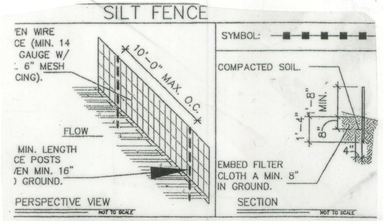
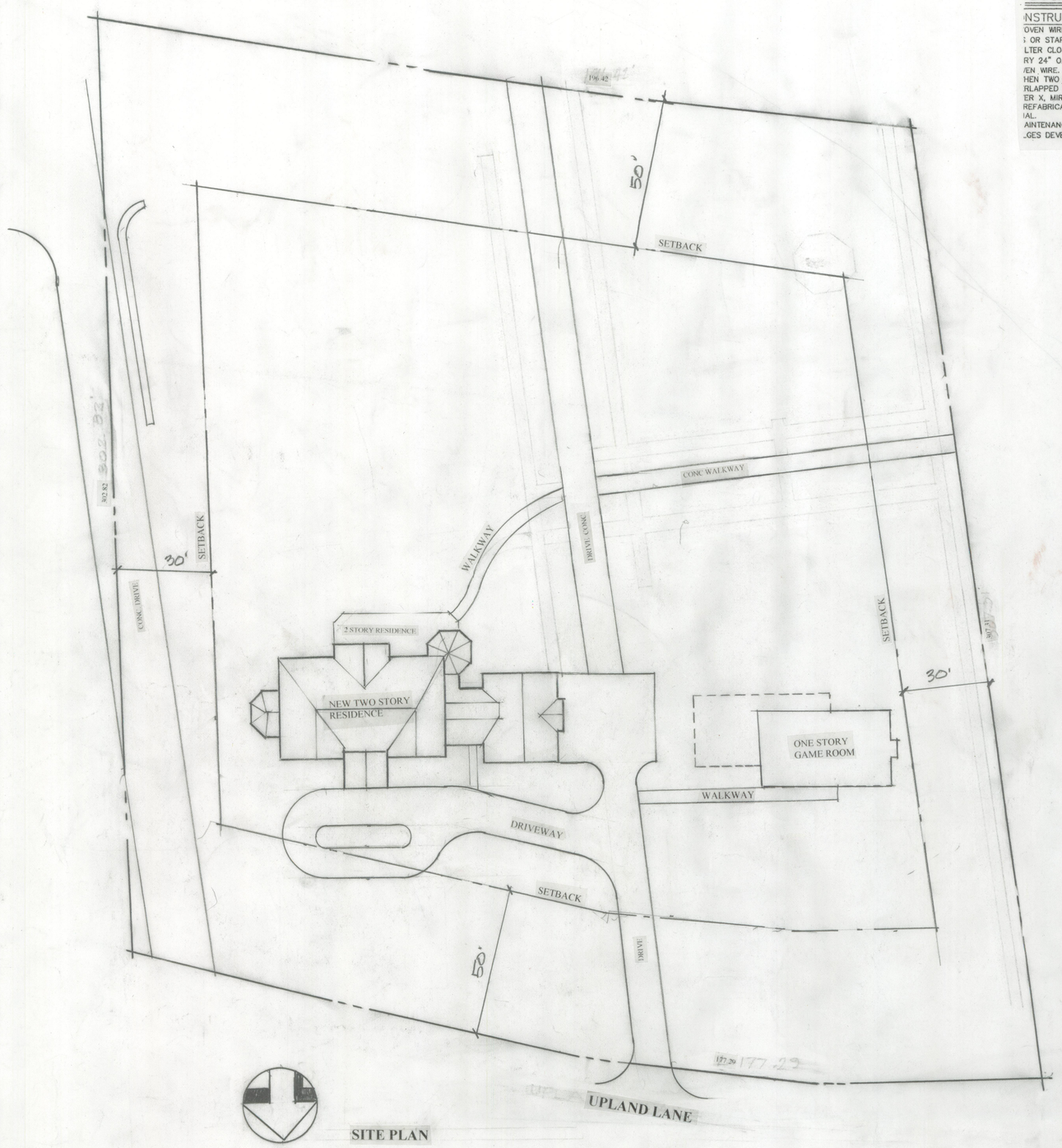
SILT FENCE



NSTRUCTION SPECIFICATIONS:

OVEN WIRE FENCE TO BE FASTENED SECURELY TO FENCE POST W/ WIRE
OR STAPLES. POST SHALL BE EITHER "I" OR "U" TYPE STL. OR HARDWD.
LTER CLOTH TO BE FASTENED SECURELY TO WOVEN WIRE FENCE W/ TIES
RY 24" O.C. AT TOP & MID SECTION. FENCE SHALL BE 14 1/2 GAUGE
ÆN WIRE. 6" MAX. MESH OPENING.
HEN TWO SECTIONS OF FILTER CLOTH ADJOIN THEY SHALL BE
RLAPPED BY SIX INCHES & FOLDED. FILTER CLOTH SHALL BE EITHER
ER X, MIRAFI 100X, STABILINKA T140N, OR APPROVED EQUAL.
REFABRICATED UNITS SHALL BE GEOFAB, ENVIROFENCE, OR APPROVED
IAL.
AINTENANCE SHALL BEPERFORMED AS NEEDED & MATERIAL REMOVED WHEN
.GES DEVELOP IN THE SILT FENCE.



