A. MAURAS
SUPERINTENDENT OF BUILDINGS

SITE PLAN LETTER

July 9, 2025

One Sportsman LLC
157 Sportsman Ave
Freeport, NY 11520

RE: **157 Sportsman Ave, Freeport, NY 11520**
Zoning District – Residence A Sec. 62 Blk. 89, Lot 4
Building Permit Application #20254197

Description: House elevation, proposed 6' x 3.5' front platform, 4' x 7' rear platform, 136SF second floor addition, 83Sf rear balcony and removal of windows on the northern side of structure.

Dear Sir/Madam

The above referenced application was initially reviewed by the Building Department and it has been determined that in order to proceed with the application process, additional approval from the Site Plan Review Board will be required.

For your convenience, we have enclosed the instructions, application, Building Department letters/documents, the Environmental Assessment form, and the Negative Declaration page pertaining to your building application. Please call the **Village Clerk's Office at 516-377-3632** to make an appointment, during normal business hours, to review the completed application. Changes or additional information may be required for the application; therefore, only **ONE** complete package of the twelve (12) sets should be brought in for the initial appointment with the Clerk's Office. **Only after this initial appointment should the additional copies be made.**

Be further advised that you must submit an application to the Site Plan Review Board within sixty (60) days of the date of this letter. In the event that you do not file an application within the allotted sixty (60) days, this letter will expire and the Building Permit Application in conjunction with same will be cancelled. Subsequently, a new Building Permit Application and filing fees will be required.

If you should have any questions or require any additional information with reference to the Site Plan Review Board Application, please call the **VILLAGE CLERK'S OFFICE** at 377-3632.

Very truly yours,

Sergio A. Mauras
Superintendent of Buildings
/Daniela Hernandez
cc: Village Clerk
ZBA Approval Needed: NO

VILLAGE OF FREEPORT, NY
CLERK'S OFFICE

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VILLAGE OF FREEPORT
Department of Buildings
Recommendation

Notice

X Negative Declaration

Positive Declaration

In accordance with Section 8-0113, Article 8 of the New York Environmental Conservation Law and Chapter 110 of the Village Code, this Department has conducted an initial review to determine whether the following project may have a significant effect on the environment and on the basis of that review hereby finds:

X The proposed project will not have a significant effect on the environment and therefore does not require the preparation of an Environmental Impact Statement.

— The proposed project may have a significant effect on the environment and therefore requires the preparation of an Environmental Impact Statement.
(See reasons below)

Project:

Building Permit App. 20254197

Location: 157 Sportsmans Ave , Freeport NY 11520

Applicant: One sportsman LLC

Description: House elevation, proposed 6' x 3.5' front platform, 4' x 7' rear platform, 136SF second floor addition, 83Sf rear balcony and removal of windows on the northern side of structure.

Lead Agency: Department of Buildings
for the Board of Trustees
Village of Freeport
46 North Ocean Avenue, Freeport, NY

Agency Contact Person:
Superintendent of Buildings
(516) 377-2242

REASON(S) FOR DETERMINATION

This finding is based upon Section 617.10 of Article of the New York Environmental Conservation Law, the criteria for determining what actions may have a significant effect on the environment, as follows:

A) _____

B) Possible environment effects identified:
(only if positive determination)

Dated: July 9, 2025

VILLAGE OF FREEPORT, NY
CLERK'S OFFICE
2025 JUL 11 P 2:33
Sergio A. Mauras
Sergio A. Mauras
Superintendent of Buildings

IMPORTANT: This declaration and supporting attachments are open for inspection and public response at the office of the Superintendent of Buildings.

617.20
Appendix B
Short Environmental Assessment Form

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.

| | | | |
|--|--|---|--|
| Part 1 - Project and Sponsor Information | | | |
| Name of Action or Project: House Raising / Renovation | | | |
| Project Location (describe, and attach a location map): 157 Sportsman Ave Freeport, NY 11520 | | | |
| Brief Description of Proposed Action: House Raising / Renovation <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px auto; width: 150px;">APR 22 2025</div> | | | |
| Name of Applicant or Sponsor: One Sportsman LLC | | Telephone: 631-569-5302 | |
| | | E-Mail: rfunati@lunatigroup.com alexsorto@hotmail.com | |
| Address: 160 W Industry CT Suite E | | | |
| City/PO: Deer Park | | State: NY | Zip Code: 11729 |
| 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. | | | NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> |
| 2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: | | | NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> |
| 3.a. Total acreage of the site of the proposed action? | | .06 acres | |
| b. Total acreage to be physically disturbed? | | 0 acres | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? | | .06 acres | |
| 4. Check all land uses that occur on, adjoining and near the proposed action. | | | |
| <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland | | | |

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| | | | |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| 5. Is the proposed action, 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 checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? | <input type="checkbox"/> | <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? If Yes, identify: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are public transportation service(s) available at or near the site of the proposed action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 10. Will the proposed action connect to an existing public/private water supply? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES] If No, describe method for providing potable water: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. Will the proposed action connect to existing wastewater utilities? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES] If No, describe method for providing wastewater treatment: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Is the proposed action located in an archeological sensitive area? | <input checked="" type="checkbox"/> | <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? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban | | | |
| 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? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is the project site located in the 100 year flood plain? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | | |
|--|-------------------------------------|--------------------------|
| 18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ | NO | YES |
| | <input checked="" 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: _____ _____ | NO | YES |
| | <input checked="" 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: _____ _____ | NO | YES |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE | | |
| Applicant/sponsor name: <u>Ralph Lunati</u> | Date: <u>4/18/25</u> | |
| Signature: _____ | | |

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

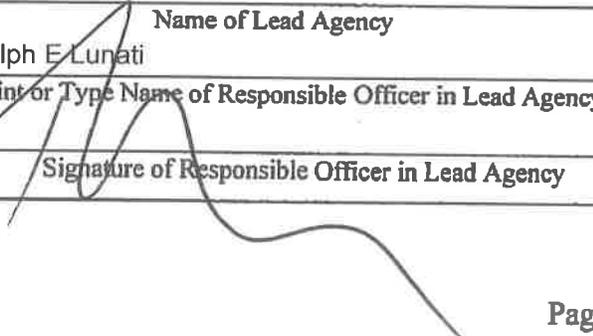
| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------------|------------------------------------|
| 1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Will the proposed action result in a change in the use or intensity of use of land? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Will the proposed action impair the character or quality of the existing community? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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| | No, or small impact may occur | Moderate to large impact may occur |
|---|-------------------------------------|------------------------------------|
| 10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Will the proposed action create a hazard to environmental resources or human health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

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 VILLAGE OF FREEPORT, NY

| | |
|---|--|
| <input type="checkbox"/> | Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required. |
| <input checked="" type="checkbox"/> | Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts. |
| One Sportsman LLC | 4/18/25 |
| Name of Lead Agency | Date |
| Ralph E Lunati | President |
| Print or Type Name of Responsible Officer in Lead Agency | Title of Responsible Officer |
|  | Signature of Preparer (if different from Responsible Officer) |
| Signature of Responsible Officer in Lead Agency | |

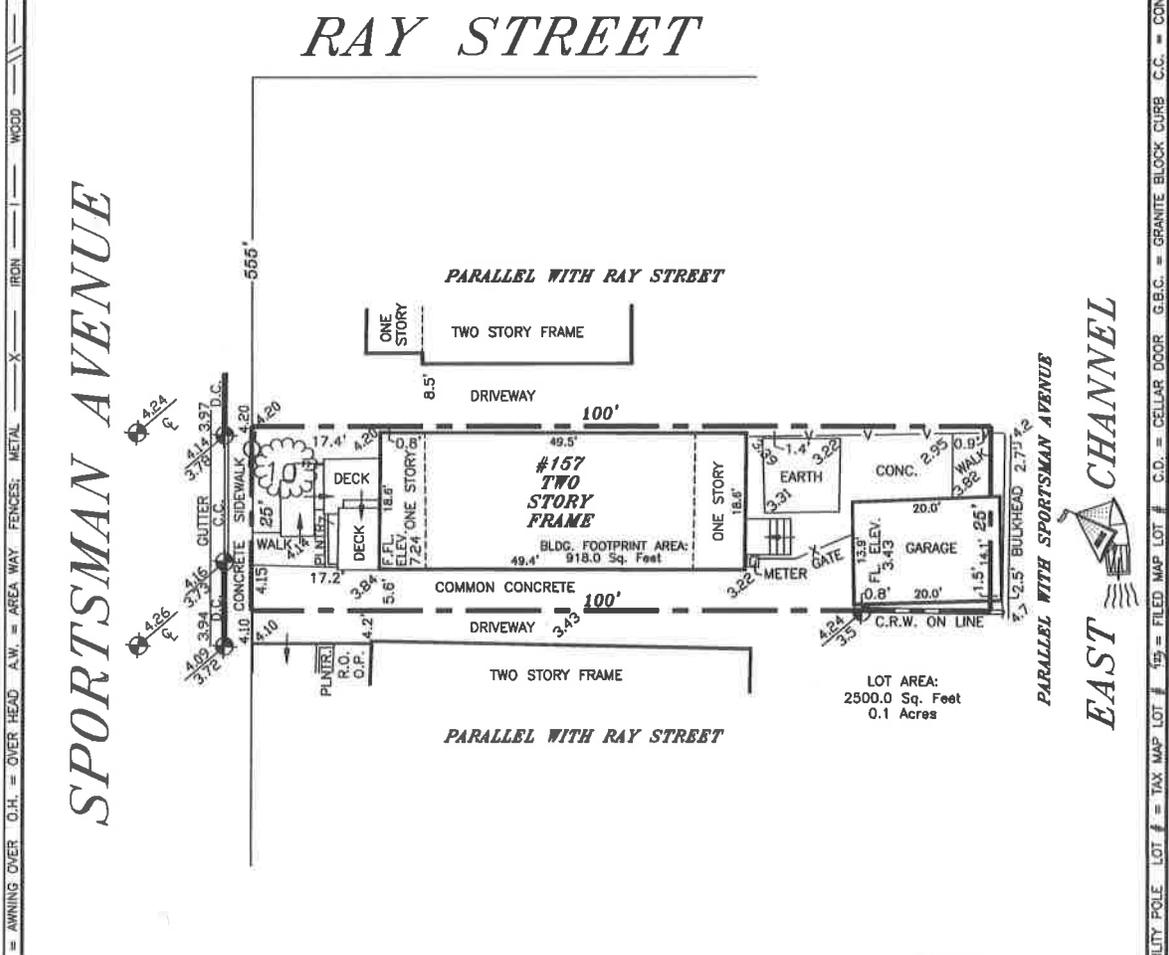
ARCHITECTURAL SURVEY

10 5 0 10 20
RECEIVED!
SCALE 1"=20'
2025 JUL 11 P 2:35

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

MAP GENERAL DIRECTION MAGNETIC

VINTYL
POST & RAIL
WOOD
IRON
METAL
FENCES
AREA WAY
OVER HEAD
AWNING OVER
PROPERTY LINE



ELEVATIONS SHOWN ON THIS PLAT HAVE BEEN DEVELOPED USING A NETWORKED GPS SYSTEM AND ARE CONSISTENT WITH NAVD 1988

I HEREBY CERTIFY THAT THERE ARE NO VISIBLE STREAMS OR WATER COURSES ON OR OVER THIS PROPERTY

CALL UFPO TWO WORKING DAYS BEFORE DIGGING! 1-800-962-7962 OR 811
NON-MEMBERS MUST BE CONTACTED SEPARATELY.

EASEMENTS, IF ANY, NOT SHOWN.

UNLESS OTHERWISE NOTED, PHYSICAL MONUMENTS HAVE NOT BEEN SET.
This survey is intended to be used for Building Department purposes only and is subject to whatever a more complete title search may reveal. Use of this survey for any other purpose may result in problems for which this surveyor will not be liable.
"Unauthorized alteration to a survey map bearing a licensed land surveyor's seal is a violation of section 7209, sub-division 2, of the New York State Education Law"
"Only copies from the original of this survey marked with an original of the land surveyor's embossed seal shall be considered to be valid true copies."
"Certifications indicated herein signify that this survey was prepared in accordance with the existing Code of Practice for Land Surveys adopted by the New York State Association of Professional Land Surveyors. Said certifications shall run only to the person for whom the survey was prepared, and on his behalf to the government agency and lending institution listed herein, and to the assignees of the lending institution. Certifications are not transferable to additional institutions or subsequent owners."
This map may not be used in connection with a "Survey Affidavit" or similar document, statement, or mechanism to obtain title insurance for any subsequent or future grantees.

LEGEND

| | |
|--------------------|--|
| GAS METER | |
| DROP CURB | |
| TREE WITH DIAMETER | |
| EXISTING GRADE | |

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BARRY M. FAHRER L.S.
ALL RIGHTS RESERVED

Unauthorized reproduction of this map is a violation of the copyright law. COPIES WITH OUT A RED SIGNATURE & EMBOSSED SEAL ARE COUNTERFEIT. This survey is intended to be used for Building Department purposes only and is subject to whatever a more complete title search may reveal. Use of this survey for any other purpose may result in problems for which this surveyor will not be liable.

"Unauthorized alteration to a survey map bearing a licensed land surveyor's seal is a violation of section 7209, sub-division 2, of the New York State Education Law"

"Only copies from the original of this survey marked with an original of the land surveyor's embossed seal shall be considered to be valid true copies."

"Certifications indicated herein signify that this survey was prepared in accordance with the existing Code of Practice for Land Surveys adopted by the New York State Association of Professional Land Surveyors. Said certifications shall run only to the person for whom the survey was prepared, and on his behalf to the government agency and lending institution listed herein, and to the assignees of the lending institution. Certifications are not transferable to additional institutions or subsequent owners."

This map may not be used in connection with a "Survey Affidavit" or similar document, statement, or mechanism to obtain title insurance for any subsequent or future grantees.

L.S.T. = LANDSCAPE TIE (G) = GATE R.O. = ROOF OVER W.O.F. = WIRES ON FACE F.E. = FIRE ESCAPE 157SPORTSMANAVE

CERTIFIED TO:
MARIA CIPOLLA

BARRY M. FAHRER
NEW YORK STATE
LICENSED LAND SURVEYOR
No. 49851

BARRY M. FAHRER L.S. P.C.
206 CHURCH STREET
FREEPORT NEW YORK 11520
(516) 623-2069
FAX (516) 623-0628

STATE OF NEW YORK

JOB No. 20150792
TITLE No.

SECTION No. 62
TAX BLOCK No. 89

LOT No. 4

DATE SURVEYED 10/29/2015
FREEPORT
COUNTY OF: NASSAU

DEPARTMENT OF BUILDINGS

OF THE VILLAGE OF FREEPORT, N.Y.

APPLICATION NO. 20254197
 Filing Date 4/22/25

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Application for Erection of Buildings or Alterations

2025 JUL 11 11:52:35

IMPORTANT - Applicant to complete all items in sections: I, II, III, IV, V

| | |
|--|---|
| I. LOCATION OF BUILDING | AT LOCATION: <u>157 Sportsman Ave</u> ZONING DISTRICT: <u>Res A</u> |
| | (No.) (Street) |
| | BETWEEN <u>Sportsman Ave</u> AND <u>Arthur St</u> |
| | (Cross Street) (Cross Street) |
| SECTION <u>62</u> BLOCK <u>89</u> LOT <u>4</u> APPROX. LOT SIZE <u>925</u> X <u>100</u> LOT AREA <u>2500</u> | |

II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D.

| | | | |
|---|--|--|--|
| A. TYPE OF IMPROVEMENT 1 <input type="checkbox"/> New building 2 <input checked="" type="checkbox"/> Addition-Alteration (If residential, enter number of new housing units added. If none-state none) 3 <input type="checkbox"/> Swimming Pool 4 <input type="checkbox"/> Repair (replacement) 5 <input type="checkbox"/> Bulkhead (New, Repair) 6 <input type="checkbox"/> Fence 7 <input type="checkbox"/> Moving (Relocation) | | B. PROPOSED OR EXISTING USE RESIDENTIAL 11 <input checked="" type="checkbox"/> One Family 12 <input type="checkbox"/> Two families 13 <input type="checkbox"/> Apartment - Enter No. of Units _____ 14 <input type="checkbox"/> Transient hotel, motel, or dormitory - Enter No. of Units _____ 15 <input type="checkbox"/> Garage or Accessory Structure 16 <input type="checkbox"/> Other - Specify _____ NON-RESIDENTIAL - Complete Part "E" 17 <input type="checkbox"/> Industrial 18 <input type="checkbox"/> Office, bank, professional 19 <input type="checkbox"/> Store, mercantile 20 <input type="checkbox"/> Church, other religious 21 <input type="checkbox"/> Hospital, institutional 22 <input type="checkbox"/> Other - Specify _____ | |
| C. COST 10. TOTAL COST OF IMPROVEMENT \$ <u>195,000.00</u> | | D. DESCRIPTION OF PROJECT <u>House Raising / Renovation</u> | |

III. IDENTIFICATION - To be completed by all applicants

| | NAME | MAILING ADDRESS - Number, street, city and state, Zip | TEL. NO. |
|--------------------------|---------------------------------|---|--------------|
| 1. Owner or Lessee | One Sportsman LLC | 160 W Industry Ct Suite E Deer Park, NY 11729 | 631-569-5302 |
| 2. Contractor | EM Contracting Corp | 156 E Milton St Freeport, NY 11520 | 516-233-5434 |
| 3. Architect or Engineer | Tiderunner Engineering & Design | 7 Ridgewood St Bay Shore, NY 11706 | 631-839-4824 |

IV. OWNER - CONTRACTOR STATEMENT

Building permit is issued subject to the provisions of Section 67 of the Workmen's Compensation Law.
 Workmen's Compensation Certificate No. 962612 Company NYSIF Exp. Date 07/23/25

VIDHYA T. BAICHOO
 NOTARY PUBLIC STATE OF NEW YORK
 SUFFOLK COUNTY
 LIC. #01BA6321679
 COMM. EXP. 03/23/2027

Contractor/Owner: EM Contracting Corp (Print)
 Address: 156 East Milton St Freeport, NY 11520
 Phone: 516-233-5434

State of New York
 County of Nassau
Ralph Luvato being duly sworn, says that _____ (Print) (He or She) is the contractor or owner of the above mentioned building. That the terms of the above application and the estimated cost of said building or alteration, is correct to the best of _____ (He or Her) knowledge and belief and agrees to conform to all applicable laws of this jurisdiction.
 Sworn to before me this 18th day of April, 2025
[Signature]
 Notary Public, County, N.Y.

V. FLOOD ZONE

IS PROJECT LOCATED WITHIN A DESIGNATED FLOOD HAZARD ZONE?
 YES NO
 IF YES, WHICH ZONE? AE

IS PROJECT TO REPAIR FLOOD DAMAGE?
 YES NO

PROJECT DESCRIPTION

| | |
|-------------------------------|--------------------|
| Total/First Floor Square Feet | <u>880</u> |
| Upper Floor Square Feet | <u>880</u> |
| # of Fixtures | <u>8</u> |
| # of Floors | <u>2</u> |
| Occup. Type | <u>Residential</u> |

VI. VALIDATION (Official Use Only)

| | |
|---|---|
| Building Permit Number _____ Building Permits Issued _____ Building Permit Fee \$ _____ | Approved by: _____ Superintendent of Buildings |
|---|---|

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CLERK'S OFFICE
VILLAGE OF FREEPORT, NY



FRONT OF THE HOUSE

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CLERK'S OFFICE
CITY OF FREEPORT, NY

PICAT SIDE
~~BACK~~ OF THE HOUSE

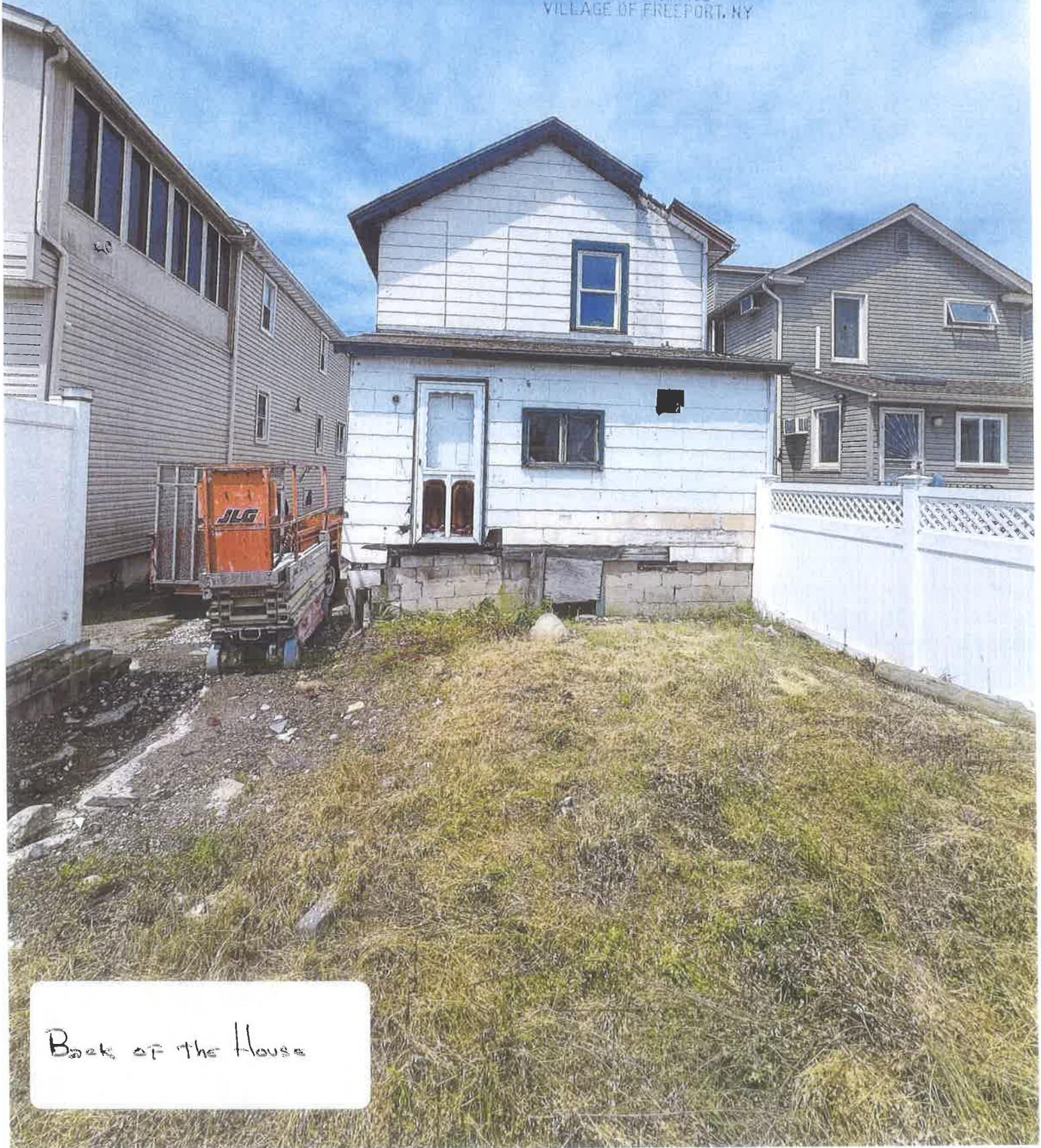


Left Side of the House

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CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

