

NYACK BUILDING AND ZONING DEPARTMENT
9 NORTH BROADWAY . NYACK, NEW YORK 10960
914-358-4249

FOR OFFICE USE ONLY

File No. _____ Date of Application _____
Planning Board Agenda Date _____ Agenda Item No. _____ Fee Paid \$ _____
Date Approved _____ Date Disapproved _____ Date Approved with Conditions _____
Zoning Board of Appeals Agenda Date _____ Appeal No. _____ Fee Paid \$ _____
Date Approved _____ Date Disapproved _____ Date Approved with Conditions _____
If the granting of this permit is subject to conditions established by any board, please attach minutes or a copy of the decision to this application as a part of the final permanent record.

APPLICATION TO THE ZONING BOARD OF APPEALS
APPEAL FOR AN AREA VARIANCE FROM THE ZONING ORDINANCE

ADDRESS OF SUBJECT PROPERTY 99 N. Broadway Nyack NY 10960
ZONING DISTRICT _____ SECTION 66-30 BLOCK 2 LOT 8
EXISTING USE/OCCUPANCY Dental Office
OWNER'S NAME Jacob Wallach
ADDRESS 99 N. Broadway Nyack NY 10960 TELEPHONE 845 358 1728
(IF OWNER IS A CORPORATION): NAME OF CORPORATION LLB Properties LLC
OFFICER Jacob Wallach TITLE Owner

PREVIOUS APPEAL:

HAS A PREVIOUS APPEAL FOR AN AREA VARIANCE FROM THE ZONING ORDINANCE BEEN
MADE WITH REGARD TO ANY DECISION OR DETERMINATION OF THE BUILDING AND
ZONING INSPECTOR WITH RESPECT TO THIS PROPERTY?
☐ YES ☒ NO

DECLARATION OF APPEAL

Whereas, the Board of Appeals, on appeal from the decision or determination of the administrative official charged with the enforcement of local law, shall have the power to grant area variances from the area or dimensional requirements of the local law;

Therefore, I (We), Jacob Wallach, do hereby appeal the decision or determination of the Building and Zoning Inspector in regard to an application for a Building /Zoning Permit dated _____, for the premises known as _____; and I (We) do hereby request that the Board of Appeals grant a Variance from the following provision(s) of the Zoning Ordinance of the Village of Nyack:

Article _____ Section _____ Subsection _____ Paragraph _____ Subparagraph _____
Article _____ Section _____ Subsection _____ Paragraph _____ Subparagraph _____
to permit _____

(DECLARATION CONTINUES ON THE REVERSE SIDE)

and I (We) do hereby attest that the variance requested is the minimum variance that will accomplish this purpose; and I (We), understanding that in making its determination, the Zoning Board of Appeals shall weigh the benefit of the granting of the variance to the applicant against the detrimental effects to the health, safety and welfare of the neighborhood or community; and that the Board, in making such determination, shall also consider the circumstances or conditions which are described herein as applicable under this appeal for an area variance; and that I (We), as applicant for the appeal, intend to offer proof of same by demonstration to the Board of Appeals as to the following:

1. CHARACTER OF THE NEIGHBORHOOD

Whether an undesirable change will be produced in the character of the neighborhood or a detriment to nearby properties will be created by the granting of the area variance. DESCRIBE WHY THE VARIANCE WOULD NOT PRODUCE AN UNDESIRABLE CHANGE OR BE DETRIMENTAL TO NEARBY PROPERTIES:

Sign Approved by ARB, will replace old sign and fit in with esthetics of surrounding signs on street

2. ADVERSE EFFECT OR IMPACT

Whether the proposed variance will have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district. DESCRIBE WHY THE VARIANCE WOULD NOT PRODUCE AN ADVERSE EFFECT OR IMPACT:

Replacing existing sign

3. FEASIBLE ALTERNATIVES

Whether the benefit sought by the applicant can be achieved by some other method, feasible for the applicant to pursue, other than an area variance. DESCRIBE ANY ALTERNATIVES:

None

4. PERCENTAGE OF VARIANCE

Whether the requested area variance is substantial. (EXAMPLE: LOT REQUIRES REAR YARD OF 30 FEET. APPLICANT CAN PROVIDE 25 FEET. THEREFORE, A VARIANCE OF 5 FEET IS NOT SUBSTANTIAL. CALCULATE THE TOTAL EXCEPTION TO AREA WHICH THE VARIANCE WOULD PROVIDE:

N/A

5. DIFFICULTY IN MEETING CODE REQUIREMENTS NOT SELF-CREATED

Whether the alleged difficulty in meeting the requirements of the zoning code is self-created; which consideration shall be relevant to the decision of the Board of Appeals, but shall not necessarily preclude the granting of the area variance. DESCRIBE WHY THE DIFFICULTY IN MEETING THE REQUIREMENTS OF THE CODE IS NOT SELF-CREATED:

N/A

IF UNIQUE PHYSICAL CONDITIONS CONTRIBUTE TO THE HARDSHIP, ANSWER BELOW:

If there are physical conditions applying to the land or buildings for which the variance is sought, which conditions are peculiar to such land or building, and have not resulted from any act of the applicant or any predecessor in title, DESCRIBE SUCH CONDITIONS:

N/A

(PROVIDE SURVEY, METES AND BOUNDS DESCRIPTION, PLOT PLAN AND FLOOR PLANS, AS APPLICABLE, AS PROOF OF SUCH PHYSICAL CONDITIONS).


SIGNATURE OF APPLICANT

DATED: 9/29/2021

Regular Meeting
Architectural Review Board
Nyack Village Hall

September 22, 2021

Present:

Maren Robertson	Chairperson
Laurie Steinhorst	Member
Toma Holley	Member
Scott O'Neill	Member
Greg Healey	Member
Donald Yacopino	Chief Building Inspector
Walter Sevastian	Village Attorney

Call to order: 7:01 pm

1. 99 N. Broadway. Jacob Wallach.

Application to replace existing front yard sign and request from the ARB for a recommendation to the ZBA.

Building Inspector Review:

Although a sign appears on the property, there is no indication in the files maintained by the building department that a permit was issued for its placement or that it has approval from any land use board.

An area variance is required from Article IV, VON §360-4.11E(2)(a) for a freestanding sign in the front yard of a building in the OMU zoning district that is not set back 25 feet from the front lot line. In all other respects, the proposed sign complies with zoning regulations.

Board Review Based Upon:

1. The application.
2. Building Inspector review
3. Testimony of applicant Jacob Wallach
4. ARB members' knowledge of the site
5. Site visits by members
6. No testimony from the public

Board Findings

Conclusion:

1. Having no comment by the public, the public hearing is closed on a motion by Member Robertson, seconded by Member Healey, approved by a vote of 5-0.
2. Motion by Member Steinhorst to approve the application as presented. Seconded by Member Holley, approved by a vote of 5-0.

2. 5 First Avenue. Kier Levesque for Schuster

Application to replace vinyl siding with Hardi Board

Building Inspector Review:

Proposal complies with zoning requirements.

PERMIT EXPIRES TWO (2) YEARS FROM DATE OF ISSUANCE
ONE SIX (6) MONTH EXTENSION MAY BE GRANTED PRIOR TO EXPIRATION DATE

APPLICATION FOR BUILDING / DEMOLITION PERMIT

VILLAGE OF NYACK
9 North Broadway · Nyack, NY 10960
Tel 845-358-4249 · Fax 845-358-0672 · Email: buildingdepartment@nyack-ny.gov

Village of Nyack
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Land Use Board Review

☒ ARB

☐ Planning

☐ ZBA

Permit No

Application Date

Fee Paid

Receipt #

Inspector

File #

Permit Granted For:

Permit Denied For:

*Village Board, Planning Board, Zoning Board, Architectural Review Board decision date:

Property Location:

99 North Broadway Nyack NY 10960

Tax Map Designation:

Section

66.30

Block

2

Lot

86

Property Owner:

LCLB Properties LLC

Cell Phone:

845 641 9729

Address:

99 N. Broadway Nyack NY 10960

Home Phone:

845 641 9729

Email:

NyackDDS@gmail.com

Work Phone:

845 358 1728

Owner/Tenant:

Jacob Wallach

Cell Phone:

845-641-9729

Address:

99 N. Broadway Nyack NY 10960

Work Phone:

845-358-1728

Email:

NyackDDS@gmail.com

Cell Phone:

845-641-9729

Contact Person:

Jacob Wallach

Phone:

845-358-1728

Existing and / or proposed use of structure or land:

Dental office

Project Description

Replace existing sign with new sign in front of
Building

Estimated Construction Value: \$

4225.00

Architect / Engineer: N/A NYS Lic # _____
 Address: _____
 Email: _____ Phone: _____
 Builder / General Contractor: Frohling Sign Company RC Lic # _____
 Address: 711 Executive Blvd Suite G Valley Cottage NY 10989
 Email: brian@froehling-sign.com Phone: 845-623-2258
 Plumber: N/A RC Lic # _____
 Address: _____
 Email: _____ Phone: _____
 Heat / Cooling: N/A RC Lic # _____
 Address: _____
 Email: _____ Phone: _____
 Electrician: N/A RC Lic # _____
 Address: _____
 Email: _____ Phone: _____