SITE PLAN

A RESIDENCE FOR
MR. AND MRS J. CHRYSSICAS
9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

SITE PLAN 1" = 20'

MARCH 23 2020

10

GENERAL NOTES:

THE ARCHITECT SHALL INSTRUCT THE OWNER THAT PRIOR TO AWARD OF THE CONTRACT AND DURING SITE VISIT, HE IS NOT TO GIVE ANY INSTRUCTIONS, ATTEMPT TO CLARIFY THE PROJECT, CHANGE ANY PART OF THE PROJECT, OR IN ANY WAY MAKE ANY INTERPRETATION OF THE PROJECT.

THE CONTRACTOR IS HELD RESPONSIBLE FOR ENSURING THAT ANY QUESTIONS THAT ARISE BY HIM OR ANY SUBCONTRACTORS SHALL BE DIRECTED TO THE ARCHITECT AND NO ONE ELSE.

WHEN QUESTIONS ARISE, HE IS TO ADVISE THE CONTRACTOR OR HIS SUBCONTRACTOR TO DIRECT THEIR QUESTIONS TO THE ARCHITECT.

TABLE R301.2(1)
CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND DESIGN				SEISMIC DESIGN CATEGORY[f]	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP[e]	ICE BARRIER UNDERLAYMENT REQUIRED[h]	FLOOD HAZARDS[g]	AIR FREEZING INDEX[i]	MEAN ANNUAL TEMP[j]
	Speed[d] (mph)	Topographic effects[k]	Special wind region[l]	Wind-borne debris zone[m]		Weathering[a]	Frost line depth[b]	Termite[c]					
30	115	YES	YES	YES	B	SEVERE	42	MOD/SEV	1	YES	5.512	1500	48°

For SI: 1 pound per square foot = 0.0479 kPa, 1 mile per hour = 0.447 m/s.

a. Weathering may require a higher strength concrete or *grade* of masonry than necessary to satisfy the structural requirements of this code. The weathering column shall be filled in with the weathering index, "negligible," "moderate" or "severe" for concrete as determined from Figure R301.2(3). The *grade* of masonry units shall be determined from ASTM C 34, C 55, C 62, C 73, C 90, C 129, C 145, C 216 or C 652.

b. The frost line depth may require deeper footings than indicated in Figure R403.1(1). The *jurisdiction* shall fill in the frost line depth column with the minimum depth of footing below finish *grade*.

c. The *jurisdiction* shall fill in this part of the table to indicate the need for protection depending on whether there has been a history of local subterranean termite damage.

d. The *jurisdiction* shall fill in this part of the table with the wind speed from the basic wind speed map [Figure R301.2(4)A]. Wind exposure category shall be determined on a site-specific basis in accordance with Section R301.2.1.4.

e. The outdoor design dry-bulb temperature shall be selected from the columns of 97½-percent values for winter from Appendix D of the *International Plumbing Code*. Deviations from the Appendix D temperatures shall be permitted to reflect local climates or local weather experience as determined by the *building official*.

f. The *jurisdiction* shall fill in this part of the table with the seismic design category determined from Section R301.2.2.1.

g. The *jurisdiction* shall fill in this part of the table with (a) the date of the *jurisdiction's* entry into the National Flood Insurance Program (date of adoption of the first code or ordinance for management of flood hazard areas), (b) the date(s) of the Flood Insurance Study and (c) the panel numbers and dates of the currently effective FIRMs and FBFMs or other flood hazard map adopted by the authority having *jurisdiction*, as amended.

h. In accordance with Sections R905.1.2, R905.4.3.1, R905.5.3.1, R905.6.3.1, R905.7.3.1 and R905.8.3.1, where there has been a history of local damage from the effects of ice dammming, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall fill in this part of the table with "NO."

i. The *jurisdiction* shall fill in this part of the table with the 100-year return period air freezing index (BF-days) from Figure R403.3(2) or from the 100-year (99 percent) value on the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

j. The *jurisdiction* shall fill in this part of the table with the mean annual temperature from the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

k. In accordance with Section R301.2.1.5, where there is local historical data documenting structural damage to buildings due to topographic wind speed-up effects, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

l. In accordance with Figure R301.2(4)A, where there is local historical data documenting unusual wind conditions, the *jurisdiction* shall fill in this part of the table with "YES" and identify any specific requirements. Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

m. In accordance with Section R301.2.1.2.1, the *jurisdiction* shall indicate the wind-borne debris wind zone(s). Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