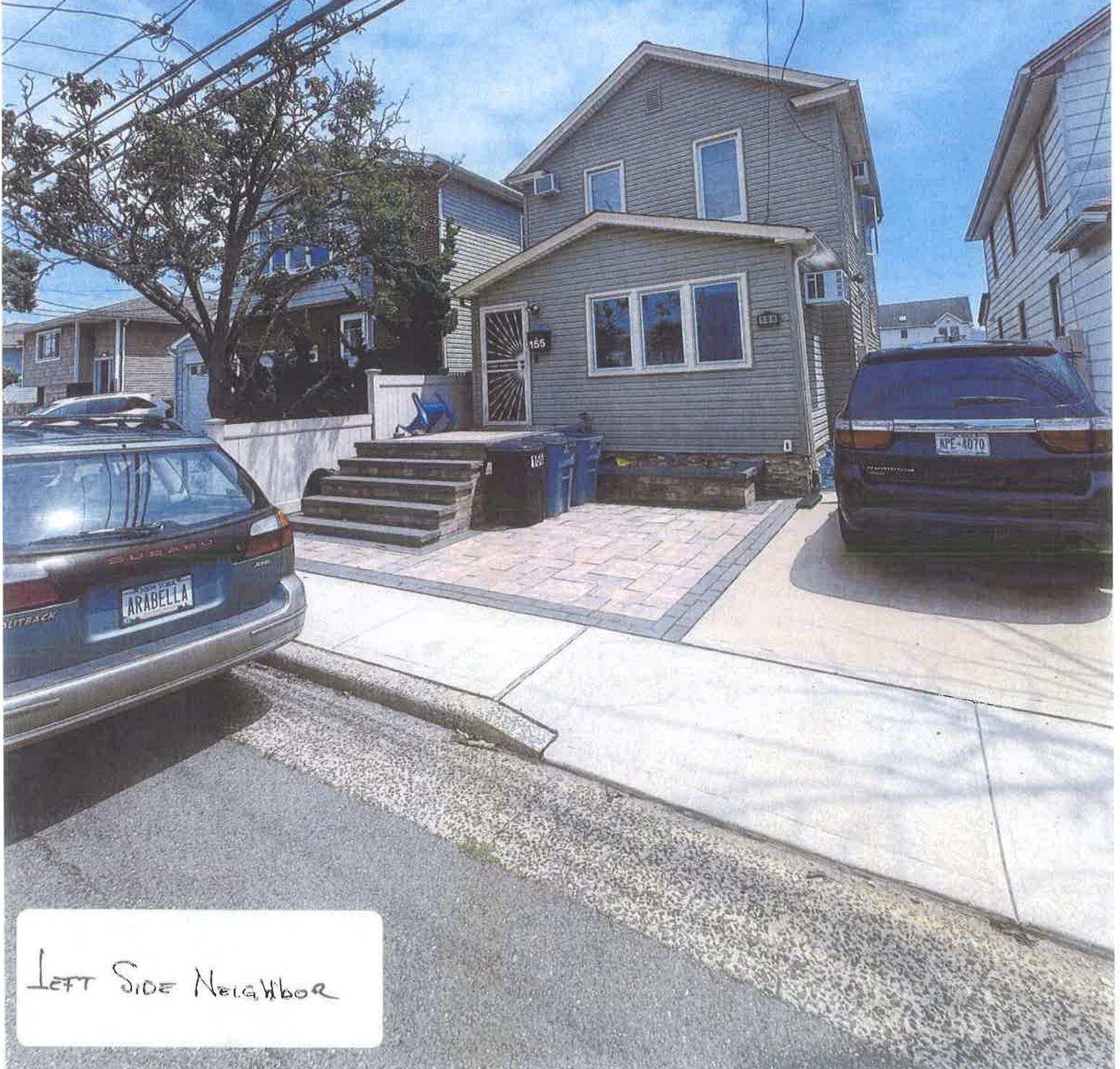


Back of the House

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2025 JUL 11 10 2: 37

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VILLAGE OF FREEPORT, NY



LEFT SIDE Neighbor

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CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

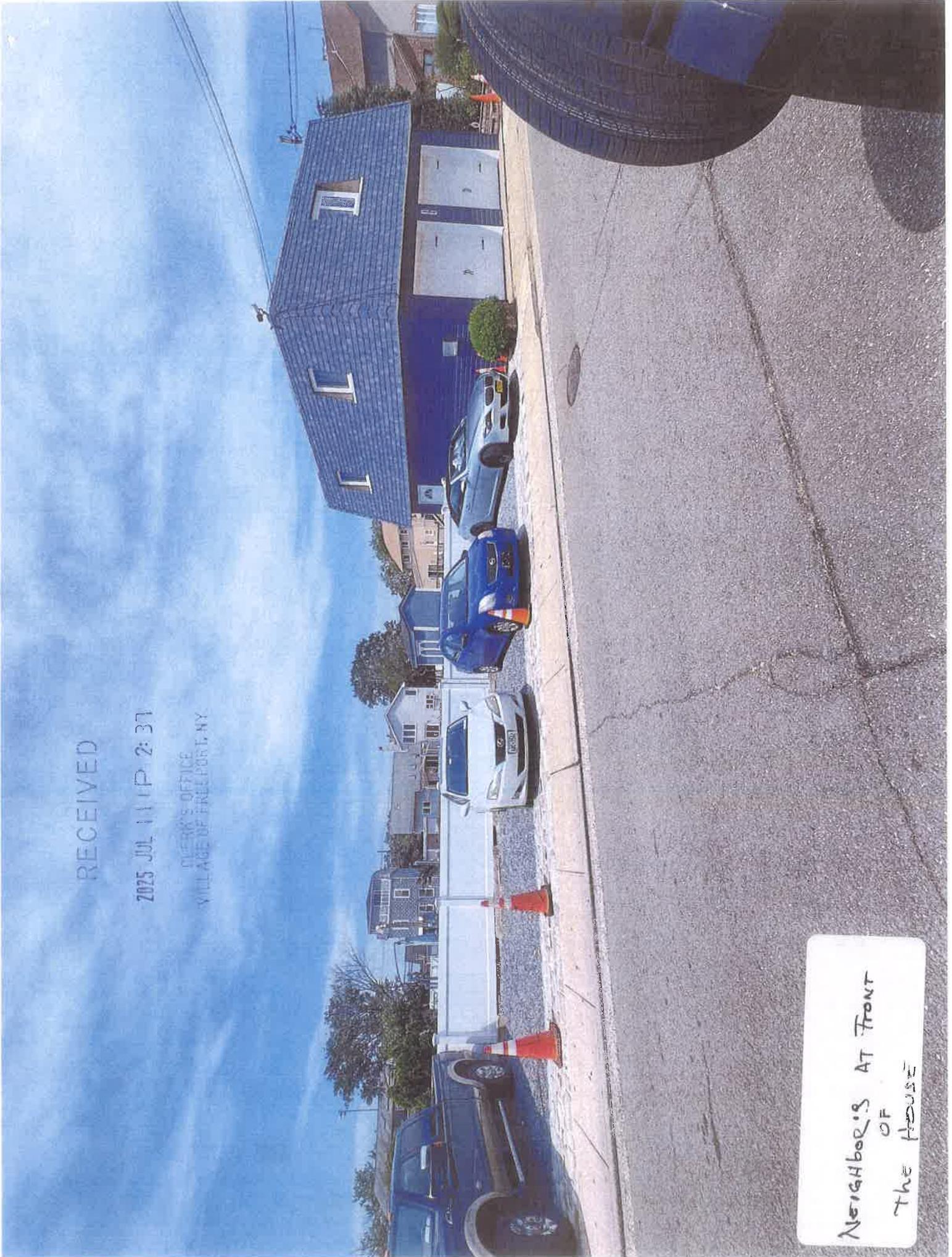


Right Side Neighbor

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2025 JUL 11 (P) 2:37

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY



NEIGHBOR'S AT FRONT
OF
THE HOUSE

One Sportsman LLC
160 W Industry Ct.
Deer Park, NY 11729
Phone: (631) 569-5302
Email: rlunati@lunatigroup.com

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2025 JUL 11 P 2: 37

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

Freeport, New York
July 3rd, 2025

To:

Village of Freeport
Building Department

Subject: Material and Color Specifications for Residential Project

Address: 157 Sportsman Ave, Freeport, NY 11520

To Whom It May Concern:

I am submitting this letter to provide a detailed list of all exterior materials, colors, and manufacturers to be used for the renovation/construction project at the above-referenced property. The specifications are as follows:

1. Windows

- *Manufacturer:* Marvin Windows and Doors
- *Color:* Black

2. Siding

- *Manufacturer:* CertainTeed Monogram
- *Color:* White and Hunter Green

3. Roof

- *Manufacturer:* GAF Timberline HDZ
- *Color:* Black

4. Railings

- *Front:* Metal railings – Black
- *Rear:* Wood railings – Black (painted or stained)

5. Deck

- Rear deck will include a sliding door for access

RECEIVED

2025 JUL 11 10 23 37

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

6. Exterior Doors

- *Manufacturer:* Marvin Windows and Doors
- *Color:* Dark Gray

7. Garage Door

- *Manufacturer:* Clopay
- *Style:* Modern design with 3 horizontal glass panels
- *Color:* Dark Gray

Please consider this letter as a formal declaration of the materials and finishes to be used. Should you require any additional information or documentation, I am available at your convenience.

Sincerely,

Ralph Lunati

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

OMB Control No. 1660-0008
Expiration Date: 06/30/2026

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

| SECTION A – PROPERTY INFORMATION | | FOR INSURANCE COMPANY USE |
|---|----------------------|---|
| A1. Building Owner's Name: <u>ONE SPORTSMAN LLC</u> | | Policy Number: _____ |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>157 SPORTSMAN AVENUE</u> | | Company NAIC Number: _____ |
| City: <u>FREEPORT</u> | State: <u>NY</u> | ZIP Code: <u>11520</u> |
| A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Section: 62 Block: 89 Lot:4</u> | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u> | | |
| A5. Latitude/Longitude: Lat. <u>40.643065</u> Long. <u>-73.73581156</u> Horiz. Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84 | | |
| A6. Attach at least two and when possible four clear color photographs (one for each side) of the building (see Form pages 7 and 8). | | |
| A7. Building Diagram Number: <u>2A</u> | | |
| A8. For a building with a crawlspace or enclosure(s): | | |
| a) Square footage of crawlspace or enclosure(s): <u>876</u> sq. ft. | | |
| b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A | | |
| c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u> | | |
| d) Total net open area of non-engineered flood openings in A8.c: <u>0</u> sq. in. | | |
| e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>0</u> sq. ft. | | |
| f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>0</u> sq. ft. | | |
| A9. For a building with an attached garage: | | |
| a) Square footage of attached garage: <u>N/A</u> sq. ft. | | |
| b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A | | |
| c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u> | | |
| d) Total net open area of non-engineered flood openings in A9.c: <u>0</u> sq. in. | | |
| e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>0</u> sq. ft. | | |
| f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>0</u> sq. ft. | | |
| SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | |
| B1.a. NFIP Community Name: <u>VILLAGE OF FREEPORT</u> | | B1.b. NFIP Community Identification Number: <u>360464</u> |
| B2. County Name: <u>Nassau County</u> | B3. State: <u>NY</u> | B4. Map/Panel No.: <u>36059C0239</u> |
| B5. Suffix: <u>G</u> | | |
| B6. FIRM Index Date: <u>09/11/2009</u> | | B7. FIRM Panel Effective/Revised Date: <u>09/11/2009</u> |
| B8. Flood Zone(s): <u>AE</u> | | |
| B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>8</u> | | |
| B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____ | | |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA | | |
| B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

| | |
|---|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>157 SPORTSMAN AVENUE</u> | FOR INSURANCE COMPANY USE |
| City: <u>FREEPORT</u> State: <u>NY</u> ZIP Code: <u>11520</u> | Policy Number: _____ Company NAIC Number: _____ |

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: CARLSON GPS BRX6 Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.

- NGVD 1929 NAVD 1988 Other: _____

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? Yes No
If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

- | | | | |
|---|-------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor): | <u>1.70</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions): | <u>7.20</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions): | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab): | <u>N/A</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): | <u>N/A</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished | <u>3.22</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished | <u>4.20</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: | <u>N/A</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Check here if attachments and describe in the Comments area.

Certifier's Name: FRANK GALLUZZO License Number: 050088

Title: PRESIDENT

Company Name: EMPIRE STATE LAND SURVEYOR, P.C.

Address: 1005 GLEN COVE AVENUE

City: GLEN HEAD State: NY ZIP Code: 11545

Telephone: (516) 240-6901 Ext.: _____ Email: empiresurveys@aol.com

Signature: _____ Date: 01/16/2025



Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):
THERE ARE NO MECHANICAL UNITS. BUILDING IS BEING REMODELED.

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

| | |
|---|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 157 SPORTSMAN AVENUE | FOR INSURANCE COMPANY USE |
| City: FREEPORT State: NY ZIP Code: 11520 | Policy Number: _____ Company NAIC Number: _____ |

SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

- a) Top of bottom floor (including basement, crawlspace, or enclosure) is: _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is: _____ feet meters above or below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (C2.b in applicable Building Diagram) of the building is: _____ feet meters above or below the HAG.

E3. Attached garage (top of slab) is: _____ feet meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is: _____ feet meters above or below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ Email: _____

Signature: _____ Date: _____

Comments: _____

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

| | |
|---|----------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 157 SPORTSMAN AVENUE | FOR INSURANCE COMPANY USE |
| City: FREEPORT State: NY ZIP Code: 11520 | Policy Number: _____ |
| | Company NAIC Number: _____ |

SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b. A local official completed Section H for insurance purposes.
- G3. In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: _____ G6. Date Permit Issued: _____
- G7. Date Certificate of Compliance/Occupancy Issued: _____
- G8. This permit has been issued for: New Construction Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum: _____
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: _____ feet meters Datum: _____
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: _____ feet meters Datum: _____
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: _____ feet meters Datum: _____
- G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: _____ Title: _____

NFIP Community Name: _____

Telephone: _____ Ext.: _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

| | |
|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 157 SPORTSMAN AVENUE | FOR INSURANCE COMPANY USE |
| City: FREEPORT State: NY ZIP Code: 11520 | Policy Number: _____ Company NAIC Number: _____ |

SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–8. Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: _____ 3.98 feet meters above the LAG

H2. Is **all** Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ Email: _____

Signature: _____ Date: _____

Comments: _____

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
157 SPORTSMAN AVENUE

City: FREEPORT State: NY ZIP Code: 11520

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: FRONT VIEW - 01/16/2025

Clear Photo One

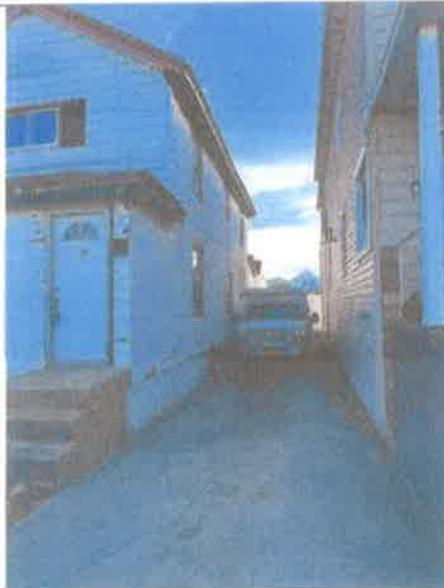


Photo Two

Photo Two Caption: RIGHTSIDE VIEW - 01/16/2025

Clear Photo Two

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11
BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:
157 SPORTSMAN AVENUE

City: **FREEPORT** State: **NY** ZIP Code: **11520**

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

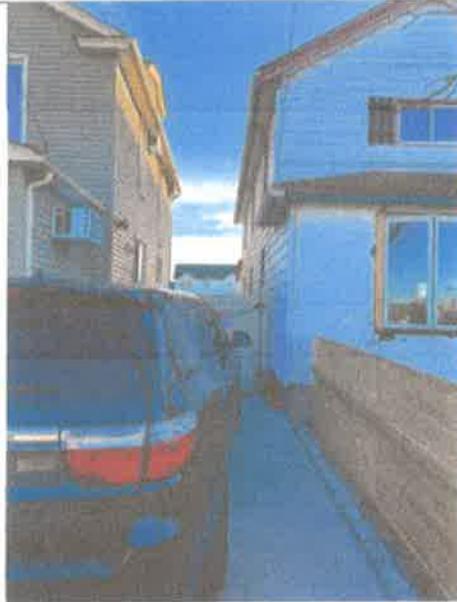


Photo Three

Photo Three Caption: **LEFT VIEW - 01/16/2025**

Clear Photo Three



Photo Four

Photo Four Caption: **REAR VIEW - 01/16/2025**

Clear Photo Four

ABBREVIATIONS

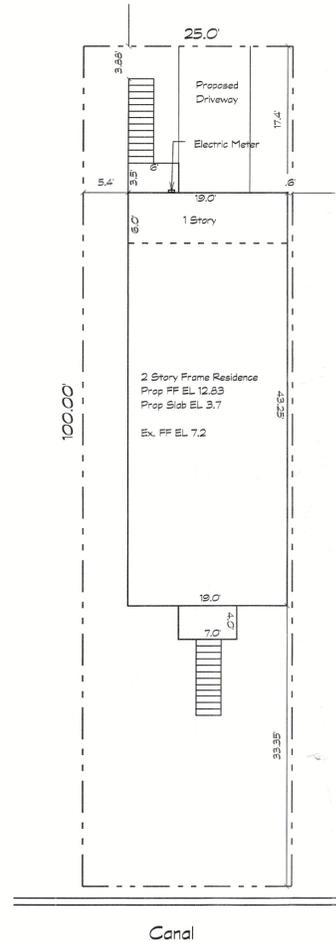
| | |
|--|-----------------------------|
| ACQ ALKALINE COPPER QUATERNARY | LVL LAMINATED VENEER LUMBER |
| ACT ACOUSTICAL TILE | MAX MAXIMUM |
| AL ALUMINUM | MIN MINIMUM |
| ALT ALTERNATE | MRB MARBLE |
| AFF ABOVE FIRST FLOOR | MS MARBLE SADDLE |
| ASF ABOVE SUBFLOOR | MTL METAL |
| A.S. ALUMINUM SADDLE | NA NOT APPLICABLE |
| A.P.B. ANTHONY POWER BEAM | NIC NOT IN CONTRACT |
| B.C. BRICK COURSES | NGM NOMINAL |
| BO BOARD | NR NOT REQUIRED |
| BOT BOTTOM | NTS NOT TO SCALE |
| BLDG BUILDING | OC ON CENTER |
| CBB CEMENT BACKER BOARD | OCC OCCUPANT(S) |
| CL CLOSET | OH OVERHANG |
| CLG CEILING | PART. PARTITION |
| CLR CLEAR(ANCE) | PC POURED CONCRETE |
| COL COLUMN | PT POINT |
| CONC CONCRETE | PKT ROCKET |
| CMU CONCRETE MASONRY UNIT | RAD RADIUS |
| CT COLLAR TIE | REQ. REQUIRED |
| CJ CEILING JOIST | REV REVISION(S) |
| CANT CANTILEVER | RM ROOM |
| CMD CARBON MONOXIDE DETECTOR | RR ROOF RAFTER |
| DIA DIAMETER | R/R REMOVE AND REPLACE |
| DM DIMENSION | SEC SECTION |
| DR DOOR | SF SQUARE FEET |
| DTL DETAIL | SIM SIMILAR |
| DWG DRAWING | SQ SQUARE |
| DN DOWN | STL STEEL |
| EA EACH | SD SMOKE DETECTOR |
| EL ELEVATION | STD STANDARD |
| EQ EQUAL | TC TOP OF CURB |
| EX EXISTING | TEL TELEPHONE |
| EXH EXHAUST | THK THICKNESS |
| EXT EXTERIOR | TOS TOP OF SLAB |
| EF EXHAUST FAN | TX TOILET EXHAUST |
| EW EGRESS WINDOW | TXF TOILET EXHAUST FAN |
| FC FIRE CODE | TYP TYPICAL |
| FD FLOOR DRAIN | TEM TEMPORARY |
| FN FINISHED | TEMP TEMPORARY |
| FLR FLOORING | UNLESS OTHERWISE NOTED |
| FRSC FIRE PROOF SELF CLOSING | VIF VERIFY IN FIELD |
| FT FOOT (FEET) | WC WATER CLOSET |
| FJ FLOOR JOIST | WR WATER RESISTANT |
| GA GAUGE | |
| GALV GALVANIZED | |
| GFI GROUND FAULT INTERRUPT | |
| GL GLASS | |
| GWB GYPSUM WALL BOARD | |
| HC HOLLOW CORE | |
| HDW HARDWARE | |
| HM HOLLOW METAL | |
| HOR HORIZONTAL | |
| HP HIGH POINT | |
| HT HEIGHT | |
| HVAC HEATING/VENTILATION/AIR CONDITION | |
| IN INCH | |
| INT INTERIOR | |
| INV INVERT | |
| JT JOINT | |
| KIT KITCHEN | |
| LAV LAVATORY | |

HOUSE RAISING

157 SPORTSMAN DR

FREEPORT, NY

Sportsman Drive



| | |
|---------------------------|-------------|
| Additional Construction | Residence A |
| Zoning | 2800 SF |
| Total Area | |
| 2nd Floor Additions | |
| Front Addition | 113 SF |
| Rear Addition | 50 SF |
| Total New 2nd Fl | 163 SF |
| 2nd Floor Deck | 83 SF |
| Total 2nd Floor Additions | 246 SF |
| Existing Area | |
| 1st Floor | 990 SF |
| 2nd Floor | 694 SF |
| Total Ex. Floor Area | 1684 SF |
| Total Prop Floor Area | 1930 SF |

Legend

| | |
|------------------------------|--|
| Existing Walls to Remain | |
| Existing Walls to be Removed | |
| New Walls and Partitions | |
| Insulation | |
| Door | |
| Window | |
| Structural Beam | |
| Outlet | |
| GFI Outlet | |
| Switch | |
| Ceiling Fixture | |
| Exterior Fixture | |
| Smoke Detector | |
| CO Detector | |
| Vent | |
| Vent/Light | |
| Ceiling Fan | |

BUILDING DEPARTMENT DATA:

Classification/Floor Area

| FLOOR AREA | Floor Level | Existing | | | Proposal | | | Total | | |
|-----------------|-------------------|-------------------|-----------|-----------|----------|-------------|------------|-------|---|---|
| | | Cellar (Finished) | 1st Floor | 2nd Floor | Garage | Front Porch | Rear Porch | Decks | | |
| Finished Living | Cellar (Finished) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 1st Floor | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 2nd Floor | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Misc Area | Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Garage | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Front Porch | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Rear Porch | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

CLASSIFICATION

DESIGN: R301.2.1.1 (2020 Residential Code of New York State)

Design Criteria Construction in regions where the basic wind speeds exceed from Figure R301.2(4) equal or exceed 130 miles per hour shall be designed in accordance with one of the following:

Plans have been designed in accordance with: 2020 New York State Residential Code

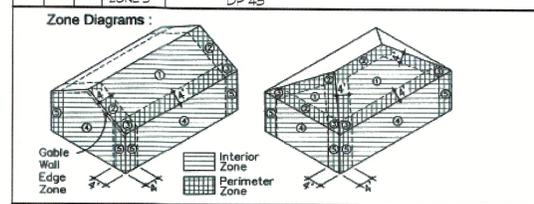
CLIMATIC & GEOGRAPHIC DESIGN CRITERIA: (Table R301.2(1))

| | |
|-------------------------|---------------------------------------|
| Wind Exposure Category: | B |
| Ground Snow Load: | 20 PSF |
| Wind Speed: | 130 mph 3 sec Gust (110 fastest mile) |
| Special Wind Region: | NO |
| Windborne Debris Zone: | NO |
| Seismic Design Category | C |

| | |
|----------------------------------|-----------------------|
| Weathering | Severe |
| Frost Line Depth: | 36 inches |
| Termite Infestation: | Moderate to Heavy |
| Decay Probability: | Slight to Moderate |
| Winter Design Temperature: | 15 |
| Ice Shield Underlayment Required | Valleys and Perimeter |
| Flood Hazard | Exempt |
| Air Freezing Index | 599 |
| Mean Annual Temp | 51 |

MIN. DESIGN PRESSURE (DP) RATING:

| Windows & Doors | Zone | Rating |
|------------------|--------|--------|
| 10'-0" to 12'-0" | ZONE 4 | DP 25 |
| | ZONE 5 | DP 30 |
| | ZONE 1 | DP 25 |
| 12'-0" to 14'-0" | ZONE 2 | DP 30 |
| | ZONE 3 | DP 30 |
| | ZONE 1 | DP 20 |
| 14'-0" to 16'-0" | ZONE 2 | DP 45 |
| | ZONE 3 | DP 45 |
| | ZONE 1 | DP 45 |



Minimum Uniformly Distributed Live Loads: Table R301.5

| USE | LIVE LOAD | DEAD LOAD |
|-------------------------------------|-----------|-----------|
| Decks & Exterior Balconies | 40 psf | 10 psf |
| Passenger Vehicle Garages | 40 psf | 10 psf |
| ATTICS Habitable or w/ Fixed Stairs | 30 psf | 10 psf |
| ATTICS without Storage | 10 psf | 10 psf |
| ATTICS with Storage | 20 psf | 10 psf |
| ROOMS other than Sleeping Rooms | 40 psf | 10 psf |
| Sleeping Rooms | 30 psf | 10 psf |
| Stairs | 40 psf | 10 psf |
| Guards and Handrails | 200 psf | 10 psf |
| Guards in-fill components | 50 psf | 10 psf |
| Fire escapes | 40 psf | 10 psf |