ZONING DISTRICT	BULK		
	Required	Existing	Proposed
Coverage			
Floor Area Ratio			
Lot Area			
Lot Width			
Street Frontage			
Front Yard Setback			
Side Yard Setback			
Total Side Yard Setback			
Rear Yard Setback			
Building Height - Feet			
Building Height - Number of Stories			
Residential Density			

Site Plan Application is also being made to the ☐ Planning ☐ Architectural Review Board

AFFIDAVIT

State of New York)

County of Rockland) SS:

Village of Nyack

I, Jacob Wallach, being duly sworn, depose and say that I am the owner (lessee, engineer, surveyor, architect, builder, or agent of the owner) in fee of the premises to which this application applies; that I (the applicant) is duly authorized to make this application and that the statements contained in the papers submitted herein are true to the best of his knowledge and belief, and that the work will be performed in the manner of set forth in the application and in the plans and specification filed therewith, and in accordance with State Uniform Building Code and all other applicable laws, ordinances and regulations of the municipality. I also declare that the structure or area described in this application will not be occupied or used until I have obtained a Certificate of Occupancy.

Signature and Mailing Address

Jacob Wallach
99 N Broadway
Nyack NY 10960

SWORN to before me this

19th day of August, 2021

Witness:

If not witnessed by Building Department personnel, Notary signature is required.

Notary Public

APPLICATION INSTRUCTIONS

(See additional requirements when applying to land use Board)

1. In making this application, submit the following:
 - a. One (1) copy of this form.
 - b. Two (2) set of building plans for an internal building permit (only needing for building inspectors approval only or Ten (10) for Planning or Nine (9) for ARB or Nine (9) for ZBA
 - c. Two (2) copies of the plot plans.
 - d. Copy of Rockland County licenses. (For each trade)
 - e. Certificate of Liability, Certificate of Workman's Compensation, and Disability Benefits Insurance or Owner's affidavit. (For each trade)
2. Plot plans drawn to scale, shall show area, dimension, and location of lot; size and exact location of proposed structures, additions or alterations; all existing structures, all existing structures on lot; streets, curbs, sidewalks, parking spaces driveway; yards and setback; and such other information as may be necessary.
3. Building Plans drawn to scale shall show structural details, floor plans, elevation, plumbing, electrical, heating and ventilation details.
4. The N.Y.S. Department of Education Law states that a building permit may not be issued for any commercial structure or for a residence containing more than 1500 square feet of habitable space unless the building plans are prepared and signed by a New York State licensed engineer or registered architect.
5. No building permit of Certificate of Occupancy shall be issued by the Building Inspector unless all provisions of the Village of Nyack Zoning Code and the New York State Uniform Fire Prevention and Building Code are in compliance
6. Fees are based on cost of construction. (This office reserves the right to adjust any fee prior to issuing the Certificate of Occupancy if it is shown that the original fee was not sufficient to cover the actual cost.) Bills, invoices and other documentation must be submitted to substantiate both the Estimated Cost of Construction, as well as the Actual Cost of Construction.
7. Mandatory inspections are required for issuance of Certificate of Occupancy.
8. Underground utilities are required by the Zoning Code.
9. It shall be unlawful to use or permit the use of any building or premises or part thereof, hereafter created, erected, changed, converted or enlarged wholly or partly, in its use or structure, until a Certificate of Occupancy shall have been issued
10. This office reserves the right to require that the affidavit of compliance on the application for a Certificate of Occupancy be submitted and signed by the architect or engineer of record.
11. The building permit expires two years from the date of issuance. One six (6) month extension may be granted prior to expiration date of the building permit (Renewal of all expired building permits requires a new application and fee.)

Post & Panel Sign: Double Sided



Front Elevation

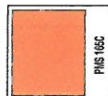
Fabrication Specs

Double faced 1.5" thick HDU sign panel with machine routed graphics/border

Logo & graphics painted to match brand standards

4" x 4" Square posts painted PMS 2755C with PMS 7456C top accent

Remove & scrap existing sign



Frohling Sign Co.
 DESIGNERS • FABRICATORS • INSTALLERS
 711 Executive Blvd. Valley Cottage, NY 10989 • 845-623-3253 • FAX: 845-623-2799

Project: Nyack Smiles
 Site Address: 99 North Broadway, Nyack, N.Y.