WOOD HEADER SCHEDULE

OPENING WIDTH	FLOOR	SIZE
UP TO 4'-1"	FIRST	(2) 2 x 10 or 2-1 3/4" X 7 1/4" LVL'S
4'-1" to 6'-1"	FIRST	(2) 2 x 12 or 2-1 3/4" X 9 1/2" LVL'S
6'-1" to 8'-1"	FIRST	2-1 3/4" X 11 7/8" LVL'S or 3-1 3/4" X 9 1/2" LVL'S
UP TO 4'-1"	SECOND & ATTIC	(2) 2 x 8 or 2-1 3/4" X 7 1/4" LVL'S
4'-1" to, 6'-1"	SECOND & ATTIC	(2) 2 x 10 or 2-1 3/4" X 9 1/2" LVL'S
6'-1" to 8'-1"	SECOND & ATTIC	2-1 3/4" X 11 7/8" LVL'S or 3-1 3/4" X 9 1/2" LVL'S

G.C. TO DETERMINE IN FIELD, AVAILABLE ROOM FOR HEADER, AS INDICATED PRIOR TO FRAMING ROUGH OPENING.
SEE PLANS FOR HEADERS WITH SPANS GREATER THAN 8'-1" OR WITH LARGE POINT LOADS.

1 BLUESTONE ON CONC SLAB
2 RANDOM PATTERN GROUT TO MATCH
3 SHELF AND CLOTH POLE
4 EXHAUST FAN PANOSONIC FV08VQ2
5 LINE OF CEILING ABOVE
6 STAIRS UP 18R@ 7 ½' 17 T @ 10 ½" PER NYS-IBC SECTION311
7 EDGE OF BALCONY ABOVE
8 6 X 6 POST
9 SEE WOOD HEADER SCHEDULE SHEET 1
10 EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHING , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
11 ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND POWDER ROOM WALL-SOUND INSULATE
12 GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
13 (3) 2X 12 BEAMS
14 6" STEEL COL SEE DETAIL 3/3
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16 SHELVING BY OWNER
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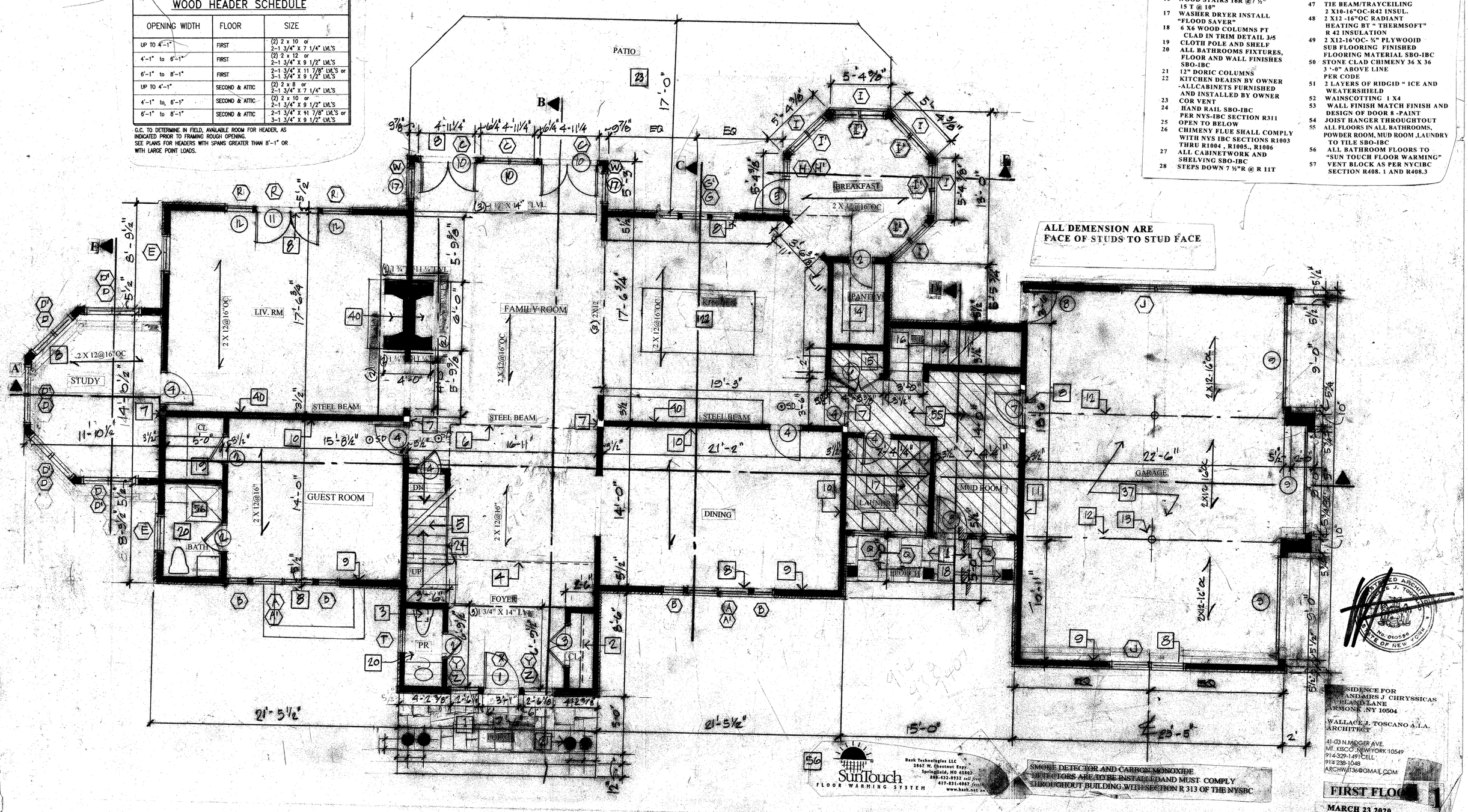
ALL DEMENSION ARE FACE OF STUDS TO STUD FACE