ALLOWABLE DEFLECTION: Table R301.7

| Structural Member | Allowable Deflection |
|--|----------------------|
| Rafters having slopes greater than 3/12 with no finished ceiling attached to rafters | L/180 |
| Interior Walls and Partitions | H/180 |
| Floors | L/360 |
| Ceilings w/ brittle finishes (including plaster and stucco) | H/360 |
| Ceilings w/ flexible finishes (including gypsum board) | L/240 |
| All other Structural Members | L/240 |
| Exterior Walls w/ plaster or stucco | L/360 |
| Exterior Walls - Wind Loads(a) w/ Brittle Finishes | L/240 |
| Exterior Walls - Wind Loads(a) w/ Flexible Finishes | L/120 |
| Lintels supporting masonry veneer walls | L/600 |

a. The Wind Load shall be permitted to be taken as 0.7 times the Component and Cladding loads for the purpose of the determining deflection limits herein

THREEMEN ENGINEERING & DESIGN
 7 RIDGEWOOD ST.
 BAY SHORE, NY 11706
 (631) 839-4824

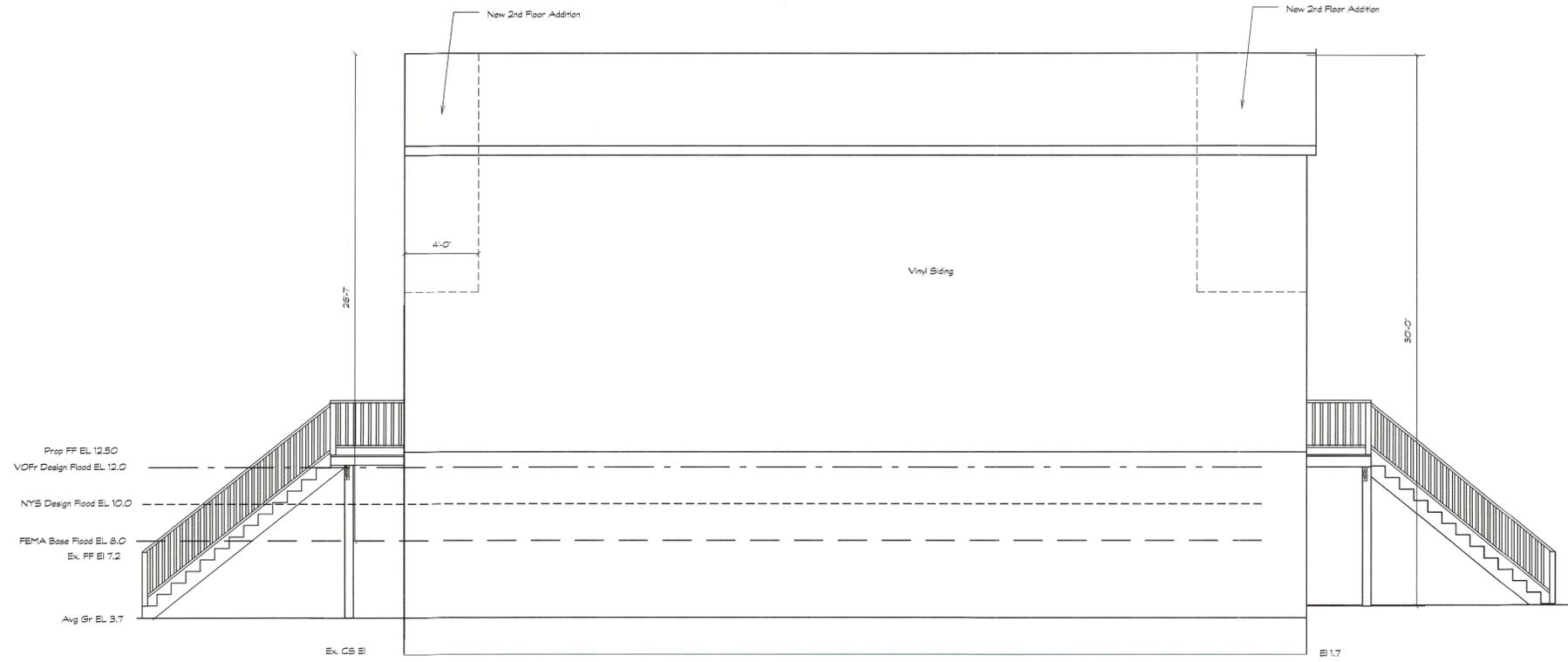
CONSULTANTS:
 HOUSE RAISING
 LUNATI RESIDENCE
 157 SPORTSMAN DR
 VILLAGE OF FREEPORT

DESCRIPTION:
 157 Sportsman Plan Rev. 6/16/25
 11 P. 2-12
 2025

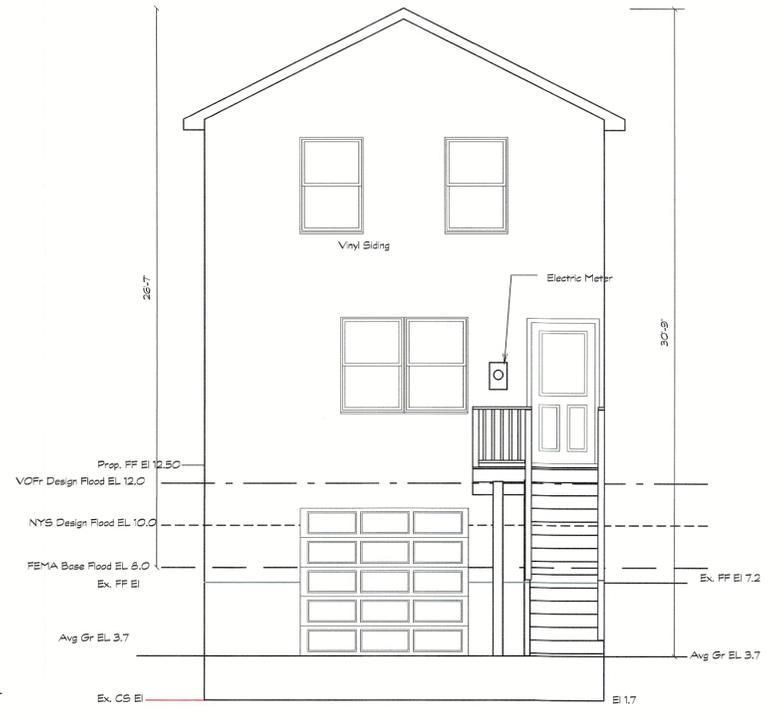
REVISIONS:
 FILE NO.: 25-16
 CAD DWG FILE: 157 Sportsman
 DWG DATE: 3/25/25
 DRAWN BY: LGS
 CHK'D BY: LGS



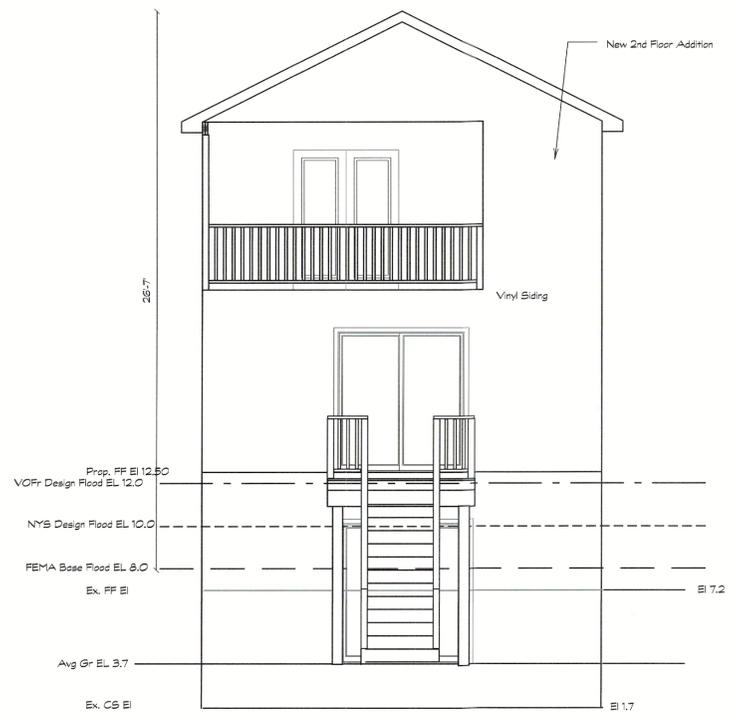
DWG. NAME:
 COVER SHEET
DWG. NO.:
 C-1
 PAGE 1 OF 5



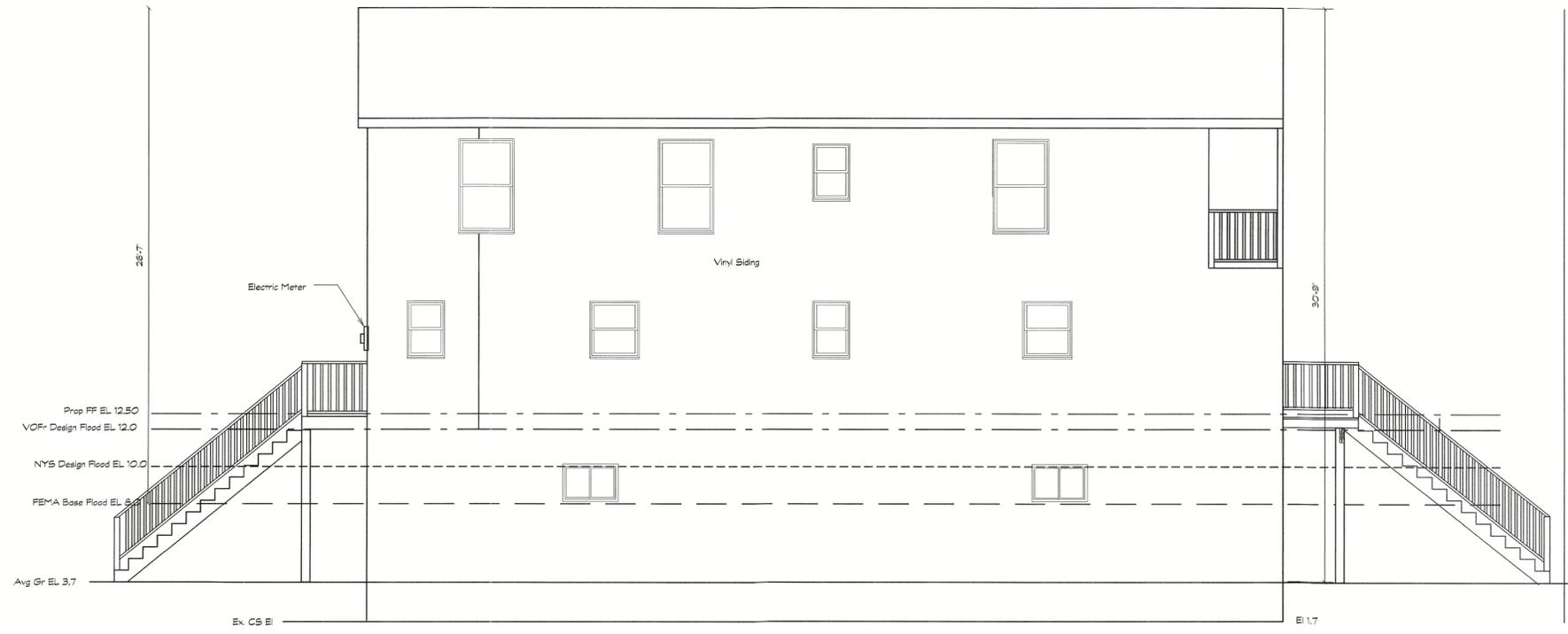
North Elevation



West Elevation



East Elevation



South Elevation

CONSULTANTS:

DESCRIPTION:

 HOUSE RAISING

 LUNATI RESIDENCE

 157 SPORTSMAN DR

 VILLAGE OF FREEPORT

REVISIONS:

 FILE NO.: 25-16

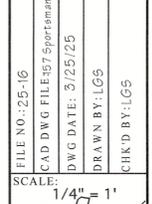
 C.A.D. DWG FILE: 157 Sportman Plan Rev. 6/16/25

 DWG DATE: 3/25/25

 DRAWN BY: LGS

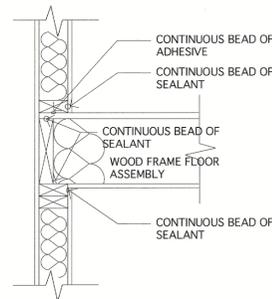
 CHK'D BY: LGS

SCALE: 1/4" = 1'

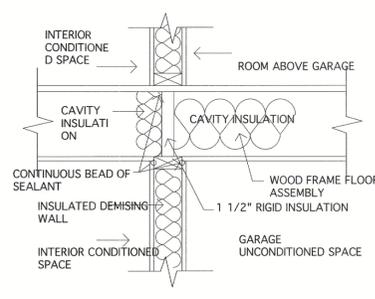


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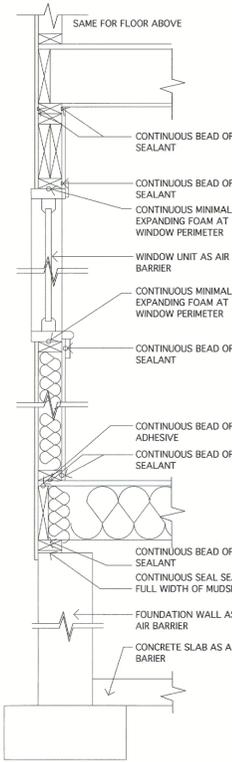
 ELEVATIONS



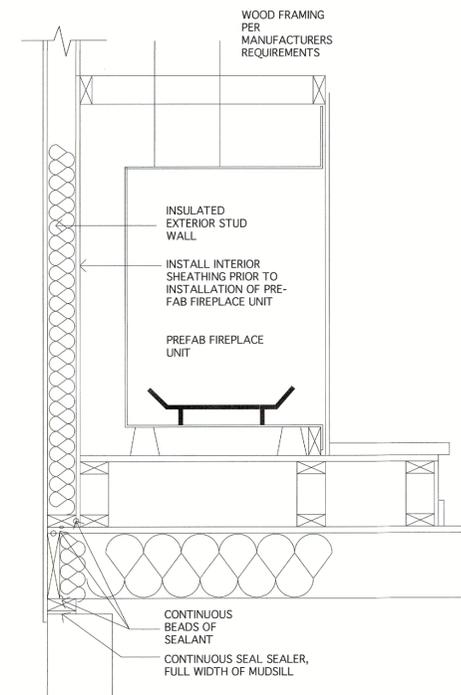
AIR SEALING @ UPPER FLOOR RIM JOIST



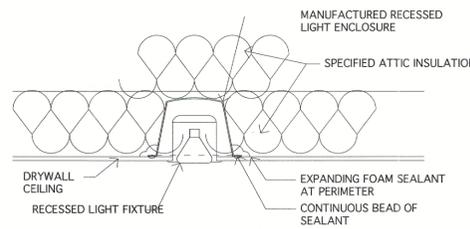
AIR SEALING @ UPPER FLOOR RIM JOIST



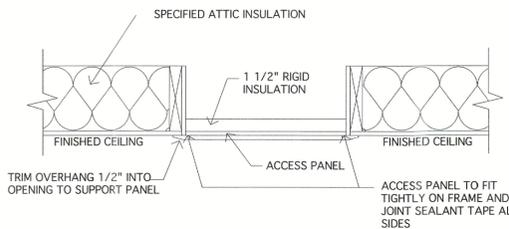
AIR SEALING @ EXTERIOR WALL



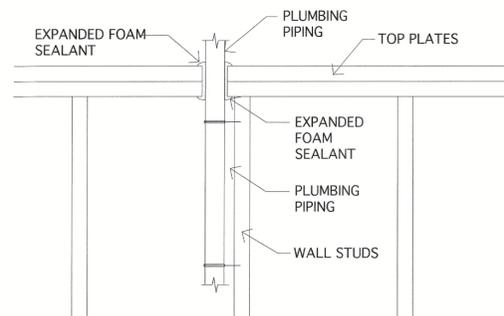
AIR SEALING @ PRE-FAB FIREPLACE PLATFORM



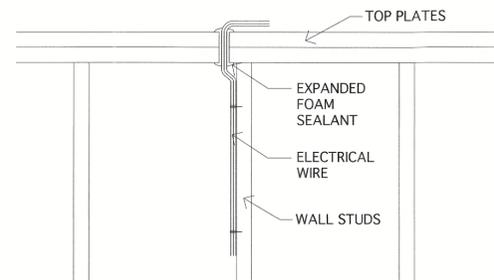
AIR SEALING @ ATTIC RECESSED LIGHTING



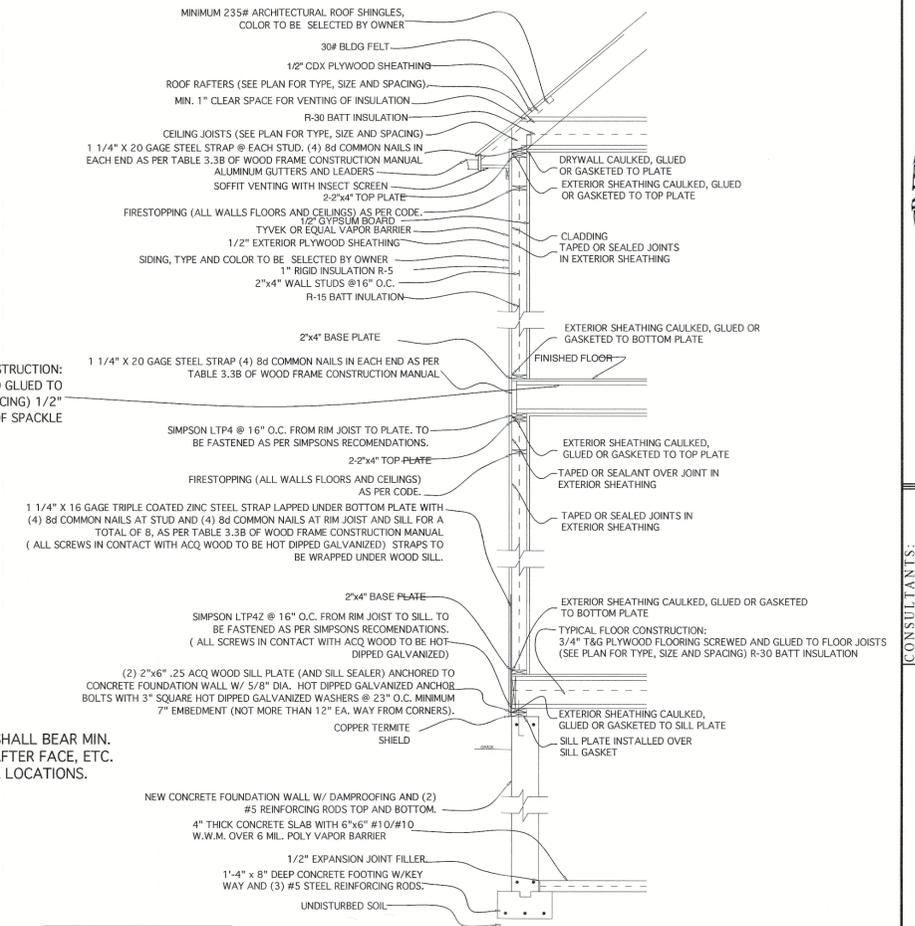
AIR SEALING @ ATTIC HATCH



AIR SEALING @ TOP PLATE PLUMBING PENETRATION

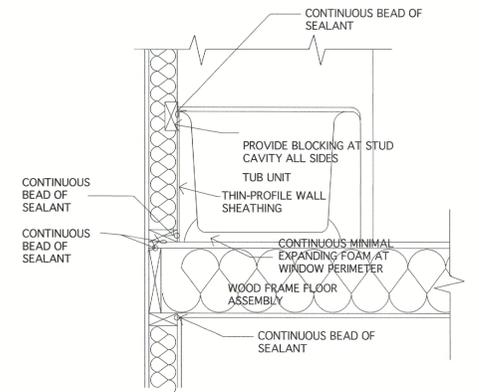


AIR SEALING @ PLATE ELECTRICAL PENETRATION



*NOTE: SHADED COMPONENTS DESIGNATED AIR FLOW RETARDER SYSTEM.

TYPICAL WALL SECTION AND FLOW RETARDER DETAIL
SCALE: 3/4"=1'-0"



AIR SEALING BEHIND TUB

| | |
|----------------------------|-------------------|
| REVISIONS: | FILE NO.: 25-16 |
| CAD DWG FILE: 157 Sportman | DWG DATE: 9/25/25 |
| AN: UNCLE SAM'S | DRAWN BY: JLG |
| DATE: 11/11/25 | CHK'D BY: JLG |

| |
|------------------|
| SCALE: 1/4" = 1' |
|------------------|



DWG. NAME: **MEP NOTES**

DWG. NO.: **MEP-1**

| INSULATION AND FENESTRATION REQUIREMENTS BY COMPONENT ^a | | | | | | | | | | |
|--|------------------------------------|--------------------------------|---|----------------|-------------------------|--------------------------------|---------------|-----------------------|---------------------------|--------------------------|
| CLIMATE ZONE | FENESTRATION U-FACTOR ^b | SKYLIGHT U-FACTOR ^b | GLAZED FENESTRATION SHGC ^{b,c} | CILING R-VALUE | WOOD FRAME WALL R-VALUE | MASS WALL R-VALUE ⁱ | FLOOR R-VALUE | BASEMENT WALL R-VALUE | SLAB ^d R-VALUE | CRAWL SPACE WALL R-VALUE |
| 4 EXCEPT MARINE | 0.35 | 0.55 | 0.40 | 49 | 20 OR 13.5 ^e | 8/13 | 19 | 10/13 | 10, 2 ft. | 10/13 |

FOR SI: 1 FOOT = 304.8 mm

a. R-VALUES ARE MINIMUMS, U-FACTORS AND SHGC ARE MAXIMUMS. WHEN INSULATION IS INSTALLED IN A CAVITY WHICH IS LESS THAN THE LABEL OR DESIGN THICKNESS OF THE INSULATION, THE INSTALLED R-VALUE OF THE INSULATION SHALL NOT BE LESS THAN THE R-VALUE SPECIFIED IN THE TABLE.

b. THE FENESTRATION U-FACTOR COLUMN EXCLUDES SKYLIGHTS. THE SHGC COLUMN APPLIES TO ALL GLAZED FENESTRATION EXCEPT: SKYLIGHTS MAY BE EXCLUDED FROM GLAZED FENESTRATION SHGC REQUIREMENTS IN CLIMATE ZONE 1 THROUGH 3 WHERE THE SHGC FOR SUCH SKYLIGHTS DOES NOT EXCEED 0.30.

c. "13/13" MEANS R-13 CONTINUOUS INSULATION ON THE INTERIOR OR EXTERIOR OF THE HOME OR R-19 CAVITY INSULATION AT THE INTERIOR OF THE BASEMENT WALL. "15/15" SHALL BE PERMITTED TO BE MET WITH R-13 CAVITY INSULATION ON THE INTERIOR OF THE BASEMENT WALL PLUS R-5 CONTINUOUS INSULATION ON THE INTERIOR OR EXTERIOR OF THE HOME. "10/13" MEANS R-10 CONTINUOUS INSULATION ON THE INTERIOR OR EXTERIOR OF THE HOME OR R-13 CAVITY INSULATION AT THE INTERIOR OF THE BASEMENT WALL.

d. R-5 SHALL BE ADDED TO THE REQUIRED SLAB EDGE R-VALUES FOR HEATED SLABS. INSULATION DEPTH SHALL BE THE DEPTH OF THE FOOTING OR 2 FEET, WHICHEVER IS LESS IN CLIMATE ZONE 1 THROUGH 3 FOR HEATED SLABS.

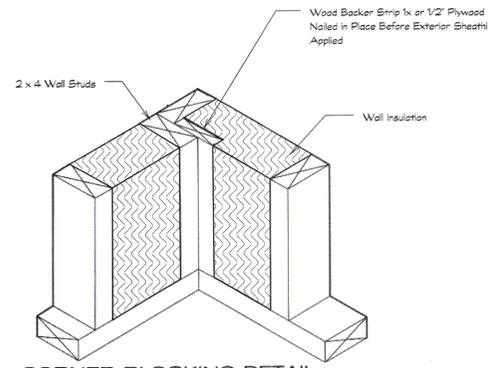
e. THERE ARE NO SHGC REQUIREMENTS IN THE MARINE ZONE.

f. BASEMENT WALL INSULATION IS NOT REQUIRED IN WARM HUMID LOCATIONS AS DEFINED BY FIGURE R301.1 AND TABLE R301.1.