Date: 6/23/21
 Sales: B.O.
 Drawings: TH

Customer Approval

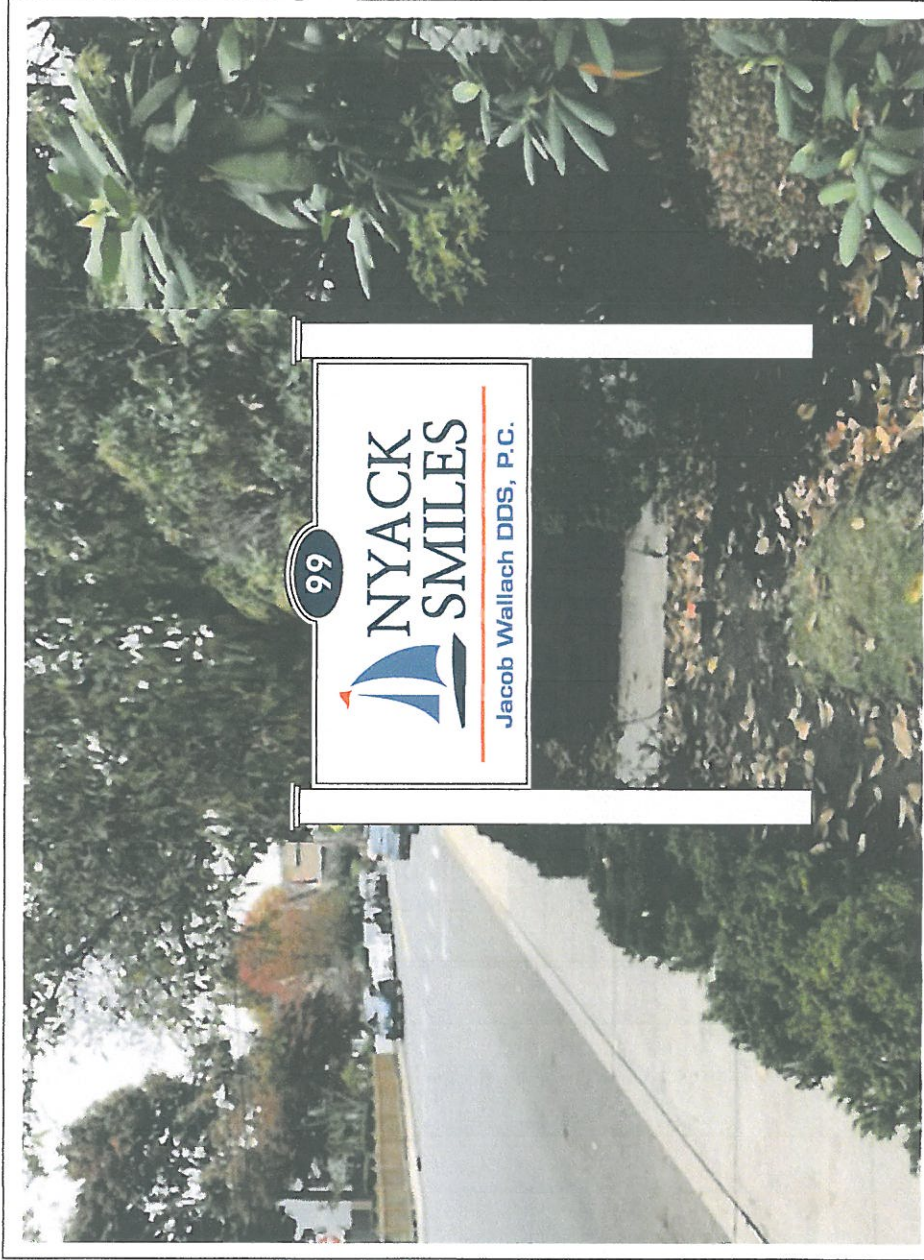
Customer of Project (Legible Signature)
 Date of Approval: _____

Landlord Approval (if req.)

Landlord of Project (Legible Signature)
 Date of Approval: _____

Post & Panel Sign: Double Sided

Newly Proposed Signage



Frohling Sign Co.
 DESIGNERS ▶ FABRICATORS ▶ INSTALLERS
 711 Executive Blvd. Valley Cottage, N.Y. 10989 • 845-623-2259 • FAX: 845-623-2799

Project: Nyack Smiles
 Site Address: 99 North Broadway, Nyack, N.Y.

Date: 6/23/21
 Sales: B.O.
 Drawings: TH

Customer Approval
 Customer of Project (Legible Signature)
 Date of Approval: _____

Landlord Approval (if req.)
 Landlord of Project (Legible Signature)
 Date of Approval: _____