SMOKE DETECTOR AND CARBON MONOXIDE DETECTORS ARE TO BE INSTALLED AND MUST COMPLY THROUGHOUT BUILDING WITH SECTION R 313 OF THE NYSBC

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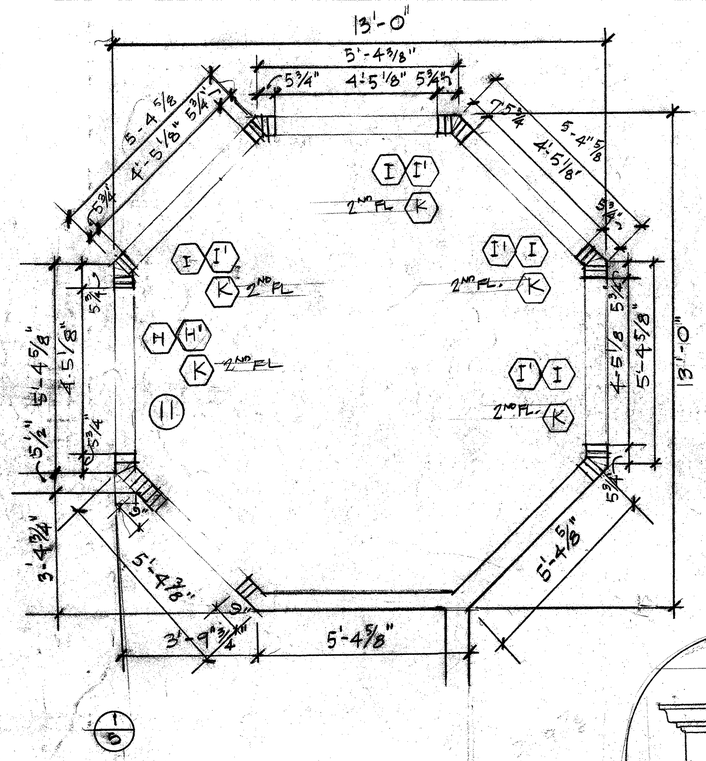
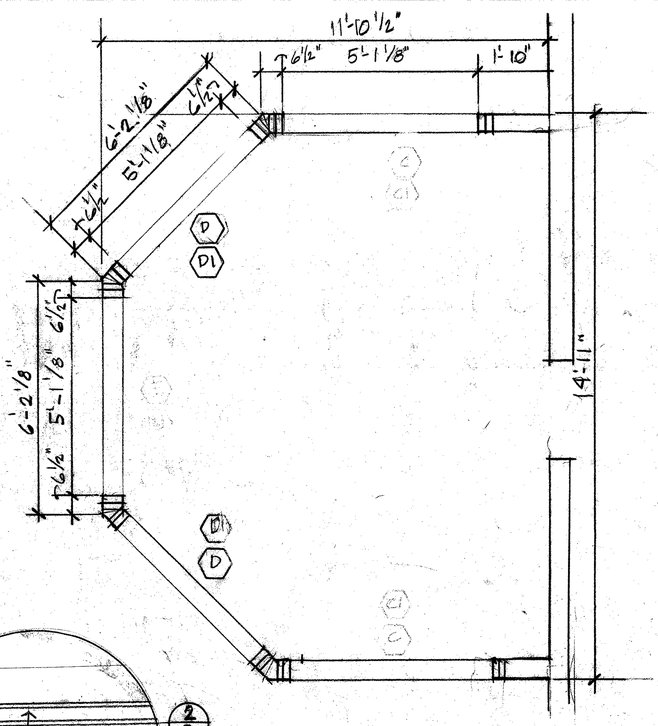
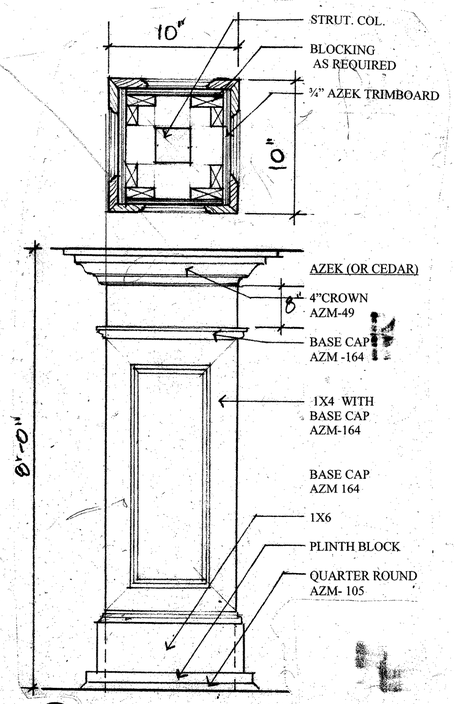
FIRST FLOOR