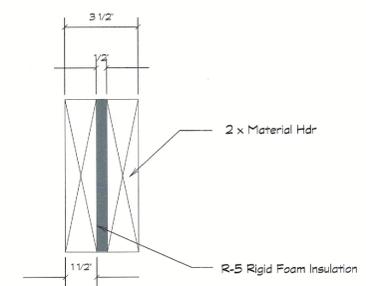
g. OR INSULATION SUFFICIENT TO FILL THE FRAMING CAVITY, R-19 MINIMUM.

h. THE FIRST VALUE IS CAVITY INSULATION, THE SECOND VALUE IS CONTINUOUS INSULATION. SO "13/5" MEANS R-13 CAVITY INSULATION PLUS R-5 CONTINUOUS INSULATION.

i. THE SECOND R-VALUE APPLIES WHEN MORE THAN HALF THE INSULATION IS ON THE INTERIOR OF THE MASS WALL.



CORNER BLOCKING DETAIL
INSULATED WALL DETAILS

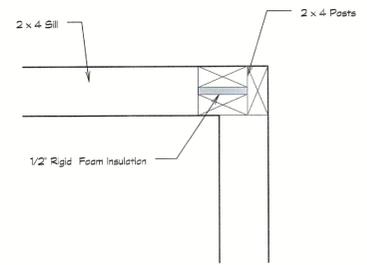


2 x Header Detail
Scale 3/4" = 1"

Chose Compliance Method
Total UA Alternative See RESCHECK Analysis (Attached)

- Mechanical System Notes
- At least one thermostat shall be provided for each separate heating and cooling system.
 - Ducts, air handlers and filter boxes shall be sealed. Joints and seams shall comply with either International Mechanical Code or International Residential Code.
 - Ducts shall be pressure tested to determine air leakage by one of the following methods:
 - Rough-In Test
 - Post Construction Test
 - Building framing cavities shall not be used as ducts or plenums.
 - Mechanical system piping capable of carrying fluids above 105° F or below 55° F shall be insulated to a minimum of R-3.
 - The building shall be provided with ventilation that meets the requirements of the International Residential Code or International Mechanical Code as applicable, or with other approved means of ventilation. Outdoor air intakes and exhausts shall have automatic or gravity dampers that close when the ventilation system is not operating.

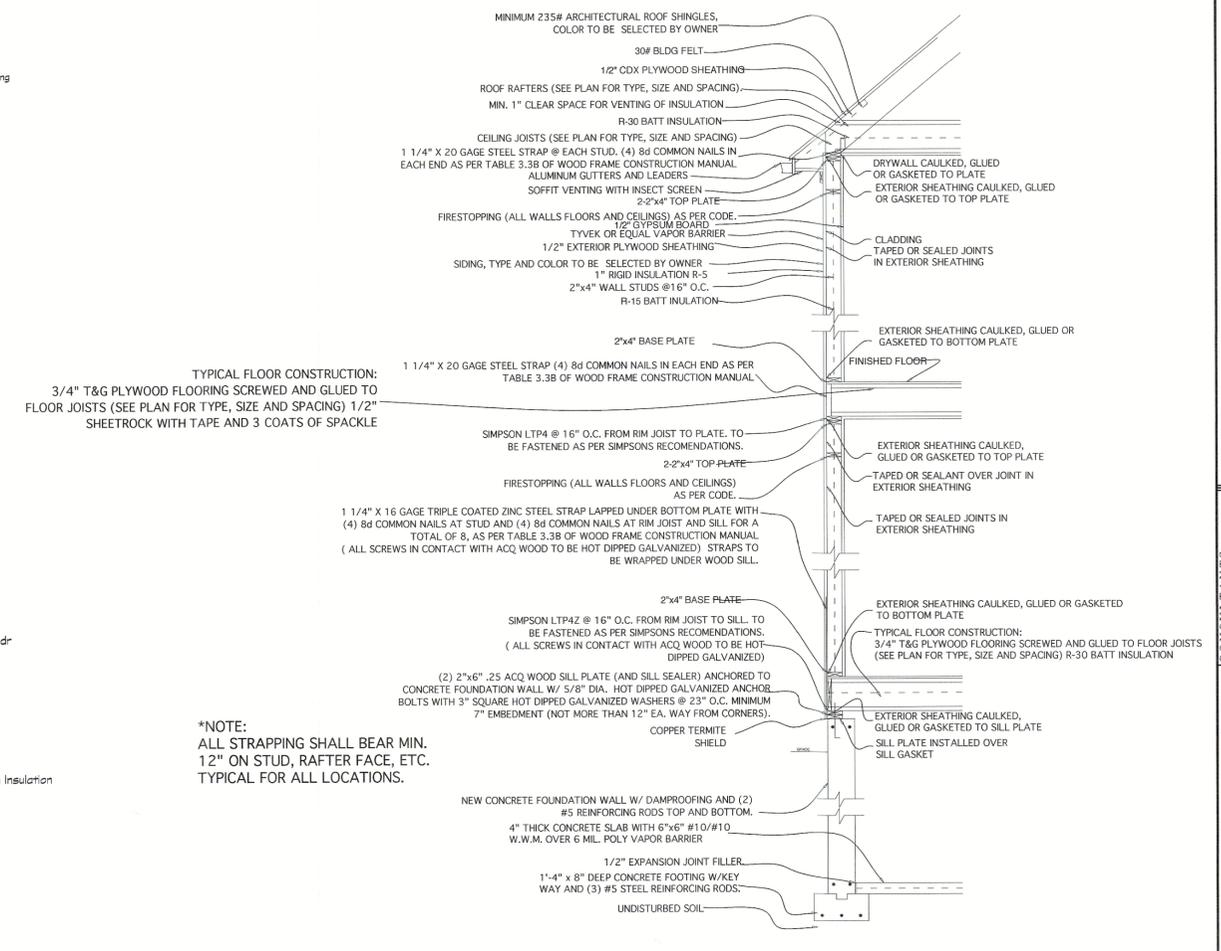
| Energy Code Requirement Table | | | | |
|-------------------------------|------------------|---------------|---------------------|------|
| Fenestration | | | | |
| | Manufacturer | Type | UA | SHGC |
| Window | N/A | N/A | N/A | N/A |
| Door | Jeld-Wen | Sliding Glass | 0.34 | 0.27 |
| Mechanical Systems | | | | |
| Air Conditioning | | | None | |
| Heating | | | Hot Water Baseboard | |
| Equipment Type | | | | |
| Air Conditioning | | | None | |
| Heating | | | Gas Fired Boiler | |
| Insulation | | | | |
| | Type | R-Value | | |
| Walls | Fiberglass Batts | 15 | | |
| | Rigid Foam | 3 | | |
| Ceilings | Fiberglass Batts | 30 | | |
| Floor/Foundation | Rigid Foam | 19/5 | | |



Corner Post Insulation Detail
Rigid Foam

AIR SEALING GENERAL NOTE:
THESE DETAILS ARE SHOWN FOR TYPICAL AREAS AS SHOWN. CONTRACTOR TO HIRE A THIRD PARTY TO INSPECT ALL CONSTRUCTION PRIOR TO CLOSING UP ANY WALLS AND CEILING TO INSURE EVERYTHING HAS BEEN CAULKED AND SEALED CORRECTLY FOR THE BLOWER DOOR TEST.

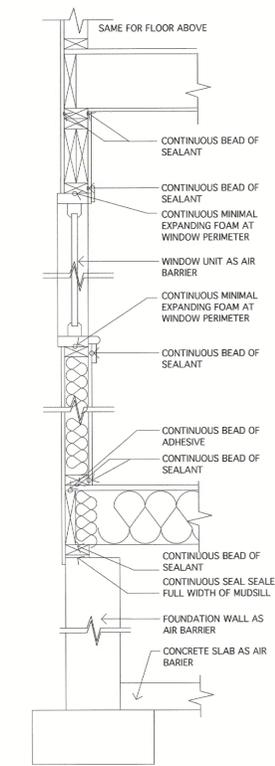
- Energy Conservation Notes
- Air Barrier Criteria
- A continuous air barrier shall be installed in the building envelope.
 - The exterior thermal envelope contains a continuous air barrier.
 - Breaks or joints in the barrier shall be sealed.
 - The air barrier in any dropped ceiling/soffit shall be aligned with the insulation and any air gaps in the air barrier shall be sealed.
 - Access openings, drop-down stairs or knee wall doors to unconditioned attic space shall be sealed.
 - The junction of the foundation and all plate shall be sealed.
 - The junction of the top plate and the top of exterior walls shall be sealed.
 - Knee walls shall be sealed.
 - The space between windows/door jams and framing and skylights and framing shall be sealed.
 - Rim joists shall include the air barrier.
 - The air barrier shall be installed at any exposed edge of insulation.
 - Exposed earth in unvented crawl spaces shall be covered with a Class 1 vapor retarder with overlapping joints taped.
 - Duct shafts, utility penetrations and flue shafts opening to exterior or unconditioned space shall be sealed.
 - Air sealing shall be provided between the garage and conditioned spaces.
 - Recessed light fixtures installed in the building thermal envelope shall be sealed to the drywall.
 - The air barrier installed at exterior walls adjacent to showers and tubs shall separate them from the showers and tubs.
 - The air barrier shall be installed behind electrical or communications boxes or air sealed boxes shall be used.
 - HVAC register boots, that penetrate building thermal envelope shall be sealed to the subfloor or drywall.
 - When required to be sealed, concealed fire sprinklers shall only be sealed in a manner that is recommended by the manufacturer. Caulking or other adhesive sealants shall not be used to fill voids between fire sprinkler cover plates and walls or ceilings.
 - The thermal air barrier shall be constructed to limit air leakage in accordance with Sections R402.4.1 through R402.4.6
- Insulation
- Air permeable insulation shall not be used as a sealing material.
 - The insulation in any dropped ceiling/soffit shall be aligned with the air barrier.
 - Cavities within corners and headers of frame walls shall be insulated by completely filling the cavity with a material having a thermal resistance of R-3 per inch minimum. (See Detail)
 - Exterior thermal envelope insulation for framed walls shall be installed in substantial contact and continuous alignment with the air barrier.
 - Rim joists shall be insulated.
 - Floor framing cavity insulation shall be installed to maintain permanent contact with the underside of subfloor decking, or floor framing cavity insulation shall be permitted to be in contact with the top side of sheathing or continuous insulation installed on the underside of floor framing and extends from the bottom to the top of all perimeter floor framing members.
 - Where provided instead of floor insulation, insulation shall be permanently attached to the crawlspace walls.
 - Batts in narrow cavities shall be cut to fit or narrow cavities shall be filled by insulation that on installation readily conforms to the available cavity space.
 - Recessed light fixtures installed in the building thermal envelope shall be air tight and IC rated.
 - Batt insulation shall be cut neatly to fit around wiring and plumbing in exterior walls, or insulation that on installation readily conforms to the available space shall extend behind piping and wiring.
 - Exterior walls adjacent to showers and tubs shall be insulated.



TYPICAL WALL SECTION AND FLOW RETARDER DETAIL
SCALE: 3/4" = 1'-0"

*NOTE:
ALL STRAPPING SHALL BEAR MIN. 12" ON STUD, RAFTER FACE, ETC. TYPICAL FOR ALL LOCATIONS.

The project plans have been designed in accordance with the 2020 New York State Energy Conservation Code (IECC)



AIR SEALING @
EXTERIOR WALL

(631) 839-4824

ARCHITECTURE & DESIGN

7 RIDGEWOOD ST
BAY SHORE, NY 11706

CONSULTANTS:

HOUSE RAISING
LUNATI RESIDENCE
157 SPORTSMAN DR
VILLAGE OF FREEPORT

DESCRIPTION:
RECEIVED
11/11/2025

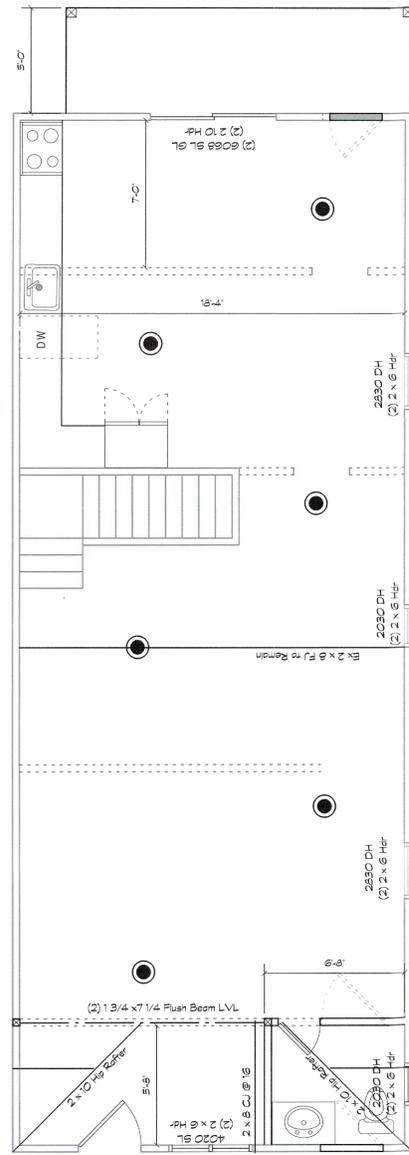
REVISIONS:
FILE NO: 25-16
CAD DWG FILE: 157 Sportsman
DWG DATE: 3/25/25
DRAWN BY: LGS
CHK'D BY: LGS

SCALE: 1/4" = 1'

DWG. NAME:
MEP
NOTES

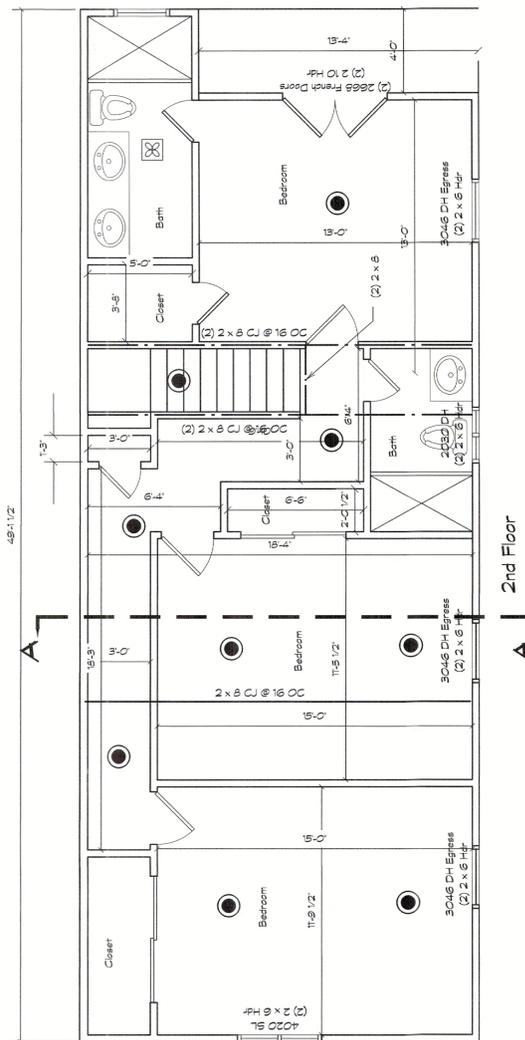
DWG. NO.:
MEP-2

PAGE 5 OF 5



Schematic Sprinkler Layout 1st Floor
6 Heads

1st Floor

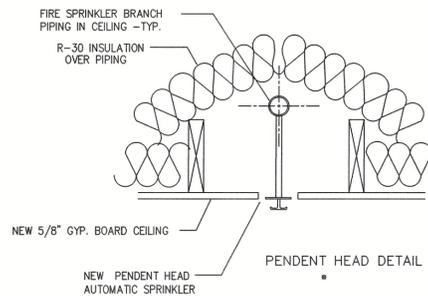


Schematic Sprinkler Layout Upper Floor
9 Heads

2nd Floor

SPRINKLER NOTES

1. ALL PIPING SHALL BE APPROVED TYPE CPVC.
2. SPRINKLER SYSTEM IS DESIGNED IN ACCORDANCE WITH NFPA 13D.
3. ATTIC IS NOT INTENDED FOR STORAGE USE AND IS EXEMPT FROM SPRINKLER COVERAGE PER NFPA 13D-4.6.
4. SPRINKLER HEADS SHALL CLEAR LIGHTING FIXTURES, BEAMS, ETC. SIDEWALL HEADS SHALL BE POSITIONED SO THAT DEFLECTORS ARE MIN. 4" AND MAX. 6" FROM CEILING.
5. ALL PIPING SHALL BE STANDARD WEIGHT STEEL OR APPROVED PLASTIC.
6. CONTRACTOR SHALL FURNISH AND INSTALL ADDITIONAL PIPING INCLUDING DROPS, IF NECESSARY TO ATTAIN CLEARANCE AT NO ADDITIONAL COST.
7. NEW UNDERGROUND WATER SERVICE SHALL COMPLY WITH LOCAL WATER AUTHORITY REQUIREMENTS WITH REGARD TO MATERIAL, MIN. COVERAGE, INSTALLATION REQUIREMENTS ETC.
8. NO WORK SHALL COMMENCE PRIOR TO OBTAINING ALL NECESSARY APPROVALS FROM LOCAL WATER AUTHORITIES HAVING JURISDICTION.
9. REFER TO ACCOMPANYING BOOK SPECIFICATIONS FOR ADDITIONAL REQUIREMENTS.
10. CONTRACTOR SHALL FILE FOR FIRE LINE TAP WITH LOCAL WATER COMPANY.
11. GENERAL CONTRACTOR SHALL PROVIDE SOFFITS FOR SPRINKLER LINES WHERE REQUIRED. ALL PIPES ARE TO RUN CONCEALED.
12. NEW SPRINKLER SYSTEM SHALL BE TIED INTO FIRE ALARM SYSTEM WITH REQUIRED TAMPER SWITCH AND WATER FLOW



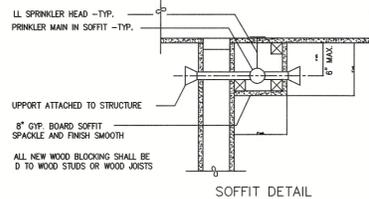
SPRINKLER LEGEND

● = NEW PENDENT SPRINKLER HEAD RESIDENTIAL TYPE
 1 1/2" NPT, 1 1/2" ORIFICE, 165 DEGREE F. K=4.9
 17 gpm @ 12 psi RELIABLE MODEL RFC 49(16'-0" X 16'-0")

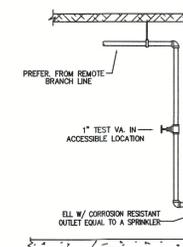
OCCUPANCY CLASSIFICATION: RESIDENTIAL
 DESIGN CRITERIA: NFPA 13-D

SPRINKLER HEAD LEGEND:

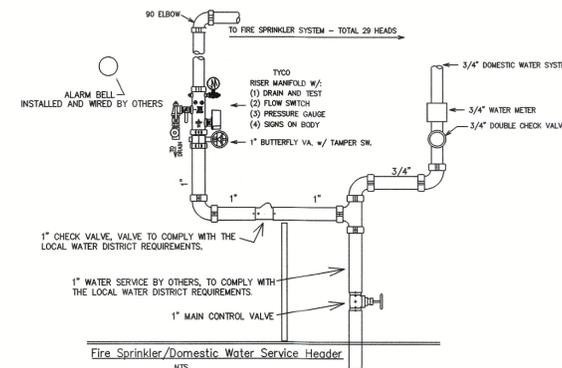
| SYM | QTY | POSITION | FINISH | TEMP | K | NPY | SIN | MFG. | MODEL# |
|-----|-----|----------|--------|------|------|------|--------|-------|--------|
| ● | 29 | PEND | BRASS | 165 | 4.90 | 1/2" | RA0616 | RASCO | RFC49 |



SPRINKLERS ARE REQUIRED ON THIS FLOOR - SPRINKLERS TO BE DESIGNED BY LICENSED SPRINKLER CONTRACTOR AND SHALL CONFORM TO ALL REQUIREMENTS FROM LOCAL FIRE MARSHALL, TOWN AND STATE MUNICIPALS. SPRINKLER HEADS SHOWN ON DRAWINGS ARE SUGGESTED LOCATION AND FINAL DESIGN LOCATION SHALL BE DETERMINED IN FIELD.



WET PIPE INSPECTORS TEST



Following sign must be posted next to Main Control Valve in min. 1/4" letters:
 WARNING the water system for this home supplies a fire sprinkler system that depends on certain flows and pressures being available to fight a fire. Devices that restrict the flow or decrease the pressure such as water softeners shall not be added to this system without a review of the fire sprinkler system by a fire protection specialist. Do not remove this sign.

Application Date: 7/11/2025
Fees Paid: \$225.00

SP# 3846

INCORPORATED VILLAGE OF FREEPORT
SITE PLAN REVIEW APPLICATION
PLANNING BOARD

NOTE: ACCEPTANCE OF THIS APPLICATION BY THE VILLAGE CLERK'S OFFICE DOES NOT CONSTITUTE A COMPLETE APPLICATION

PROPERTY ADDRESS: 6 LAURETTE LN, FREEPORT, NY ZONING DISTRICT Residence A
SECTION 62 BLOCK 205 LOT 005 LOT SIZE: 6745 sq ft.

| <input type="checkbox"/> TENANT <u>APPLICANT</u> <input type="checkbox"/> LESSEE | PROPERTY OWNER |
|--|--|
| Name: <u>ELIZABETH TANCHICO</u> | Name: <u>ELIZABETH TANCHICO</u> |
| Address: <u>6 Laurette Ln Freeport, NY 11520</u> | Address: <u>6 LAURETTE LN FREEPORT, NY 11520</u> |
| Telephone #: <u>(917) 863-7964</u> | Telephone #: <u>(917) 863-7964</u> |

Attorney Name: _____ Address: _____
(optional) Phone #: _____

Present Land Use: Residential Proposed Land Use: Residential

Description of Proposed Work: Installation of 10' x 20' Pergola

I request a preliminary meeting: _____ YES NO

I request a waiver of the public hearing and hereby certify the following:
A. The subject property is zoned Residence A or Residence AA.
B. The proposed construction is not a new building or dwelling.
C. It is my belief that the criteria contained in §209-7 of the Code of the Incorporated Village of Freeport are satisfied. YES _____ NO

RECEIVED
2025 JUL 11 PM 2:59
CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

[Signature]
APPLICANT'S SIGNATURE
Sworn to before me this 07 day of June, 2025
Mesheenna C. Little
Notary Public
MESHESSNA C LITTLE
NOTARY PUBLIC-STATE OF NEW YORK
No. 01L16066956
Qualified in Nassau County
My Commission Expires 11-26-2025

6/27/25
DATE

Property Owner's Consent:
I, ELIZABETH TANCHICO am (are) the owner(s) of the subject property and consent to the filing of this application.

[Signature]
PROPERTY OWNER'S SIGNATURE
Sworn to before me this 27 day of June, 2025
Mesheenna C. Little
Notary Public
MESHESSNA C LITTLE
NOTARY PUBLIC-STATE OF NEW YORK
No. 01L16066956
Qualified in Nassau County
My Commission Expires 11-26-2025

6/27/25
DATE

FOR VILLAGE USE ONLY

| | |
|---|---|
| Site Plan Public Hearing Required: _____ YES _____ NO | Date of Hearing: _____ Date of Decision: _____ |
| Village Clerk's Signature: _____ | <u>Approved</u> _____ Denied _____ Date: _____ |
| Planning Board Signature: _____ | Date: _____ |



INC. VILLAGE OF FREEPORT

Department of Buildings

46 NORTH OCEAN AVENUE
FREEPORT, NEW YORK 11520
(516) 377-2242
FAX (516) 377-2493

ROBERT T. KENNEDY
MAYOR

E-MAIL BUILDINGDEPT@FREEPORTNY.GOV

SERGIO A. MAURAS
SUPERINTENDENT OF BUILDINGS

SITE PLAN LETTER

June 12, 2025

Elizabeth Tanchico
6 Laurette Lane
Freeport, NY 11520

RE: 6 Laurette Lane, Freeport, NY 11520
Zoning District – Residence A Sec. 62 Blk. 205, Lot 005
Building Permit Application #20254251
Description: Proposed steel pergola 10' x 20'.

Dear Sir/Madam

The above referenced application was initially reviewed by the Building Department and it has been determined that in order to proceed with the application process, additional approval from the Site Plan Review Board will be required.

For your convenience, we have enclosed the instructions, application, Building Department letters/documents, the Environmental Assessment form, and the Negative Declaration page pertaining to your building application. Please call the **Village Clerk's Office at 516-377-3632** to make an appointment, during normal business hours, to review the completed application. Changes or additional information may be required for the application; therefore, only **ONE** complete package of the twelve (12) sets should be brought in for the initial appointment with the Clerk's Office. **Only after this initial appointment should the additional copies be made.**

Be further advised that you must submit an application to the Site Plan Review Board within sixty (60) days of the date of this letter. In the event that you do not file an application within the allotted sixty (60) days, this letter will expire and the Building Permit Application in conjunction with same will be cancelled. Subsequently, a new Building Permit Application and filing fees will be required.

If you should have any questions or require any additional information with reference to the Site Plan Review Board Application, please call the **VILLAGE CLERK'S OFFICE** at 377-3632.

Very truly yours,

Sergio A. Mauras
Superintendent of Buildings
/Daniela Hernandez
cc: Village Clerk
ZBA Approval Needed: NO

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JUN 11 2025
CLERK'S OFFICE
VILLAGE OF FREEPORT, NY
59

VILLAGE OF FREEPORT
Department of Buildings
Recommendation

Notice

X Negative Declaration

Positive Declaration

In accordance with Section 8-0113, Article 8 of the New York Environmental Conservation Law and Chapter 110 of the Village Code, this Department has conducted an initial review to determine whether the following project may have a significant effect on the environment and on the basis of that review hereby finds:

X The proposed project will not have a significant effect on the environment and therefore does not require the preparation of an Environmental Impact Statement.

 The proposed project may have a significant effect on the environment and therefore requires the preparation of an Environmental Impact Statement.
(See reasons below)

Project:

Building Permit App. 20254251

Location: 6 Laurette Lane, Freeport NY 11520

Applicant: Elizabeth Tanchico

Description: Proposed steel pergola 10' x 20'.

Lead Agency: Department of Buildings
for the Board of Trustees
Village of Freeport
46 North Ocean Avenue, Freeport, NY

Agency Contact Person:
Superintendent of Buildings
(516) 377-2242

REASON(S) FOR DETERMINATION

This finding is based upon Section 617.10 of Article of the New York Environmental Conservation Law, the criteria for determining what actions may have a significant effect on the environment, as follows:

A) _____

B) Possible environment effects identified:
(only if positive determination)

Dated: June 12, 2025

Sergio A. Mauras
Sergio A. Mauras
Superintendent of Buildings

IMPORTANT: This declaration and supporting attachments are open for inspection and public response at the office of the Superintendent of Buildings.

RECEIVED
2025 JUL 11 P 2:59
VILLAGE OF FREEPORT NY
DEPARTMENT OF BUILDINGS

617.20
Appendix B
Short Environmental Assessment Form

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.

| Part 1 - Project and Sponsor Information | | | | | | | |
|--|-----|------------------------------------|--|----|-----|---|--|
| Name of Action or Project: <i>Pergola installation - aluminum steel 10 ft x 20 ft.</i> | | | | | | | |
| Project Location (describe, and attach a location map): <i>6 Laurette Lane, Freeport; NY 11520-backyard</i> | | | | | | | |
| Brief Description of Proposed Action: <i>Installation of 10 ft x 20 ft pergola on the backyard.</i> | | | | | | | |
| Name of Applicant or Sponsor: <i>ELIZABETH TANCHICO</i> | | Telephone: <i>(917) 863-7964</i> | | | | | |
| Address: <i>6 Laurette Lane</i> | | E-Mail: <i>etanchico@gmail.com</i> | | | | | |
| City/PO: <i>Freeport, NY</i> | | State: <i>NY</i> | Zip Code: <i>11520</i> | | | | |
| 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%; text-align: center;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="font-size: 2em;">X</td> <td></td> </tr> </table> | NO | YES | X | |
| NO | YES | | | | | | |
| X | | | | | | | |
| 2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: | | | <table border="1" style="width: 100%; text-align: center;"> <tr> <th style="width: 50%;">NO</th> <th style="width: 50%;">YES</th> </tr> <tr> <td style="font-size: 2em;">X</td> <td></td> </tr> </table> | NO | YES | X | |
| NO | YES | | | | | | |
| X | | | | | | | |
| 3.a. Total acreage of the site of the proposed action? | | <i>10 ft x 20 ft</i> acres | | | | | |
| b. Total acreage to be physically disturbed? | | <i>10 ft x 20 ft</i> acres | | | | | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? | | <i>10 ft x 20 ft</i> acres | | | | | |
| 4. Check all land uses that occur on, adjoining and near the proposed action. | | | | | | | |
| <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) | | | | | | | |
| <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ | | | | | | | |
| <input type="checkbox"/> Parkland | | | | | | | |

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FREEMONT BUILDING DEPT.

| | NO | YES | N/A |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation service(s) available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Will the proposed action connect to an existing public/private water supply? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing potable water: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Will the proposed action connect to existing wastewater utilities? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing wastewater treatment: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area? | <input checked="" type="checkbox"/> | <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? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban | | | |
| 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? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is the project site located in the 100 year flood plain? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? <input type="checkbox"/> NO <input type="checkbox"/> YES If Yes, briefly describe: _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | | |
|---|-------------------------------------|--------------------------|
| 18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ | NO | YES |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| MAY 30 2025 FREEPORT BUILDING DEPT. | | |
| 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: _____ | NO | YES |
| | <input checked="" 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: _____ | NO | YES |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE | | |
| Applicant/sponsor name: <u>ELIZABETH TANCHEC</u> | | Date: <u>5/29/2025</u> |
| Signature: <u>[Signature]</u> | | |

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------|------------------------------------|
| 1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Will the proposed action result in a change in the use or intensity of use of land? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Will the proposed action impair the character or quality of the existing community? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities? | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)? | <input type="checkbox"/> | <input type="checkbox"/> |

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FREERPORT BUILDING DEPT

No, or
small
impact
may
occur

Moderate
to large
impact
may
occur

10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?

11. Will the proposed action create a hazard to environmental resources or human health?

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

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VILLAGE OF FREERPORT, NY

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Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)

SOUTH MAIN STREET

| DRAWN | CHECKED | DATE | SEC |
|-------|---------|---------|--------------|
| H.S. | A.J.S. | 1/10/58 | BLK. 205 |
| R.E. | M.R. | 7-10-58 | PLENO. 30399 |
| | | 7-25-60 | JOBNO. 30399 |

NOTE: STREET WIDTH NOT TO SCALE

NOTE: LOC. TO FINISHED BLDG. AREA = 6070 #

GUARANTEED TO: SECURITY TITLE & GUARANTY CO. DIME SAVINGS BANK OF BROOKLYN William T. Cornelius Co.

RE-DATED JULY 22, 1960
RE-DATED JULY 13, 1958

MAP OF PROPERTY AT FREEPORT, N.Y.

SURVEYED: APRIL 10, 1958

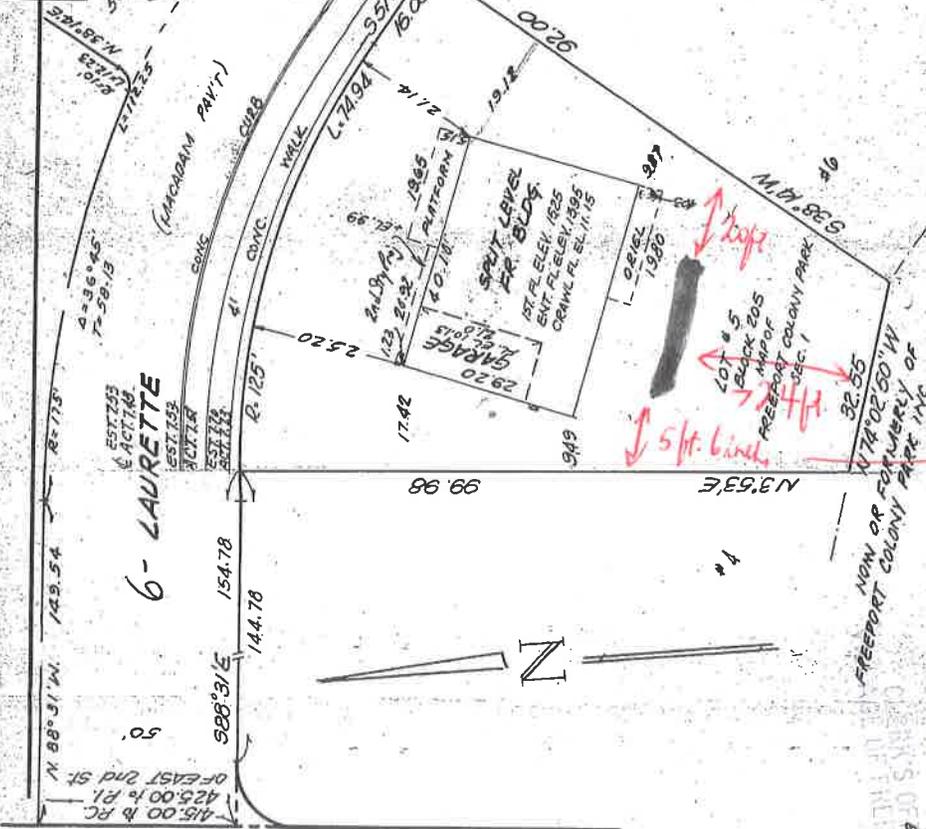
BALDWIN & CORNELIUS CO.

CIVIL ENGINEERS & SURVEYORS

LICENSE NO. 793

FREEPORT, L.I., N.Y.

SCALE 1"=20' N.Y. STATE STANDARD



FILED: NOV 19 1958
CASE NO. 7113

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MAY 30

FRONT – 6 LAURETTE LANE, FREEPORT, NY



LEFT SIDE NEIGHBOR



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JUL 11 P 3:00
POLICE OFFICE
FREEPORT, NY

RIGHT SIDE NEIGHBOR



FRONT NEIGHBORS



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2025 JUL 11 P 3:00
CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

ENTRANCE TO BACKYARD



VIEW OF BACKYARD FROM REAR OF HOUSE



RECEIVED
JUN 3 3:00
OFFICE
PHOTOGRAPHY

LEFT SIDE OF BACKYARD



LEFT SIDE OF BACKYARD – FENCE TO EDGE OF PAVER – 20 FT



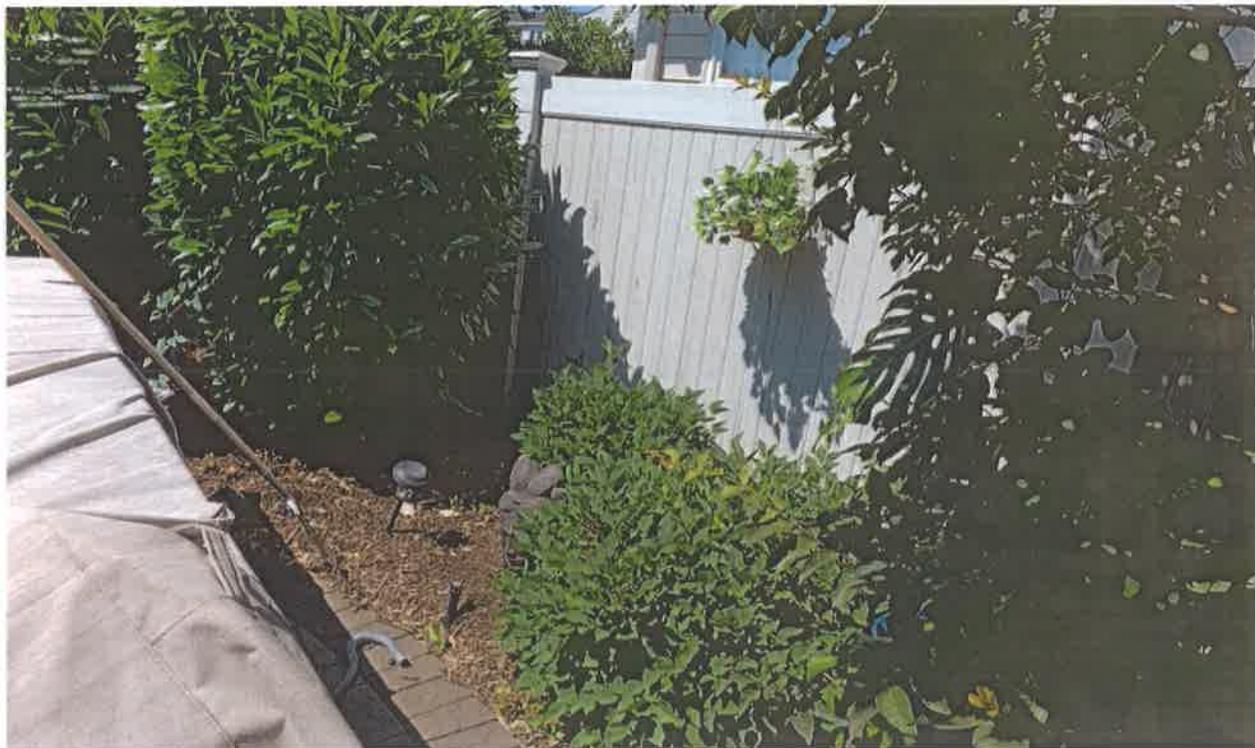
RECEIVED
2025 JUL 11 P 3:00
CLERK'S OFFICE
VILLAGE OF FALDPOND, NY

REAR OF BACKYARD – FENCE TO EDGE OF PAVER - >24 FT

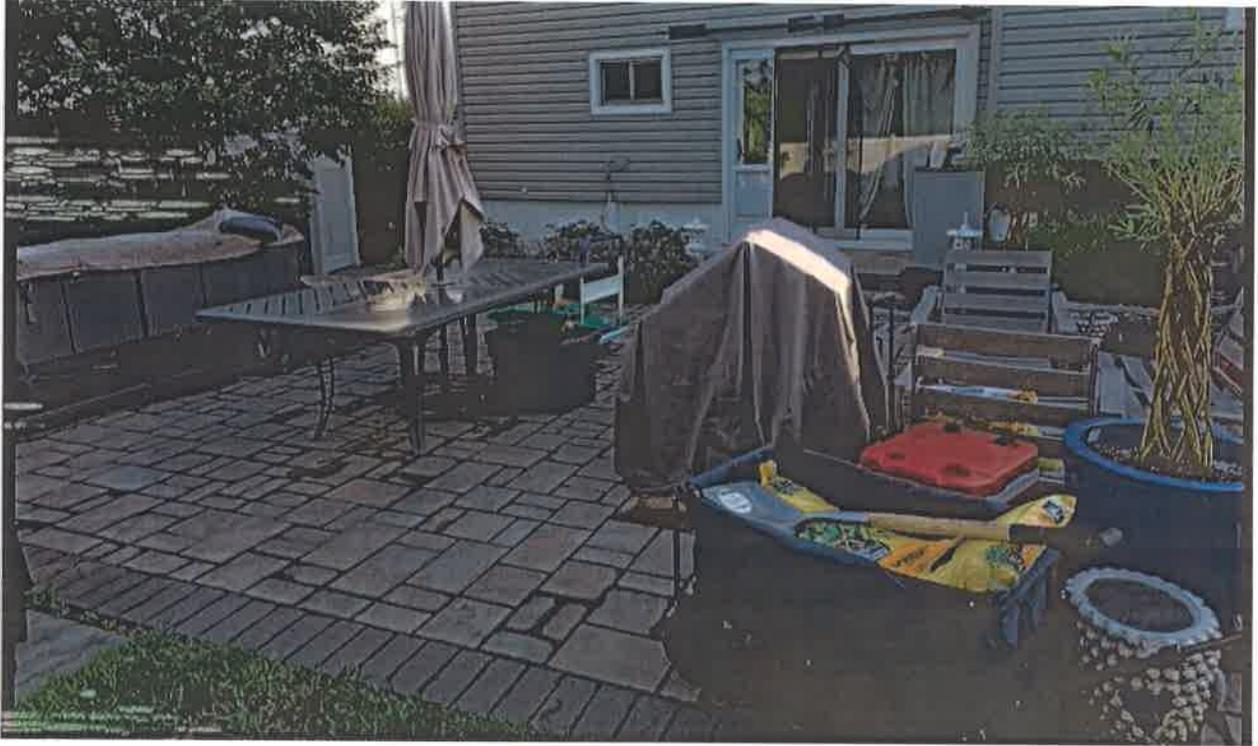


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2025 JUL 11 P 3:00
VILLAGE OF FREEPORT, N.Y.
WORKS OFFICE

RIGHT SIDE OF BACKYARD – FENCE TO EDGE OF PAVER – 5 FT 6 INCHES



VIEW OF REAR OF HOUSE



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CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

Titan Series 10 ft. x 20 ft. Brown LED Aluminized Steel Louvered Pergola
Modern Outdoor Pergola with Adjustable Roof

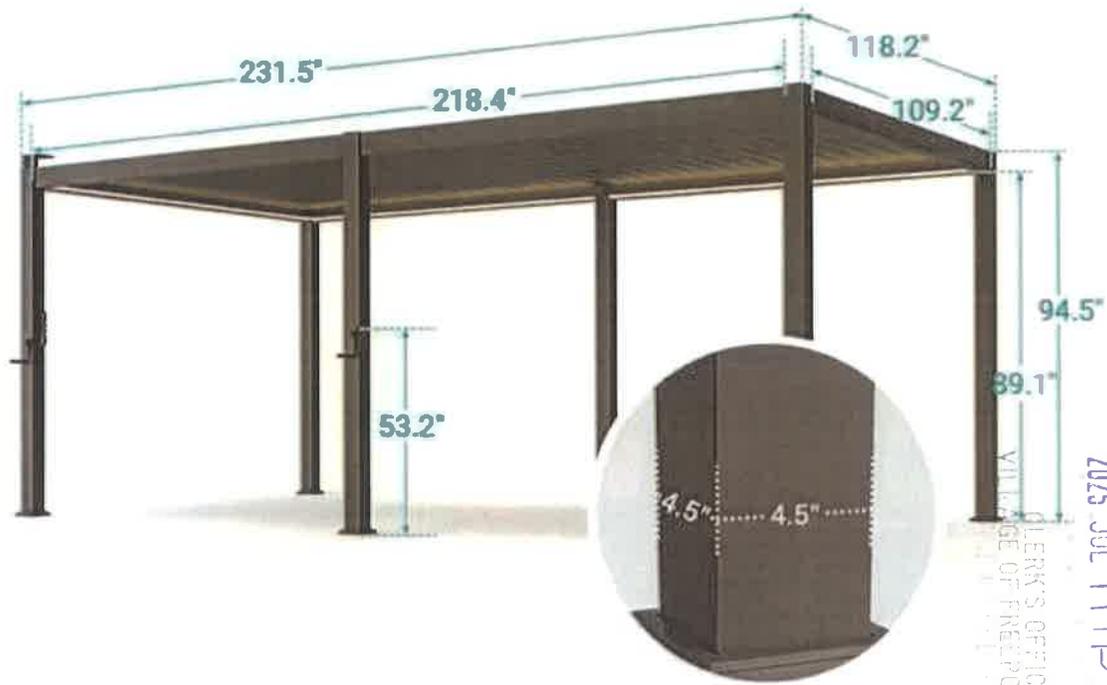


Weather-resistant Material

Suitable for all weather conditions to ensure a comfortable outdoor experience



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LAK'S OFFICE
11 LANE
OF FREEPORT, NY



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2025 JUL 11 P 3:00

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY



Sun-shading



Easy to set up



Waterproof



Portable



Adjustable Louvers

0-90 degree angle control for customizable shading area

Application Date: 7/21/2025
Fees Paid: \$225.00

SP# 3847

INCORPORATED VILLAGE OF FREEPORT
SITE PLAN REVIEW APPLICATION
PLANNING BOARD **RECEIVED**

NOTE: ACCEPTANCE OF THIS APPLICATION BY THE VILLAGE CLERK'S OFFICE DOES NOT CONSTITUTE A COMPLETE APPLICATION

PROPERTY ADDRESS: 52 Hillside Ave, Freeport NY CLERK'S OFFICE ZONING DISTRICT Res. A.
SECTION 55 BLOCK 242 LOT 7. LOT SIZE: 50 x 150 = 7,500 S.F.

| | | | |
|--|--|---------------------------------|--|
| <input type="checkbox"/> TENANT | <input checked="" type="checkbox"/> APPLICANT | <input type="checkbox"/> LESSEE | PROPERTY OWNER |
| Name: <u>Edwin Marmol Nunez</u> | | | Name: <u>Edwin Marmol Nunez</u> |
| Address: <u>56 Hillside Ave, Freeport NY 11520</u> | | | Address: <u>56 Hillside Ave, Freeport NY 11520</u> |
| Mail # <u>125 Cortland St. Copiague NY 11726</u> | | | |
| Telephone #: <u>516 581 5658 - 631 575 6254</u> | | | Telephone #: <u>516 581 5658 - 631 575 6254</u> |

Attorney Name: _____ Address: _____
(optional) Phone #: _____

Present Land Use: Residential Proposed Land Use: Residential.

Description of Proposed Work: Maintain Concrete paver Driveway 1,834 S.F., 566 S.F. concrete patio and cellar entrance.

I request a preliminary meeting: _____ YES NO

I request a waiver of the public hearing and hereby certify the following:
 A. The subject property is zoned Residence A or Residence AA.
 B. The proposed construction is not a new building or dwelling.
 C. It is my belief that the criteria contained in §209-7 of the Code of the Incorporated Village of Freeport are satisfied.
_____ x YES _____ NO

Edwin Marmol Nunez
APPLICANT'S SIGNATURE _____ DATE 7-16-25.
Sworn to before me this 16 day of July, 2025
Leandro Firpo
Notary Public
LEANDRO FIRPO
Notary Public - State of New York
NO. 01F16189540
Qualified in Suffolk County
My Commission Expires 6/30/2028

Property Owner's Consent:
I, Edwin Marmol Nunez. am (are) the owner(s) of the subject property and consent to the filing of this application.

Edwin Marmol Nunez
PROPERTY OWNER'S SIGNATURE _____ DATE 7-16-25.
Sworn to before me this 16 day of July, 2025
Leandro Firpo
Notary Public
LEANDRO FIRPO
Notary Public - State of New York
NO. 01F16189540
Qualified in Suffolk County
My Commission Expires 6/30/2028

FOR VILLAGE USE ONLY

| | |
|--------------------------------------|-----------------------------|
| Site Plan Public | Date of Hearing: _____ |
| Hearing Required: _____ YES _____ NO | Date of Decision: _____ |
| Village Clerk's Signature: _____ | _____ Approved _____ Denied |
| Planning Board Signature: _____ | Date: _____ |



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2025 JUL 21 P 2:33

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

INC. VILLAGE OF FREEPORT

Department of Buildings

46 NORTH OCEAN AVENUE
FREEPORT, NEW YORK 11520
(516) 377-2242
FAX (516) 377-2493

ROBERT T. KENNEDY
MAYOR

E-MAIL BUILDINGDEPT@FREEPORTNY.GOV

SERGIO A. MAURAS
SUPERINTENDENT OF BUILDINGS

SITE PLAN LETTER

May 28, 2025

Edwin Marmol Nunez
52 Hillside Ave
Freeport, NY 11520

RE: 52 Hillside Ave, Freeport, NY 11520
Zoning District – Residence A Sec. 55 Blk. 242, Lot 7
Building Permit Application #20254232

Description: Maintain concrete paver driveway 1,834 SF, 566SF concrete patio and cellar entrance.

Dear Sir/Madam

The above referenced application was initially reviewed by the Building Department and it has been determined that in order to proceed with the application process, additional approval from the Site Plan Review Board will be required.

For your convenience, we have enclosed the instructions, application, Building Department letters/documents, the Environmental Assessment form, and the Negative Declaration page pertaining to your building application. Please call the Village Clerk's Office at 516-377-3632 to make an appointment, during normal business hours, to review the completed application. Changes or additional information may be required for the application; therefore, only **ONE** complete package of the twelve (12) sets should be brought in for the initial appointment with the Clerk's Office. **Only after this initial appointment should the additional copies be made.**

Be further advised that you must submit an application to the Site Plan Review Board within sixty (60) days of the date of this letter. In the event that you do not file an application within the allotted sixty (60) days, this letter will expire and the Building Permit Application in conjunction with same will be cancelled. Subsequently, a new Building Permit Application and filing fees will be required.