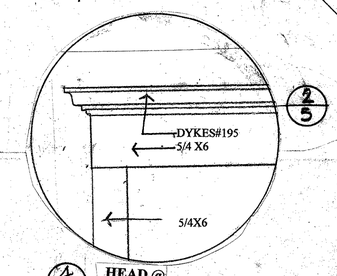
MARCH 23 2020



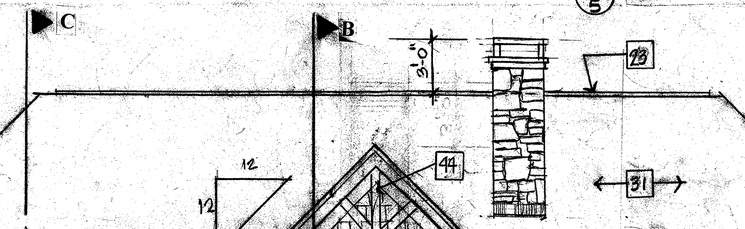


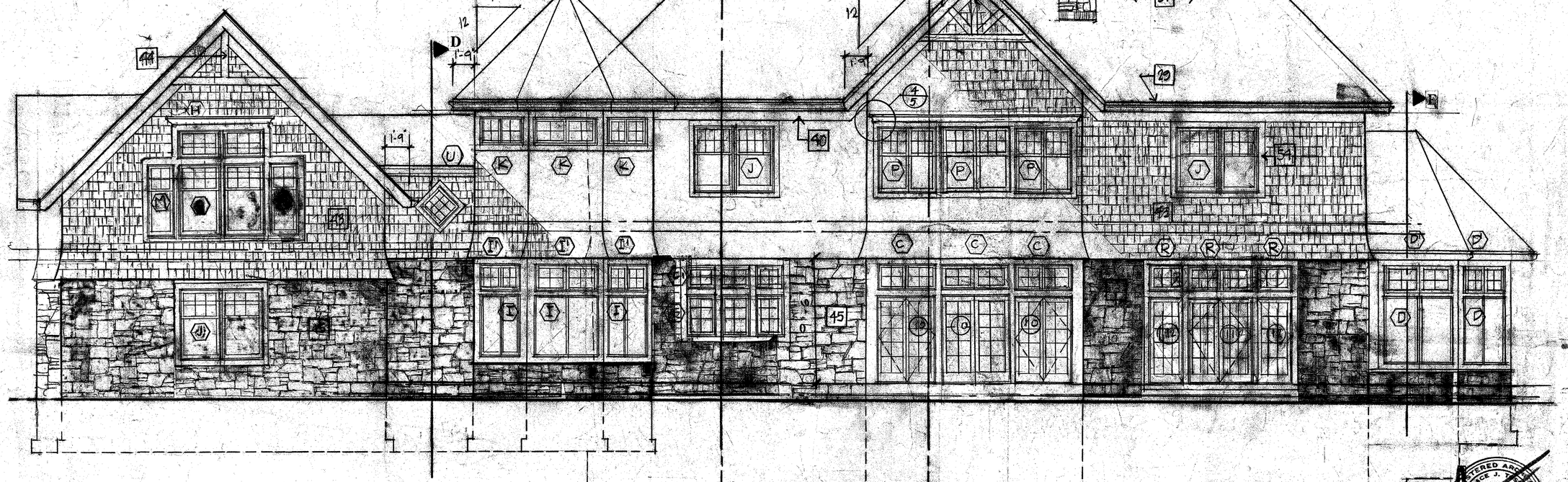


3/5 PORCH COLUMN 1/4"



4/5 HEAD @ WINDOWS





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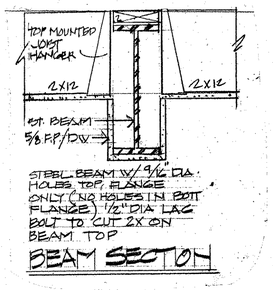
REAR SIDE 1/4