If you should have any questions or require any additional information with reference to the Site Plan Review Board Application, please call the VILLAGE CLERK'S OFFICE at 377-3632.

Very truly yours,

Sergio A. Mauras
Superintendent of Buildings
/Daniela Hernandez
cc: Village Clerk
ZBA Approval Needed: NO

VILLAGE OF FREEPORT
Department of Buildings
Recommendation

Notice

RECEIVED

2025 JUL 21 P 2:33

CLERK'S OFFICE
VILLAGE OF FREEPORT, NY
Positive Declaration

Negative Declaration

In accordance with Section 8-0113, Article 8 of the New York Environmental Conservation Law and Chapter 110 of the Village Code, this Department has conducted an initial review to determine whether the following project may have a significant effect on the environment and on the basis of that review hereby finds:

The proposed project will not have a significant effect on the environment and therefore does not require the preparation of an Environmental Impact Statement.

The proposed project may have a significant effect on the environment and therefore requires the preparation of an Environmental Impact Statement.
(See reasons below)

Project:

Building Permit App. 20254232

Location: 52 Hillside Ave, Freeport NY 11520

Applicant: Edwin Marmol Nunez

Description: Maintain concrete paver driveway 1,834 SF, 566SF concrete patio and cellar entrance.

Lead Agency: Department of Buildings
for the Board of Trustees
Village of Freeport
46 North Ocean Avenue, Freeport, NY

Agency Contact Person:
Superintendent of Buildings
(516) 377-2242

REASON(S) FOR DETERMINATION

This finding is based upon Section 617.10 of Article of the New York Environmental Conservation Law, the criteria for determining what actions may have a significant effect on the environment, as follows:

A) _____

B) Possible environment effects identified:
(only if positive determination)

Dated: May 28, 2025

Sergio A. Mauras

Sergio A. Mauras
Superintendent of Buildings

IMPORTANT: This declaration and supporting attachments are open for inspection and public response at the office of the Superintendent of Buildings.

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617.20
Appendix B

Short Environmental Assessment Form

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Project Building Dept
Freeport, NY

2025 JUL 21 P 2:33

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.

| | | | |
|--|--|--|------------------|
| Part 1 - Project and Sponsor Information | | | |
| Name of Action or Project: Extension concrete driveway (445 S.F.), Reparation existing concrete driveway (1,339 S.F), concrete patio (566 S.F), Cellar Entrance. | | | |
| Project Location (describe, and attach a location map): 52 Hillside Ave Freeport NY 11520 (Between Rutland and Frederick Ave). | | | |
| Brief Description of Proposed Action: - Proposed Extension concrete driveway 445 S.F. - Reparation existing concrete driveway 1,339 S.F. - concrete patio 566 S.F. - Cellar Entrance. | | | |
| Name of Applicant or Sponsor: Edwin Marmol Nunez | | Telephone: 516 581 5658 E-Mail: hope drafting svc@gmail.com | |
| Address: 56 Hillside Ave, Freeport NY | | | |
| City/PO: Freeport, NY. | | State: NY | Zip Code: 11520. |
| 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. | | NO | YES |
| | | X | |
| 2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: | | NO | YES |
| | | X | |
| 3.a. Total acreage of the site of the proposed action? | | 0.17 acres | |
| b. Total acreage to be physically disturbed? | | _____ 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, adjoining and near the proposed action. | | | |
| <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland | | | |

RECEIVED

RECEIVED
MAY 13 REC'D

| | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan? | NO | YES | N/A |
| | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input 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? If Yes, identify: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation service(s) available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action? | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 10. Will the proposed action connect to an existing public/private water supply? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing potable water: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 11. Will the proposed action connect to existing wastewater utilities? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing wastewater treatment: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area? | NO | YES | |
| | <input checked="" 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? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Suburban | | | |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 16. Is the project site located in the 100 year flood plain? | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

| | | |
|---|-------------------------------------|--------------------------|
| 18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ | NO | YES |
| _____ | <input checked="" 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: _____ | NO | YES |
| _____ | <input checked="" 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: _____ | NO | YES |
| _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE | | |
| Applicant/sponsor name: <u>Edwin Marmol Nunez</u> | Date: <u>04-28-2024</u> | |
| Signature: _____ | | |

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------------|------------------------------------|
| 1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Will the proposed action result in a change in the use or intensity of use of land? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Will the proposed action impair the character or quality of the existing community? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Will the proposed action impact existing: | | |
| a. public / private water supplies? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. public / private wastewater treatment utilities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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2025 JUL 21 P 2:34

Freeport Building Dept.

| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------------|------------------------------------|
| 10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems? VILLAGE OF FREEPORT, NY | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Will the proposed action create a hazard to environmental resources or human health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

| | |
|--|--|
| <input type="checkbox"/> | Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required. |
| <input type="checkbox"/> | Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts. |
| _____ | _____ |
| Name of Lead Agency | Date |
| _____ | _____ |
| Print or Type Name of Responsible Officer in Lead Agency | Title of Responsible Officer |
| _____ | _____ |
| Signature of Responsible Officer in Lead Agency | Signature of Preparer (if different from Responsible Officer) |

RECEIVED DEPARTMENT OF BUILDINGS

OF THE VILLAGE OF FREEPORT, N.Y.

APPLICATION NO. 20254333

MAY 2025 JUL 21 P 2:34

Filing Date 4-23-2025

5/13/26

Application for Erection of Buildings or Alterations

IMPORTANT - Applicant to complete all items in sections: I, II, III, IV, V

I. LOCATION OF BUILDING

AT (LOCATION) 52 Hillside Ave Freeport NY 11520 ZONING DISTRICT Res. Zone A-

BETWEEN Rutland Rd AND Frederick Ave.

SECTION 55 BLOCK 242 LOT 7 APPROX. LOT SIZE 50 X 150 LOT AREA 7,500 S.F.

II. TYPE AND COST OF BUILDING - All applicants complete Parts A & B.

A. TYPE OF IMPROVEMENT

1 New building

2 Addition/Alteration (If residential, enter number of new housing units added. If non-res. name _____)

3 Swimming Pool

4 Repair (replacement)

5 Bulkhead (New, Repair)

6 Fence

7 Moving (relaxation)

B. PROPOSED OR EXISTING USE

RESIDENTIAL

11 One Family

12 Two families

13 Apartment - Enter No. of Units _____

14 Transient hotel, motel, or dormitory - Enter No. of Units _____

15 Garage or Accessory Structure

16 Other - Specify _____

NON-RESIDENTIAL - Complete Part "E"

17 Industrial

18 Office, bank, professional

19 Store, mercantile

20 Church, other religious

21 Hospital, institutional

22 Other - Specify _____

C. COST

10 TOTAL COST OF IMPROVEMENT \$15,000.

D. DESCRIPTION OF PROJECT

- Extension concrete Driveway (445 S.F.).

- Repavement existing concrete Driveway (1,399 S.F.).

- Concrete Patio 566 S.F.).

- Cellar Entrance.

III. IDENTIFICATION - To be completed by all applicants

| | NAME | MAILING ADDRESS - Number, street, city and state, Zip | TEL. NO. |
|--------------------------|---|--|--------------------|
| 1. Owner or Lessee | Edwin Marmol Nunez. | 56 Hillside Ave, Freeport, NY 11520 516 | 5215659 |
| 2. Contractor | KDA Construction Corp. Rudame de Jesus. | 121 Frederick Avenue, Bellmore NY 11710 516 | 3606352 |
| 3. Architect or Engineer | GM Architectural Studio PC HOPE Drafting & E.C. LLC. and Expedition | 71 Bluebird Ln, Plainview NY 11803 516 125 Cortland St, Copiague NY 11726 917 | 5280656 2517614 |

IV. OWNER - CONTRACTOR STATEMENT

Building permit is issued subject to the provisions of Section 67 of the Workmen's Compensation Law.

Workmen's Compensation Certificate No. _____ Company _____ Exp. Date _____

Contractor or Owner KDA Construction Corp.

(Print)

Address 121 Frederick Ave, Bellmore NY

Phone 516 531 5653. 11710.

State of New York

County of Nassau

Edwin Marmol Nunez being duly sworn, says that He is the contractor or owner of the above mentioned building. That the terms of the above application also the estimate cost of said building or alteration, is correct to the best of His knowledge and belief and agrees to conform to all applicable laws of this jurisdiction.

Sworn to before me this 01 day

of May, 2025

[Signature]
Notary Public,
County, N.Y.

[Signature]
(Applicant Signature)

V. FLOOD ZONE

IS PROJECT LOCATED WITHIN A DESIGNATED FLOOD HAZARD ZONE? YES NO

IF YES, WHICH ZONE? _____

IS PROJECT TO REPAIR FLOOD DAMAGE? YES NO

PROJECT DESCRIPTION

Total/First Flr Square Feet 1448

Upper Flr Square Feet 400

of Fixtures _____

of Floors _____

Occup. Type Res A.

LEANDRO FIRPO
Notary Public - State of New York
NO. 01F16189540
Qualified in Suffolk County
My Commission Expires 6/15/25

VI. VALIDATION (Official Use Only)

Building Permit Number _____

Building Permit Issued _____

Building Permit Fee \$ _____

Approved by: _____

Superintendent of Buildings

6315756254

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DOB APPLICATION #:
20243962



S.W. VIEW (FRONT)



N. W. VIEW (SIDE)



S. E. VIEW (SIDE)



N. E. VIEW (BACK)

SUBJECT PARCEL:
52 HILLSIDE AVE,
FREEPORT, NY 11520

RECEIVED

DOB APPLICATION #:
20243962

2025 JUL 21 P 2: SUBJECT PARCEL:
52 HILLSIDE AVE,
VILLAGE OF FREEPORT, FREEPORT, NY 11520

CLERK'S OFFICE
VILLAGE OF FREEPORT

346 S.F. CONCRETE
AREA TO BE
REPLACED WITH
GRASS

EXISTING
S.W. VIEW (FRONT)



PROPOSED 346 S.F. GRASS AREA

PROPOSED (RENDER)
S.W. VIEW (FRONT)



RECEIVED

DOB APPLICATION #:
20243962

SUBJECT PARCEL:
52 HILLSIDE AVE,
FREEPORT, NY 11520

2025 JUL 21 P 2:34
CLERK'S OFFICE
VILLAGE OF FREEPORT, NY



346 S.F. CONCRETE
AREA TO BE
REPLACED WITH
GRASS

EXISTING
S.W. VIEW (FRONT)



PROPOSED 346 S.F. GRASS AREA

PROPOSED (RENDER)
S.W. VIEW (FRONT)

DCB APPLICATION #:
20243962

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2025 JUL 21 P 2:34

MAINTAIN CONCRETE PAVER DRIVEWAY



MAINTAIN CONCRETE PATIO



346 S.F. CONCRETE
AREA TO BE
REPLACED WITH
GRASS



BRUSHED CONCRETE

8 IN X 4 IN. X 1.75 IN.
CHARCOAL CONCRETE HOLLAND PAVER
BRUSHED CONCRETE WITH
CHARCOAL CONCRETE HOLLAND PAVER

MAINTAIN CELLAR ENTRANCE



VILANO 3 FT.H
VINYL WHITE RAILING KIT.
VINYL WHITE RAILING
POST SLEEVE KIT
BULLNOSE COPING RECTANGULAR
CHARCOAL
ALASKA GRAY LEDGER PANEL 6IN. X24 IN.
SPLITFACE MARBLE WALL TILE

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JUL 21 P 2:34

CLERK'S OFFICE
TOWN OF FREEPORT, NY

DOB APPLICATION #:
20243962



48 HILLSIDE AVE, FREEPORT, NY 11520
NEXT TO SUBJECT PARCEL (RIGHT)



44 HILLSIDE AVE, FREEPORT, NY 11520
NEXT TO SUBJECT PARCEL (RIGHT)



56 HILLSIDE AVE, FREEPORT, NY 11520
NEXT TO SUBJECT PARCEL (LEFT)



60 HILLSIDE AVE, FREEPORT, NY 11520
NEXT TO SUBJECT PARCEL (LEFT)

DOB APPLICATION #:
20243962



53 HILLSIDE AVE, FREEPORT, NY 11520
IN FRONT OF SUBJECT PARCEL



47 HILLSIDE AVE, FREEPORT, NY 11520
IN FRONT OF SUBJECT PARCEL



57 HILLSIDE AVE, FREEPORT, NY 11520
IN FRONT OF SUBJECT PARCEL

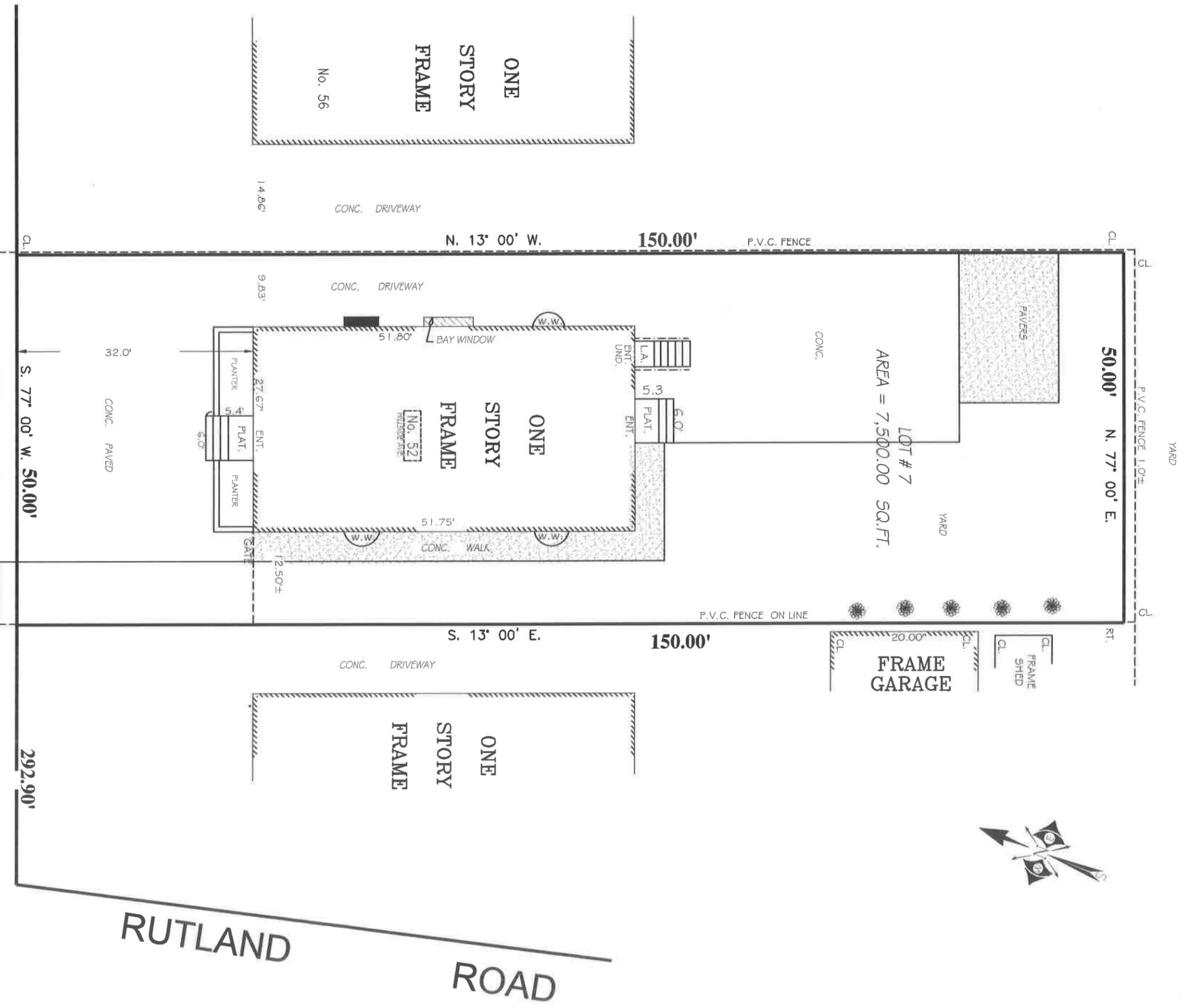
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CLERK'S OFFICE
VILLAGE OF FREEPORT, NY

- GAS VALVE
- PARKING METER
- TRAFFIC SIGN
- HYDRANT
- TREE
- LIGHT POST
- CATCH BASIN
- UTILITY POLE
- PHONE
- WATER VALVE
- DWS
- WATER
- TELEPHONE MANHOLE
- SEWER MANHOLE
- ELECTRIC MANHOLE

LEGEND
(FOR TITLE PURPOSES)
JOB # N-HILLSIDE-24



HILLSIDE AVENUE
(30'± WIDE ASPHALT ROADWAY)
(50' WIDE)

UNAUTHORIZED ALTERATIONS OR ADDITIONS TO THIS SURVEY IS A VIOLATION OF SECTION 7209 OF THE NEW YORK STATE EDUCATION LAW. COPIES OF THIS SURVEY MAP NOT BEARING THE LAND SURVEYOR'S INKED SEAL OR EMBOSSED SEAL SHALL NOT BE CONSIDERED TO BE A VALID TRUE COPY. GUARANTEES OR CERTIFICATIONS INDICATED HEREON SHALL RUN ONLY TO THE PERSON FOR WHOM THE SURVEY IS PREPARED, AND ON HIS BEHALF TO THE TITLE COMPANY, GOVERNMENTAL AGENCY AND LENDING INSTITUTION LISTED HEREON, AND TO THE ASSIGNEES OF THE LENDING INSTITUTION. GUARANTEES OR CERTIFICATION ARE NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS.

BLOCK: 242
LOT (s): 7 sec. 55
COUNTY: NASSAU
DWG BY: AAA



APPLE SURVEYING

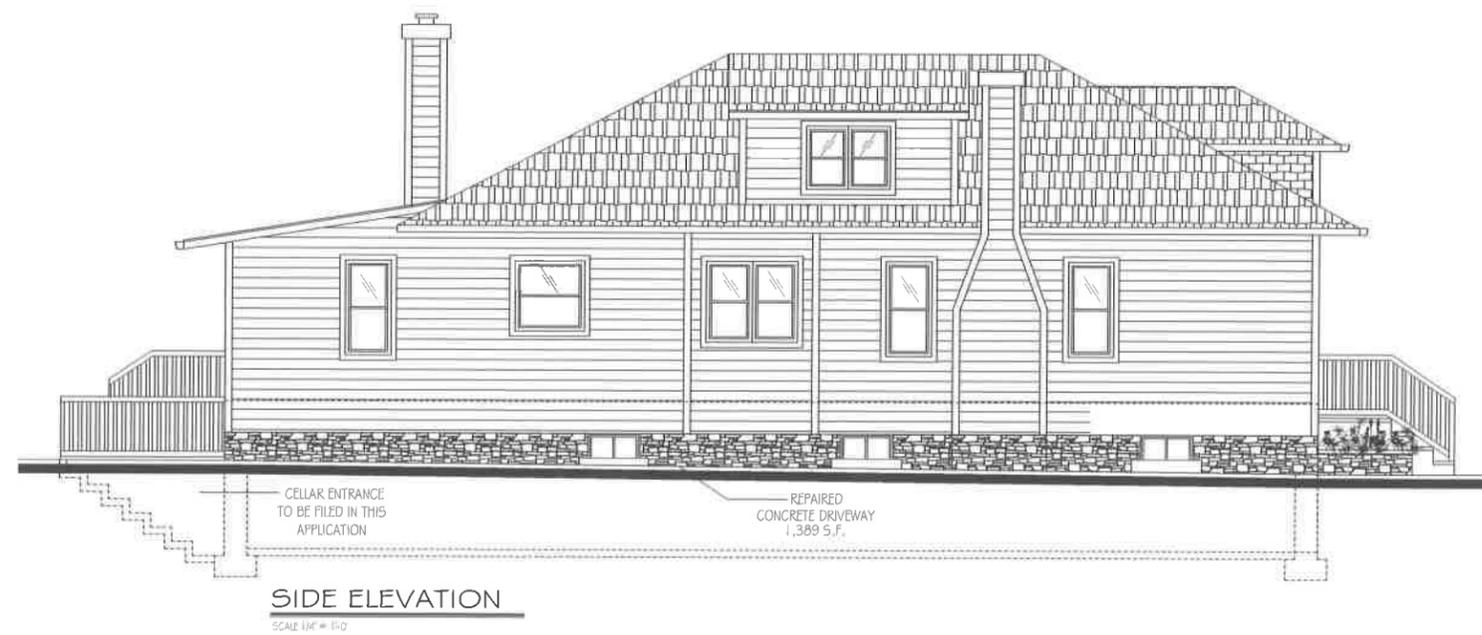
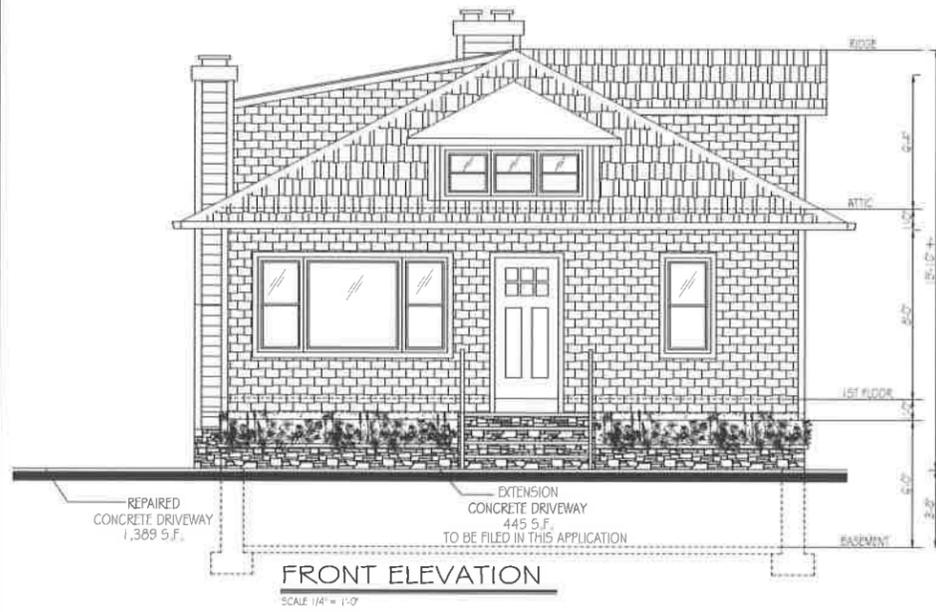
16 FLAG PLACE
STATEN ISLAND, N.Y. 10304
TEL: (718) 980-5600
VIGER04@GMAIL.COM

SURVEYED
SEPT. 7, 2024
LOCATION SURVEY

RECEIVED
2024 SEP 21 P 2:35
SURVEYOR'S OFFICE
STATE OF NEW YORK



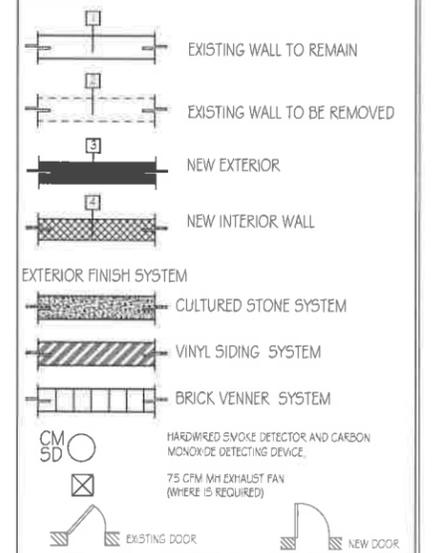
- CLEAR
- L.A.
- LOW AREA
- WINDOW WELL
- W.W.
- CELLAR DOOR
- G.D.
- LEGEND
- F.E.
- FIRE ESCAPE
- ENTLND.
- ENT. UNDER
- AREAWAY
- RT.
- RIGHT



PROPERTY LOCATION:

52 HILLSIDE AVE
FREEPORT, NY 11520

LEGEND:



REVISIONS

ARCHITECTURAL STUDIO, P.C.
GUSTAVO MUNOZ
71 BLUEBIRD LANE
PLAINVIEW, NY, 11803
(516)528-0656
munozgustavo50@gmail.com
HOPE DRAFTING SVC
BEATRIZ E FIRPO
125 CORTLAND STREET
COPIAGUE, NY, 11726
(631)575-6254
(917)251-7614
hopedraftingsvc@gmail.com

DRAWING NAME:

ELEVATIONS

STAMP A./E.:

DATE:



DRAWING No:

A-101.00

DATE:
07/16/2025

PAGE No:
2 OF 3

DOB STAMP:

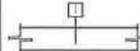
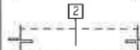
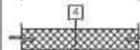
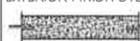
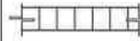
DOB APPLICATION #:

20243962

PROPERTY LOCATION:

52 HILLSIDE AVE
FREEPORT, NY 11520

LEGEND:

-  EXISTING WALL TO REMAIN
 -  EXISTING WALL TO BE REMOVED
 -  NEW EXTERIOR
 -  NEW INTERIOR WALL
- EXTERIOR FINISH SYSTEM
-  CULTURED STONE SYSTEM
 -  VINYL SIDING SYSTEM
 -  BRICK VANNER SYSTEM
- CM
SD
-  HARDWIRED SMOKE DETECTOR AND CARBON MONOXIDE DETECTING DEVICE.
 -  75 CFM M/H EXHAUST FAN (WHERE IS REQUIRED)
-  EXISTING DOOR
-  NEW DOOR

REVISIONS

ARCHITECTURAL STUDIO, P.C.
GUSTAVO MUNOZ
71 BLUEBIRD LANE
PLAINVIEW, NY, 11803
(516)528-0656
munozgustavo50@gmail.com

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BEATRIZ E FIRPO
125 CORTLAND STREET
COPIAGUE, NY, 11726
(631)575-6254
(917)251-7614
hopedraftingsvc@gmail.com

DRAWING NAME:

CELLAR FLOOR PLAN
CELLAR ENTRANCE DETAIL

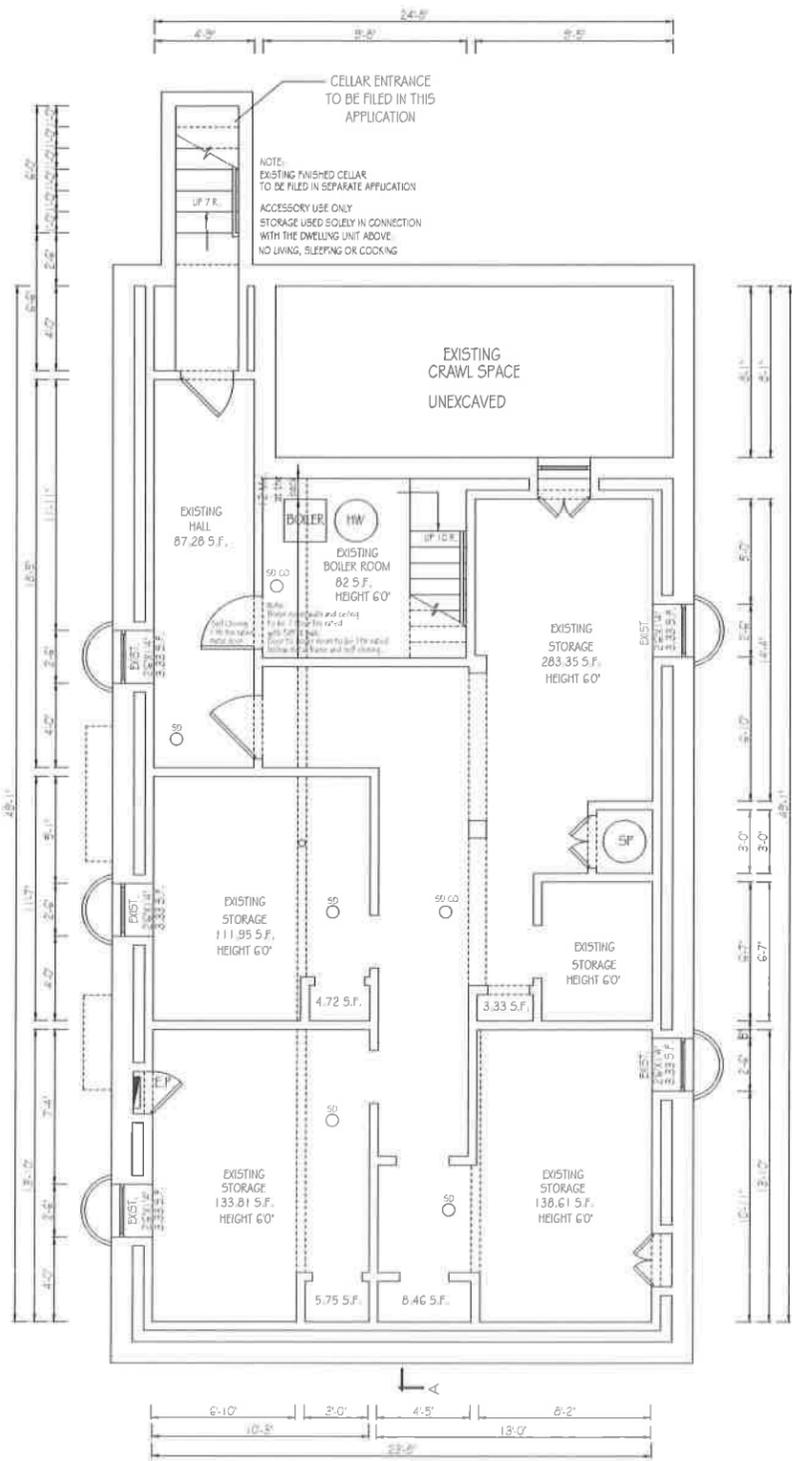
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DRAWING No:
A-102.00

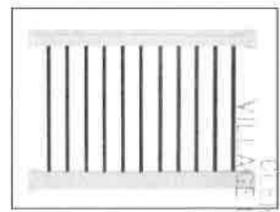
DATE: 07/16/2025 PAGE No: 3 OF 3

DOB STAMP:

DOB APPLICATION #:
20243962

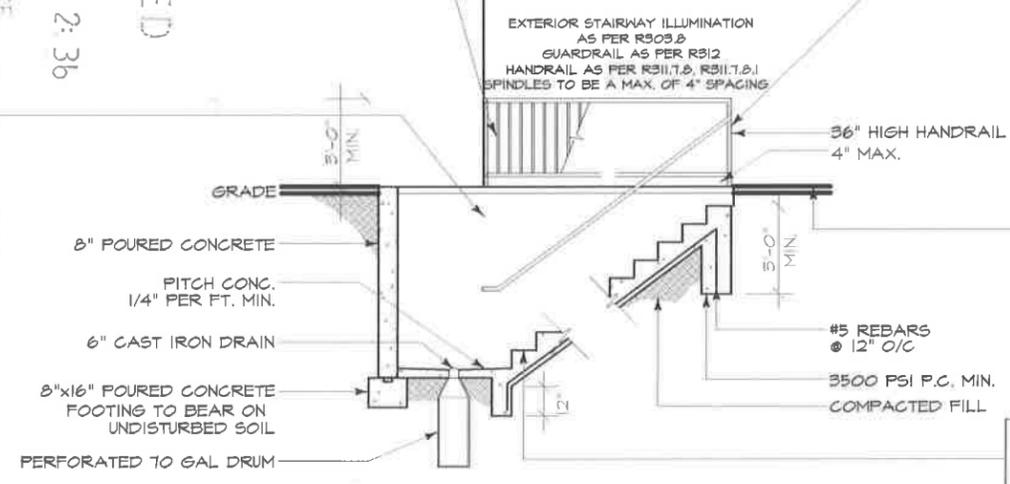


VILANO 3 FT.H VINYL WHITE RAILING KIT.



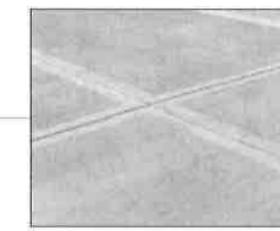
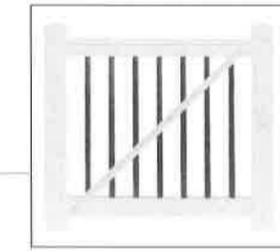
ALASKA GRAY LEDGER PANEL 6 IN. X 24 IN. SPLITFACE MARBLE WALL TILE

2025 JUL 21 P 2:36
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CUSTOMER'S OFFICE
VILLAGE OF FREEPORT



CELLAR ENTRANCE DETAIL
SCALE = NTS

VILANO 3 FT.H VINYL WHITE RAILING GATE KIT.



BRUSHED CONCRETE PATIO



BULLNOSE COPING RECTANGULAR CHARCOAL

CELLAR FLOOR PLAN
ACCESSORY USE ONLY
(SEPARATE APPLICATION)

UNFINISHED AREA 82 S.F.
STORAGE FINISHED AREA 866 S.F.
HEIGHT 6'0"

Application Date: 7/28/25
Fees Paid: \$200.00

SP# 3848

**INCORPORATED VILLAGE OF FREEPORT
SITE PLAN REVIEW APPLICATION
PLANNING BOARD**

NOTE: ACCEPTANCE OF THIS APPLICATION BY THE VILLAGE CLERK'S OFFICE DOES NOT CONSTITUTE A COMPLETE APPLICATION

PROPERTY ADDRESS: 411 GUY LOMBARDO AVE ZONING DISTRICT RES-A
SECTION 62 BLOCK 88 LOT 50 LOT SIZE: _____

| | | | |
|--|--|--|-----------------------|
| <input type="checkbox"/> TENANT | <input checked="" type="checkbox"/> APPLICANT | <input type="checkbox"/> LESSEE | PROPERTY OWNER |
| Name: <u>MARCELO KOHAN</u> | | Name: <u>NUSRA SHOVA</u> | |
| Address: <u>2963 HOLIDAY PARK DR. MERRICK NY 11566</u> | | Address: <u>411 GUY LOMBARDO AVE FREEPORT NY 11520</u> | |
| Telephone #: <u>516-378-2178</u> | | Telephone #: <u>347-975-2525</u> | |

Attorney Name: _____ Address: _____
(optional) Phone #: _____

Present Land Use: RESIDENTIAL Proposed Land Use: RESIDENTIAL

Description of Proposed Work: PROPOSED 40' WIDE BY 4' HIGH OPEN METAL FENCE W/ 3 OPEN METAL GATES

I request a preliminary meeting: _____ YES NO

I request a waiver of the public hearing and hereby certify the following:
A. The subject property is zoned Residence A or Residence AA.
B. The proposed construction is not a new building or dwelling.
C. It is my belief that the criteria contained in §209-7 of the Code of the Incorporated Village of Freeport are satisfied.
_____ YES NO

RECEIVED
CLERK'S OFFICE
VILLAGE OF FREEPORT NY
2025 JUL 29 P 5:10

[Signature]
APPLICANT'S SIGNATURE
Sworn to before me this 25
day of July, 2025
[Signature]
Notary Public

7/28/25 DATE
PARMANAND SHIVPAL
Notary Public - State of New York
NO. 01SH6004437
Qualified in Queens County
My Commission Expires 3-23-2026

Property Owner's Consent:
I, _____ am (are) the owner(s) of the subject property and consent to the filing of this application.

[Signature]
PROPERTY OWNER'S SIGNATURE
Sworn to before me this 25
day of July, 2025
[Signature]
Notary Public

7/28/25 DATE
PARMANAND SHIVPAL
Notary Public - State of New York
NO. 01SH6004437
Qualified in Queens County
My Commission Expires 3-23-2026

FOR VILLAGE USE ONLY

Site Plan Public _____ Date of Hearing: _____
Hearing Required: _____ YES _____ NO Date of Decision: _____
Village Clerk's Signature: _____ Date: _____
Planning Board Signature: _____ Date: _____
Approved _____ Denied _____



INC. VILLAGE OF FREEPORT

Department of Buildings

46 NORTH OCEAN AVENUE
FREEPORT, NEW YORK 11520
(516) 377-2242
FAX (516) 377-2493

ROBERT T. KENNEDY
MAYOR

E-MAIL BUILDINGDEPT@FREEPORTNY.GOV

SERGIO A. MAURAS
SUPERINTENDENT OF BUILDINGS

SITE PLAN LETTER
July 25, 2025

Nusrat Shova
411 Guy Lombardo Ave
Freeport, NY 11520

RE: 411 Guy Lombardo Ave, Freeport, NY
Zoning District – Residence A Sec. 62 Blk. 88 Lot 50
Building Permit Application #20243997

Description: Proposed 40' by 4' H open metal fence with 2 double gates and 1 walkthrough gate.

Dear Sir/Madam

The above referenced application was initially reviewed by the Building Department and it has been determined that in order to proceed with the application process, additional approval from the Site Plan Review Board will be required.

For your convenience, we have enclosed the instructions, application, Building Department letters/documents, the Environmental Assessment form, and the Negative Declaration page pertaining to your building application. Please call the Village Clerk's Office at 516-377-3632 to make an appointment, during normal business hours, to review the completed application. Changes or additional information may be required for the application; therefore, only **ONE** complete package of the twelve (12) sets should be brought in for the initial appointment with the Clerk's Office. Only after this initial appointment should the additional copies be made.

Be further advised that you must submit an application to the Site Plan Review Board within sixty (60) days of the date of this letter. In the event that you do not file an application within the allotted sixty (60) days, this letter will expire and the Building Permit Application in conjunction with same will be cancelled. Subsequently, a new Building Permit Application and filing fees will be required.

If you should have any questions or require any additional information with reference to the Site Plan Review Board Application, please call the VILLAGE CLERK'S OFFICE at 377-3632.

Very truly yours,

Sergio A. Mauras
Superintendent of Buildings
/Daniela Hernandez
cc: Village Clerk
ZBA Approval Needed: NO

VILLAGE OF FREEPORT
Department of Buildings
Recommendation

Notice

X Negative Declaration

Positive Declaration

In accordance with Section 8-0113, Article 8 of the New York Environmental Conservation Law and Chapter 110 of the Village Code, this Department has conducted an initial review to determine whether the following project may have a significant effect on the environment and on the basis of that review hereby finds:

X The proposed project will not have a significant effect on the environment and therefore does not require the preparation of an Environmental Impact Statement.

— The proposed project may have a significant effect on the environment and therefore requires the preparation of an Environmental Impact Statement.
(See reasons below)

Project:

Building Permit App. 20243997

Location: 411 Guy Lombardo Ave, Freeport, NY 11520

Applicant: Nusral Shova

Description: Proposed 40' by 4' H open metal fence with 2 double gates and 1 walkthrough gate.

Lead Agency: Department of Buildings
for the Board of Trustees
Village of Freeport
46 North Ocean Avenue, Freeport, NY

Agency Contact Person:
Superintendent of Buildings
(516) 377-2242

REASON(S) FOR DETERMINATION

This finding is based upon Section 617.10 of Article of the New York Environmental Conservation Law, the criteria for determining what actions may have a significant effect on the environment, as follows:

A) _____

B) Possible environment effects identified:
(only if positive determination)

Dated: July 25, 2025

Sergio A. Mauras

Sergio A. Mauras
Superintendent of Buildings

IMPORTANT: This declaration and supporting attachments are open for inspection and public response at the office of the Superintendent of Buildings.

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VILLAGE OF FREEPORT
DEPARTMENT OF BUILDINGS
46 NORTH OCEAN AVENUE
FREEPORT, NY

617.20
Appendix B
Short Environmental Assessment Form

OCT 25 2024

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.

| | | | |
|--|--|-------------------------------------|---------------------------|
| Part 1 - Project and Sponsor Information | | | |
| Name of Action or Project: FENCE | | | |
| Project Location (describe, and attach a location map): 411 GUY LAMBARDO AVE FREEPORT NY 11502 | | | |
| Brief Description of Proposed Action: BUILDING A 76 FT LONG BY 4 FT H OPEN METAL FENCE WITH 2 13 FT GATE AT THE FRONT OF MY HOUSE. THE REASON FOR THIS IS TO KEEP MY NEPHEW AND NIECE WHO ARE ARTISTIC KIDS INSIDE THE GATE. | | | |
| Name of Applicant or Sponsor: NUSRAT SHOVA | | Telephone: 347 975-2525 | |
| | | E-Mail: NSHIVPAL@GMAIL.COM | |
| Address: 411 GUY LOMBARDO AVE FREEPORT NY 11520 | | | |
| City, PO: | | State: NY | Zip Code: 11520 |
| 1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? | | NO | YES |
| 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. | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the proposed action require a permit, approval or funding from any other governmental Agency? | | NO | YES |
| If Yes, list agency(s) name and permit or approval: | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3.a. Total acreage of the site of the proposed action? | | 0.17 | acres |
| b. Total acreage to be physically disturbed? | | 0.17 | acres |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? | | 0.17 | acres |
| 4. Check all land uses that occur on, adjoining and near the proposed action. | | | |
| <input checked="" type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) | | | |
| <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input checked="" type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ | | | |
| <input checked="" type="checkbox"/> Parkland | | | |

| | NO | YES | N/A |
|---|----|-----|-----|
| 5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan? | | | / |
| OCT 25 2024 | | | |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? | NO | YES | / |
| 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____ | NO | YES | / |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation service(s) available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action? | NO | YES | / |
| 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ | NO | YES | / |
| 10. Will the proposed action connect to an existing public/private water supply? [If Yes, does the existing system have capacity to provide service? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing potable water: _____ | NO | YES | / |
| 11. Will the proposed action connect to existing wastewater utilities? [If Yes, does the existing system have capacity to provide service? <input type="checkbox"/> NO <input type="checkbox"/> YES] If No, describe method for providing wastewater treatment: _____ | NO | YES | / |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area? | NO | YES | / |
| 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? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ | NO | YES | / |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban | | | |
| 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 | / |
| 16. Is the project site located in the 100 year flood plain? | NO | YES | / |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ <input type="checkbox"/> NO <input type="checkbox"/> YES | NO | YES | / |

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| | | |
|--|------------------------|-----|
| 18. Does the proposed action include construction or other activities that result in the introduction of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____ _____ | NO | YES |
| / | | |
| 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: _____ _____ _____ | NO | YES |
| / | | |
| 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: _____ _____ _____ | NO | YES |
| / | | |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. | | |
| Applicant/sponsor name: <u>MUSRAT Shouva</u> | Date: <u>10/9/2024</u> | |
| Signature: <u>Musrat Shouva</u> | | |

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------|------------------------------------|
| 1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations? | / | |
| 2. Will the proposed action result in a change in the use or intensity of use of land? | / | |
| 3. Will the proposed action impair the character or quality of the existing community? | / | |
| 4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)? | / | |
| 5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway? | / | |
| 6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities? | / | |
| 7. Will the proposed action impact existing: | | |
| a. public / private water supplies? | / | |
| b. public / private wastewater treatment utilities? | / | |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources? | / | |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)? | / | |

OCT 25 2024

| | |
|-------------------------------|------------------------------------|
| No, or small impact may occur | Moderate to large impact may occur |
|-------------------------------|------------------------------------|

| | | |
|---|---|--|
| 10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems? | / | |
| 11. Will the proposed action create a hazard to environmental resources or human health? | / | |

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

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 VILLAGE OF FREEBORO, NY

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

MUSRAT Shova _____ Date 10/9/2024

Name of Lead Agency

MUSRAT Shova _____ Title of Responsible Officer OWNER

Print or Type Name of Responsible Officer in Lead Agency

Musrat Shova _____ Signature of Preparer (if different from Responsible Officer)

Signature of Responsible Officer in Lead Agency



411 GUY LOMBARDO AVE, FREEPORT, NY 11520

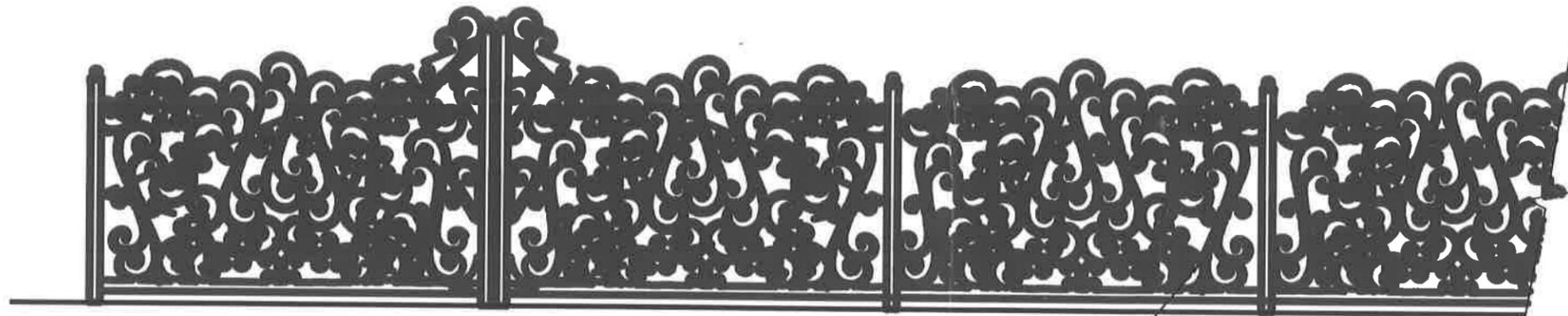


411 Guy Lombardo



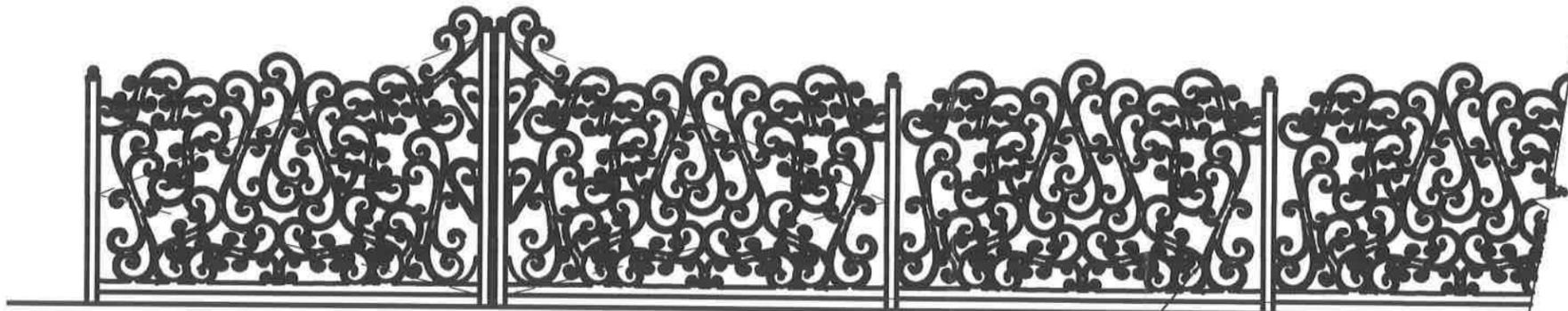
VILLE 2025





NEW 4' HIGH OPEN
METAL FENCE,
COLOR: BRONZE

Partial Fence Elevation 'A'
NTS



NEW 4' HIGH OPEN
METAL FENCE,
COLOR: BLACK

Partial Fence Elevation 'B'
NTS

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OLIVIA'S OFFICE
VILLAGE OF FREEPORT, NY

 **Delargent Design
Architecture, PC**
Marcelo Kohan, R.A., AIA
Phone: 516.378.2178
Email: mak@delargentdesign.com

SHOVA'S RESIDENCE
411 Guy Lombardo Ave.
Freeport, NY
FENCE ELEVATION

Date: 7/15/25
F-1

SHOVA'S RESIDENCE

411 Guy Lombardo Ave., Freeport, NY 11520



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DOB APPROVAL

PROJECT INFORMATION

Shova's Residence
411 Guy Lombardo Ave.,
Freeport, NY, 11520

SECTION: 62
BLOCK: 88
TAX LOT(S): 50

SUBMISSIONS

| No. | DATE | DESCRIPTION |
|-----|-----------|----------------------|
| 1 | 12/1/2024 | FOR DOB HUNG |
| 2 | 7/15/25 | FOR SITE PLAN REVIEW |