MARCH 23 2020

5



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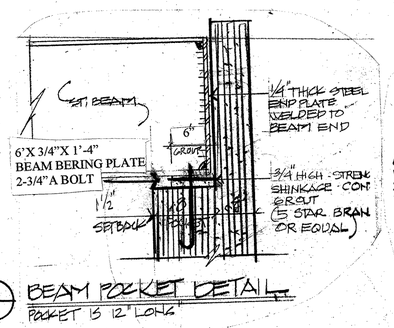

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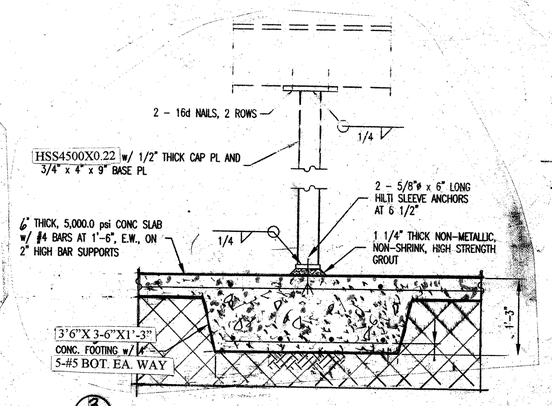

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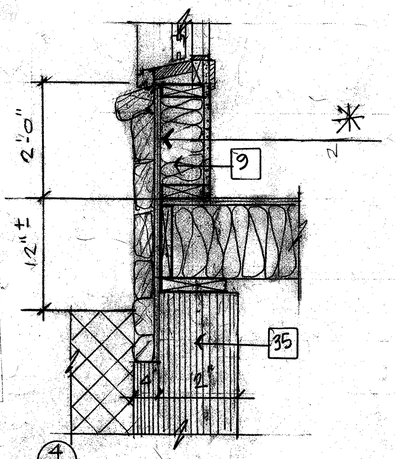

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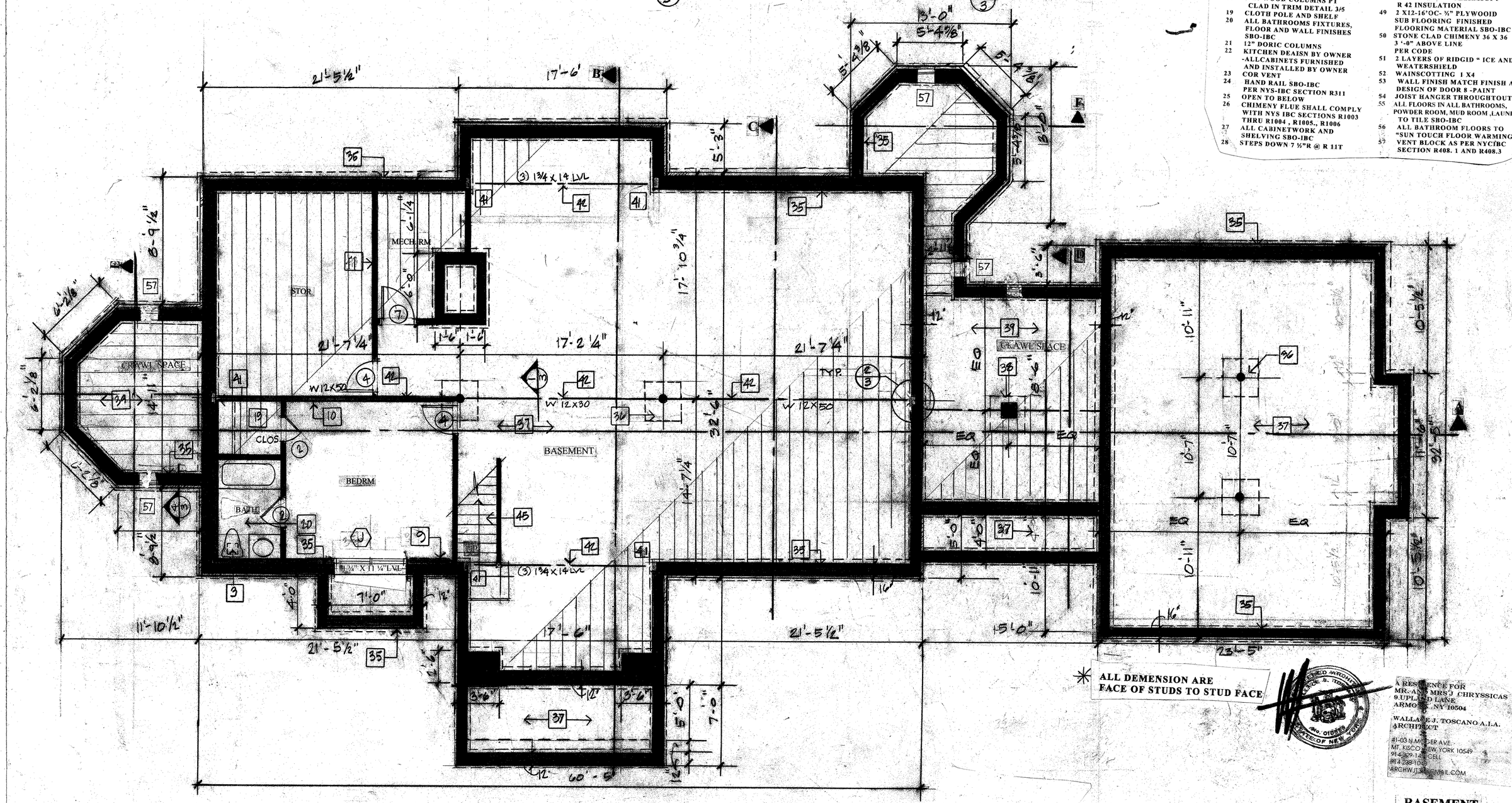

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BASEMENT
MARCH 23 2020

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29	1X8 FASCIA –SEE DETAIL	
30	FLOOR MATERIAL SBO-IBC	
31	"OWENS CORNING" LAM. ARCH.	
33	CATHEDRAL CEILING	
34	TRAY CEILING	
35	16"CONC BLOCK FOUND.WALL	
	ON 12X 36 FOOTING W/(4) ST.	
	REBARS BOTH WAYS	
36	6 "STEEL COL.ON 1-3 X 3-0 CONC	
	FOOTING SEE DET.3/3 ON SHT 3	
37	6" CONC.SLAB WITH 4 X 4 WWF	
	ON 6" COMPACTED FILL SLOP	
38	12 X12 CONC FOOTING ON 36 X 36	
	CONC FOUNDATION W/(4) #5 ST.	
	BARS BOTH WAYS–	
39	CRAWL SPACE PER NYS IRC	
40	LOAD BEARINGWALL	
41	FIRE PLACE FINISHES SBO-IRC	
42	STUCT. BEAM	
43	EXT SATHING -/2" DRY WALL	
	2 X6 -16"OC .R36 INSULATION –	
44	SECOND FLOOR SIDING TO BE	
	4 X4 CEDAR SHAKES BW"CEDAR VALLEY	
45	CEDAR SHAKES BW"CEDAR VALLEY"	
	PAINTED	
46	4" STONE VENEER –STYLE TO BE	
	SELECTED BY ARCHITECT	
47	CHICKERT/COOPER FLASHING	
48	TEE BEAM/TRAVECEILING	
	2 X10-16"OC-R42 INSUL.	
49	HEATING SYST BY" THERMSOFT"	
	R 42 INSULATION	
	2 X12-16"OC- ¾" PLYWOOD	
50	SUB FLOORING FINISHED	
	FLOORING MATERIAL SBO-IBC	
51	STONE CLAD CHIMENEY 36 X 36	
	3 '-0" ABOVE LINE	
52	2 LAYERS OF RIDGID " ICE AND	
	WEATHERSHIELD	
53	WAINSCOTTING 1 X4	
54	WALL FINISH MATCH FINISH AND	
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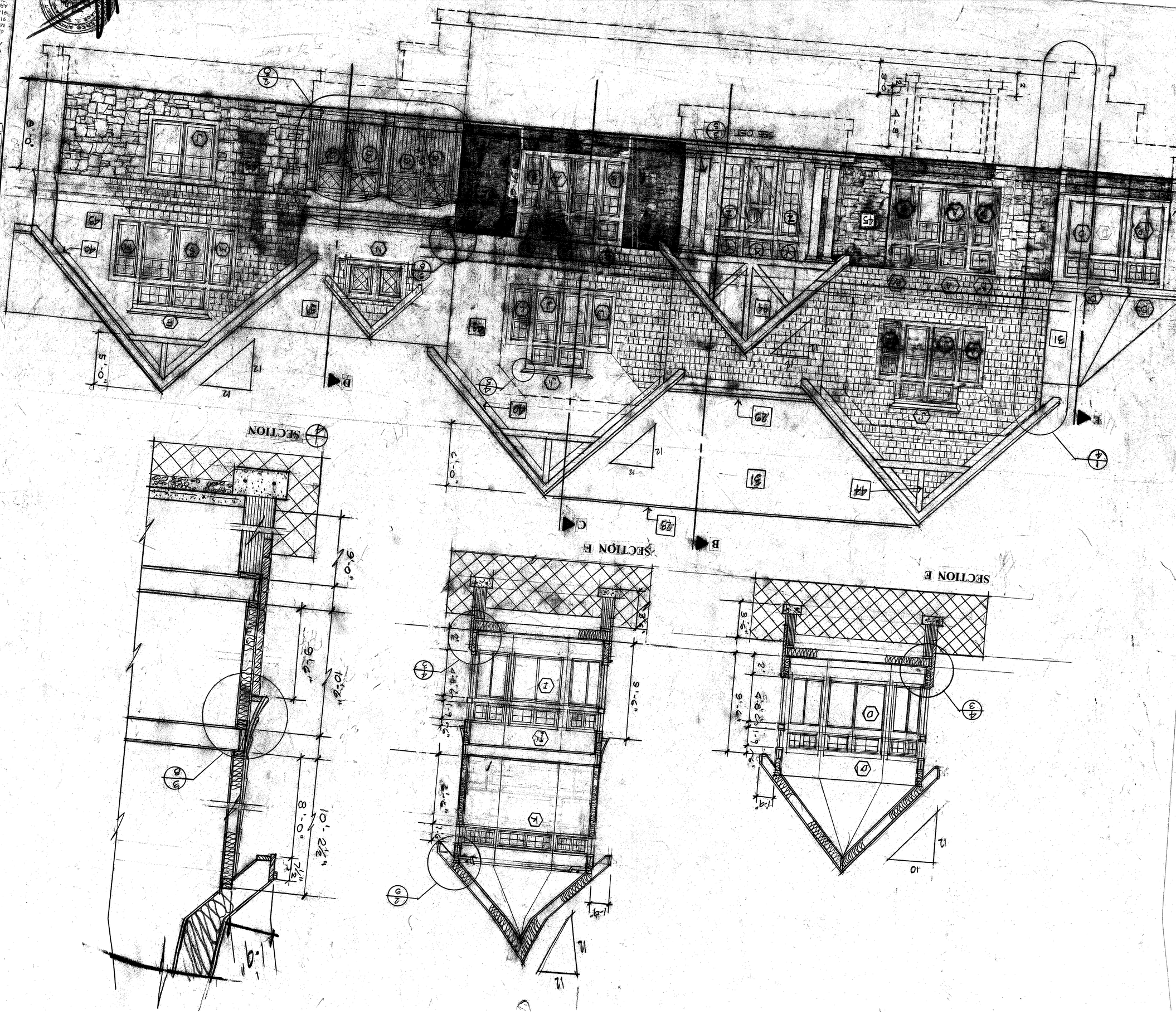
	ALL FLOORS IN ALL BATHROOMS.	
56	POWDER ROOM. MUD ROOM LAUNDRY	
	ALL BATHROOM FLOORS TO	
57	TO TILE SBO-IBC	
	"SUN TOUCH FLOOR WARMING"	
	VENT BLOCK AS PER MFGRC	
	SECTION R408. 1 AND R408.3	