KEY PLAN

PROJECT NO: 2426
CAD DWG FILE:
DATE: 07/15/2025
DRAWN BY: MAK
SHEET TITLE

Plot Plan / Zoning Information

| SHEET NUMBER | PAGE NO. |
|--------------|----------|
| A-001.00 | 1 of 2 |

DOB JOB NUMBER

ZONING CALCULATIONS

EXISTING SINGLE FAMILY RESIDENCE

| SEC. | REQUIREMENT | EXISTING / CALCULATION |
|--------|---|--|
| 210-39 | LOT AREA = | 12,000 S.F. |
| 210-39 | MAX. BLDG. HEIGHT; SKY EXPOSURE PLANE | (3) STORIES; 35' |
| | ACTUAL BLDG. HEIGHT = | (2) STORIES; + . 26'-6" < 35' OK |
| 210-40 | MIN. LOT AREA; STREET FRONTAGE; LOT WIDTH | 5,000 S.F.; 50' |
| | ACTUAL LOT AREA; STREET FRONTAGE; LOT WIDTH | 12,000 S.F.; 75' OK |
| 210-41 | MAX. LOT COVERAGE; FLOOR AREA RATIO | 30% + 10% FOR ACCESSORY BLDG. |
| | ACTUAL LOT COVERAGE = | 2,017 SF + 212 (SHED) = 2,229 SF = 18.6% < 30% OK |
| | MAX. FLOOR AREA OF MAIN BUILDING = | 50% OF LOT AREA = 6,000 S.F. |
| | ACTUAL FLOOR AREA = | 1,924 SF (1ST FL) + 1,097 SF (2ND FL) = 3,021 SF |
| 210-42 | ACTUAL FLOOR AREA RATIO = | 3,021 SF x 100 / 12,000 = 25.2% < 50% OK |
| | MINIMUM FLOOR AREA = | 800 SF PER DWELLING UNIT |
| 210-42 | ACTUAL FLOOR AREA = | 3,021 SF. > 800 SF. OK |
| | MINIMUM REQUIRED YARDS = | F.Y. = 20'; R.Y. = 20% MIN OF LOT DEPTH (30'); S.Y. = 5' EA MIN. (25% LOT WIDTH MIN) |
| 210-43 | ACTUAL FRONT YARD = | 60'-8" (EXIST.) OK |
| | ACTUAL REAR YARD = | 54'-9" (EXIST.) OK |
| | ACTUAL SIDE YARDS = 8'-10" + 9'-7" = | 18'-5" (EXIST.) OK |

ZONING DATA

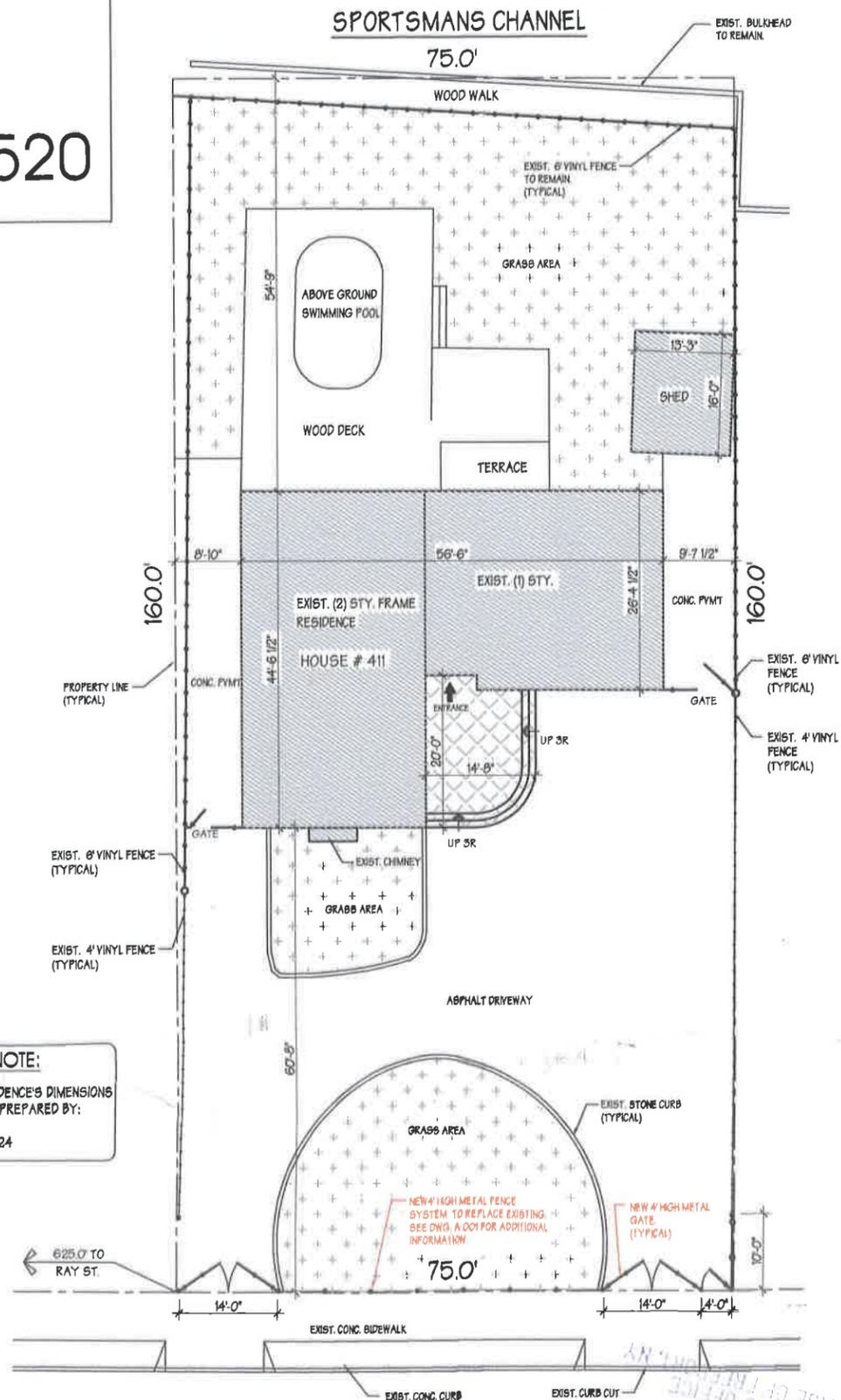
| | |
|---------|---------------------|
| ZONE | RES. DISTRICT 'A' |
| TOWN | VILLAGE OF FREEPORT |
| SECTION | 62 |
| BLOCK | 88 |
| LOT (s) | 50 |
| HOUSE# | 411 |

SCOPE OF WORK

- NEW 4' HIGH FENCE AT FRONT OF PROPERTY.

NOTE:

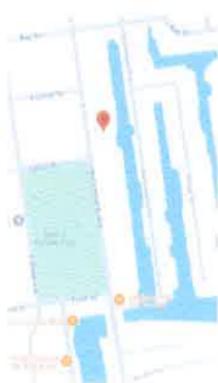
THERE'S NO CHANGE IN THE BUILDING'S BULK OR USE UNDER THIS APPLICATION



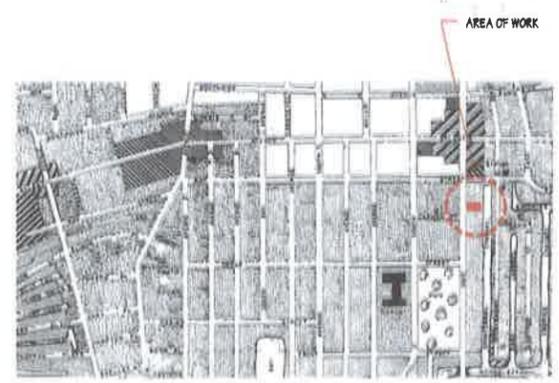
SITE PLAN NOTE:
EXISTING SITE AND RESIDENCE'S DIMENSIONS ARE BASED ON SURVEY PREPARED BY: 'PRECISION SURVEYS', ON SURVEY DATED 11/8/24



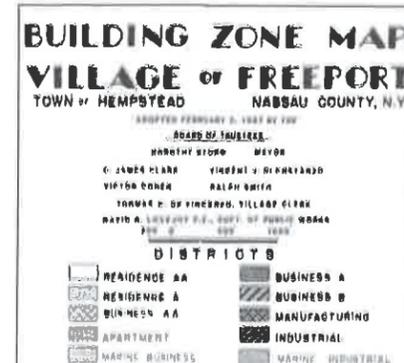
Front View
Not To Scale



Block Diagram
Not To Scale



Zoning Map
Not To Scale



Drawing Index

- A-001 SITE PLAN / ZONING INFORMATION
- A-002 PROPOSED FENCE PLAN, SECTION, ELEVATION AND DETAILS / PROPOSED CONCRETE PLATFORM PLAN AND DETAIL



Site Plan
Scale: 1" = 10'

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DOB APPROVAL

PROJECT INFORMATION
Shova's Residence
 411 Guy Lombardo Ave.,
 Freeport, NY, 11520
 SECTION: 62
 BLOCK: 88
 TAX LOT(s): 50

| SUBMISSIONS | | |
|-------------|----------|----------------------|
| No. | DATE | DESCRIPTION |
| 1 | 12/15/24 | FOR DOB FILING |
| 2 | 7/15/25 | FOR SITE PLAN REVIEW |
| | | |
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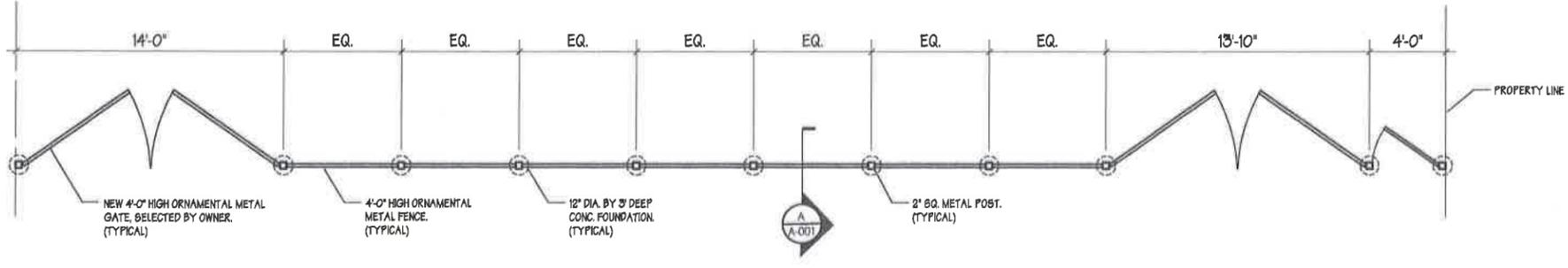
KEY PLAN

PROJECT NO: 2426
 CAD DWG FILE:
 DATE: 12/5/24
 DRAWN BY: MAK

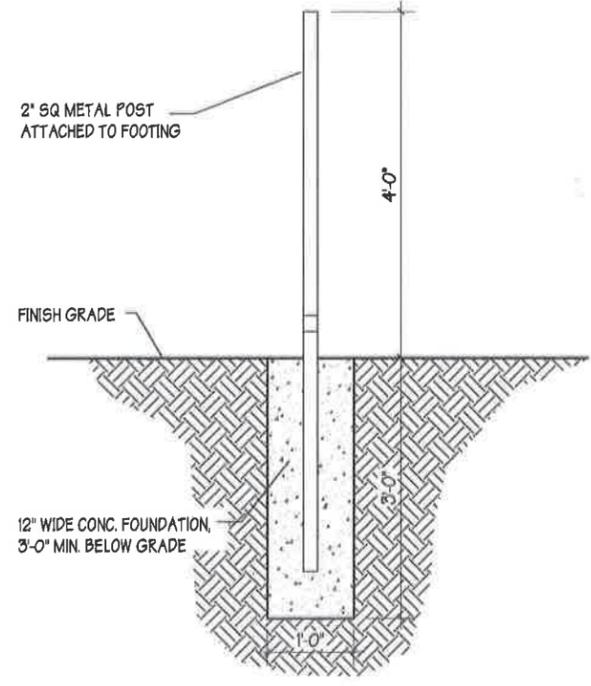
SHEET TITLE
Fence Plan / Section / Elevation

SHEET NUMBER: **A-002.00** PAGE NO: 2 of 2

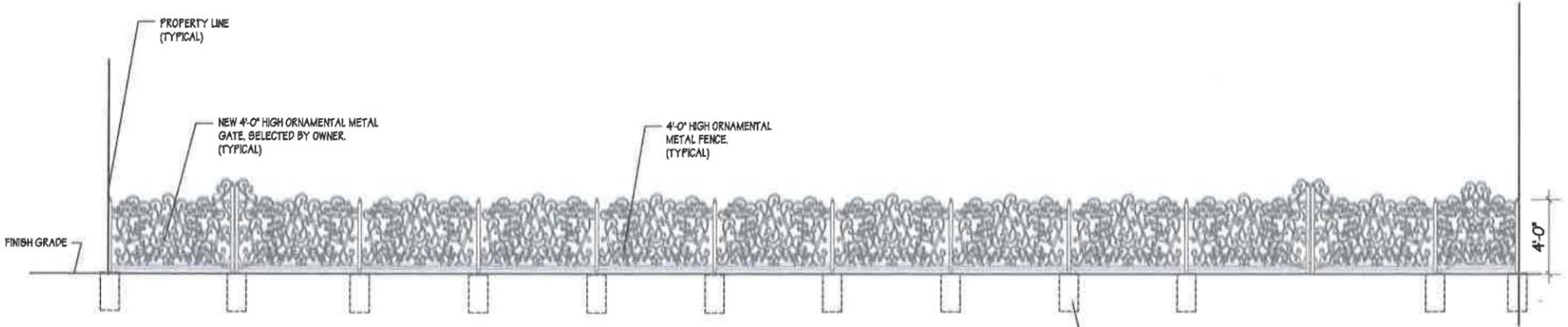
DOB JOB NUMBER



Wrought Iron Fence Plan
 Scale: 1/4" = 1'-0"



Section at Railing
 Scale: 1" = 1'-0"



Fence Elevation
 Scale: 1/4" = 1'-0"

SHOVA'S RESIDENCE

411 Guy Lombardo Ave., Freeport, NY 11520

ZONING CALCULATIONS EXISTING SINGLE FAMILY RESIDENCE

| SEC. | REQUIREMENT | COMPLIANCE |
|-------------|--|--|
| | LOT AREA = | 12,000 S.F. |
| SEC. 210-39 | MAX. BLDG. HEIGHT; SKY EXPOSURE PLANE ACTUAL BLDG. HEIGHT = | (3) STORIES; 35' (2) STORIES; + - 26'-6" < 35' OK |
| SEC. 210-40 | MIN. LOT AREA; STREET FRONTAGE; LOT WIDTH ACTUAL LOT AREA; STREET FRONTAGE; LOT WIDTH | 5,000 S.F.; 50' 12,000 S.F.; 75' OK |
| SEC. 210-41 | MAX. LOT COVERAGE; FLOOR AREA RATIO ACTUAL LOT COVERAGE = MAX. FLOOR AREA OF MAIN BUILDING = ACTUAL FLOOR AREA = ACTUAL FLOOR AREA RATIO = | 30% + 10% FOR ACCESSORY BLDG. 2,017 SF + 212 (SHED) = 2,229 SF = 18.6% < 30% OK 50% OF LOT AREA = 6,000 S.F. 1,924 SF (1ST FL) + 1,097 SF (2ND FL) = 3,021 SF 3,021 SF x 100 / 12,000 = 25.2% < 50% OK |
| SEC. 210-42 | MINIMUM FLOOR AREA = ACTUAL FLOOR AREA = | 800 SF PER DWELLING UNIT 3,021 S.F. > 800 S.F. OK |
| SEC. 210-43 | MINIMUM REQUIRED YARDS = ACTUAL FRONT YARD = ACTUAL REAR YARD = ACTUAL SIDE YARDS = 8'-10" + 9'-7" = | F.Y. = 20'; R.Y. = 20% MIN OF LOT DEPTH (30'); S.Y. = 5' EA MIN. (25% LOT WIDTH MIN.) 60'-8" (EXIST.) OK 54'-9" (EXIST.) OK 18'-5" (EXIST.) OK |

ZONING DATA

| | |
|---------|---------------------|
| ZONE | RES. DISTRICT 'A' |
| TOWN | VILLAGE OF FREEPORT |
| SECTION | 62 |
| BLOCK | 88 |
| LOT (s) | 50 |
| HOUSE# | 411 |

SCOPE OF WORK

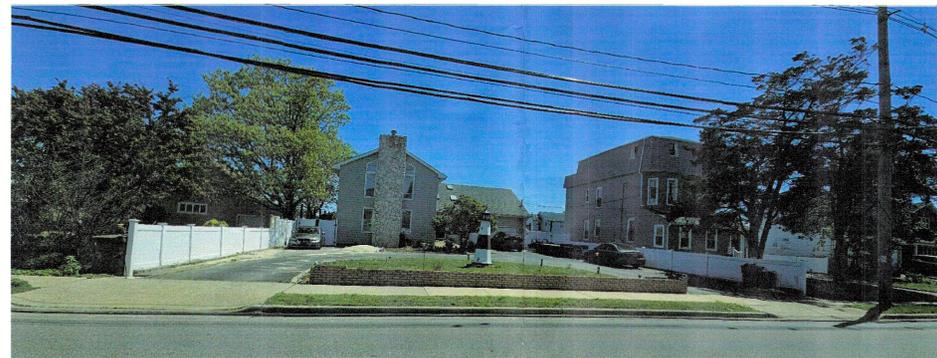
- NEW 4' HIGH FENCE AT FRONT OF PROPERTY.

NOTE:

THERE'S NO CHANGE IN THE BUILDING'S BULK OR USE UNDER THIS APPLICATION

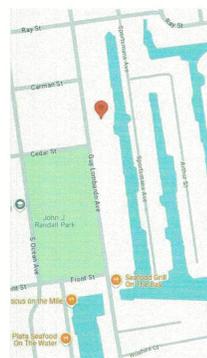
SITE PLAN NOTE:

EXISTING SITE AND RESIDENCE'S DIMENSIONS ARE BASED ON SURVEY PREPARED BY: "PRECISION SURVEYS", ON SURVEY DATED 11/8/24

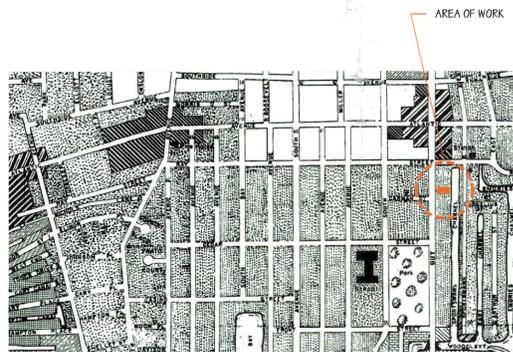


Front View

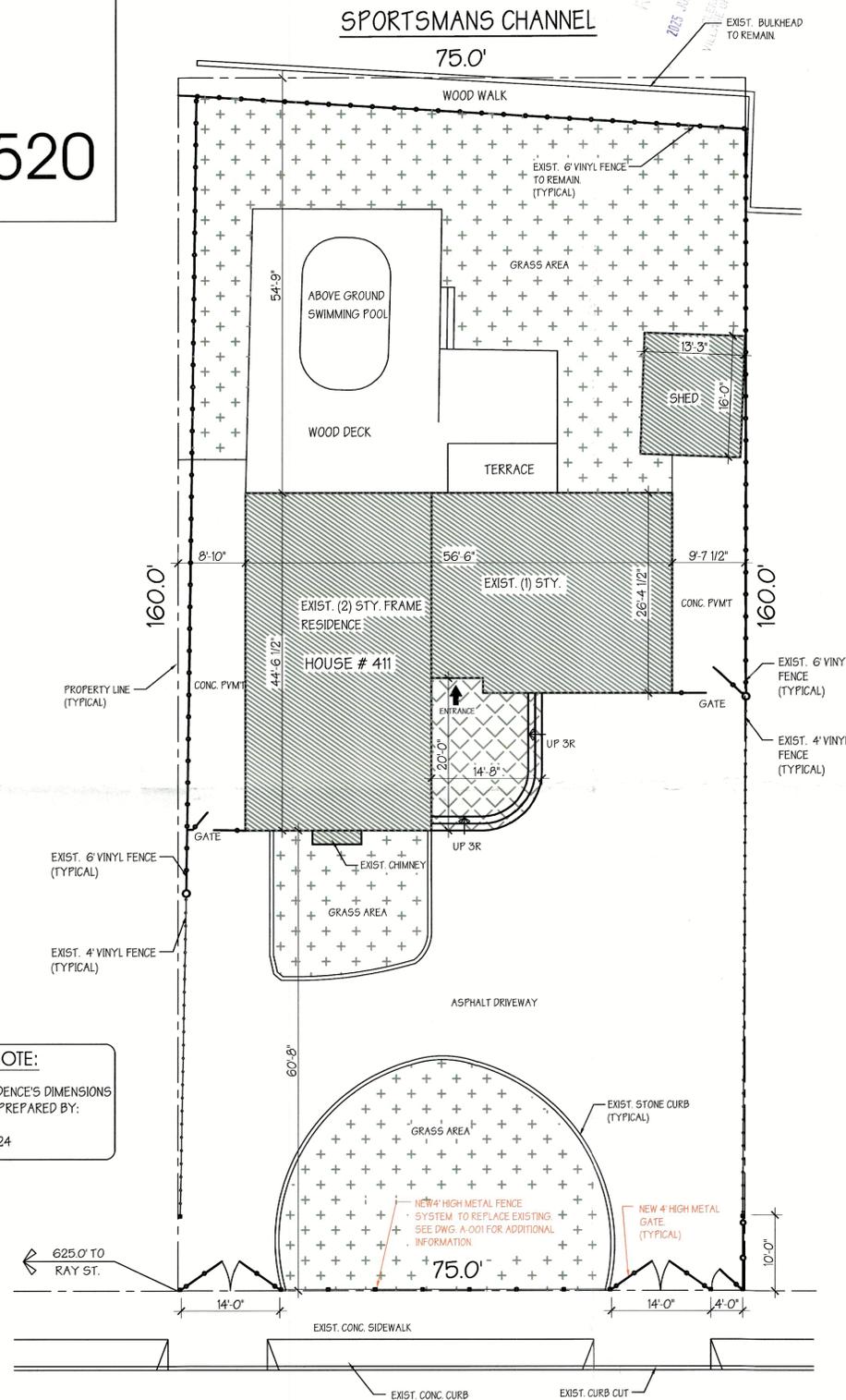
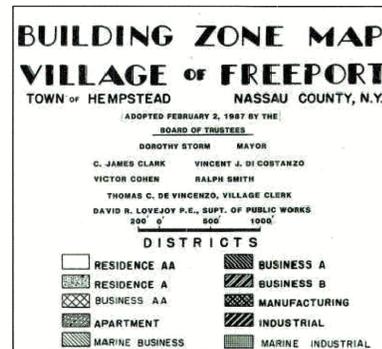
Not To Scale



Block Diagram
Not To Scale



Zoning Map
Not To Scale

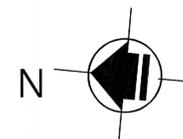


Drawing Index

- A-001 SITE PLAN / ZONING INFORMATION
- A-002 PROPOSED FENCE PLAN, SECTION, ELEVATION AND DETAILS / PROPOSED CONCRETE PLATFORM PLAN AND DETAIL.



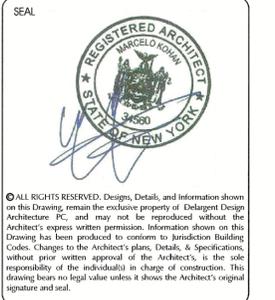
GUY LOMBARDO AVE.
ASPHALT PAVEMENT



Site Plan
Scale: 1" = 10'



**Delargent Design
Architecture, PC**
2963 Holiday Park Drive
Merrick, New York, 11566
Phone: 516.378.2178
Email: mak@delargentdesign.com



DOB APPROVAL

PROJECT INFORMATION
Shova's Residence
411 Guy Lombardo Ave.,
Freeport, NY, 11520

SECTION: 62
BLOCK: 88
TAX LOT(s): 50

| SUBMISSIONS | | |
|-------------|----------|----------------------|
| No. | DATE | DESCRIPTION |
| | 12/12/24 | FOR DOB FILING |
| | 7/15/25 | FOR SITE PLAN REVIEW |

KEY PLAN

PROJECT NO: 2426
CAD DWG FILE:
DATE: 07/15/2025
DRAWN BY: MAK
SHEET TITLE
Plot Plan / Zoning Information
SHEET NUMBER: A-001.00
PAGE NO.: 1 of 2
DOB JOB NUMBER