1	BLUESTONE ON CONC. SLAB
	RANDOM PATTERN CRAFT
	TO MATCH
2	SHELF AND CLOTH POLE
3	EXHAUST FAN PANASONIC
	FV08VQ2
4	LINE OF CEILING ABOVE
5	STAIRS UP 18R@ 7 ¾"
	17 T @ 10 ½" PER NYS-IR
	SECTION311
6	EDGE OF BALCONY ABOVE
7	6 X 6 POST
8	SEE WOOD HEADER SCHEDULE
9	EXTERIOR WALL ON FIRST
	SHEET 1
	FLOOR 2 X6 16 " OC R36 ½ DW
	SHEATHING , 4" STONE VENEER
	STYLE TO BE SELECTED BY
	ARCHITECT
10	ALL INTERIOR WALLS TO BE 2 X4
	16" OC ¾" DRY WALL BOTH
	USE WATER PROOF DW
	ON ALL BATHROOM AND
	POWDER ROOM WALL–
11	GARAGE WALL -2X 6 16" O
	SOUND INSULATE
	5/8" FIRE PROOF DW BOTH SIDE
	R36 INSULATION
12	(3) 2X 12 BEAMS
13	6" STEEL COL SEE DETAIL 3/3
14	PANTRY SHELF BY OWNER
15	SHELVING BY OWNER
16	WOOD STAIRS 16R @7 ¾"
17	15 T @ 10"
	WASHER DRYER INSTALL
18	6 X6 WOOD COLUMNS PT
	"FLOOD SAVER"
19	CLAD IN TRIM DETAIL 3/5
20	CLOTH POLE AND SHELF
	ALL BATHROOMS FIXTURES
	FLOOR AND WALL FINISHES
21	SBO-IBC
22	12" DORIC COLUMNS
	KITCHEN DEAISN BY OWNER
23	-ALLCABINETS FURNISHED
	AND INSTALLED BY OWNER
24	COR VENT
	HAND RAIL SBO-IBC
25	PER NYS-IRC SECTION R311
26	OPEN TO BELOW
	CHIMENY FLUE SHALL COMPLY
	WITH NYS IRC SECTIONS R1004
27	THRU R1004 , R1005, R1006
	ALL CABINETWORK AND
28	SHELVING SBO-IRC
	STEPS DOWN 7 ¾"R @ R LIT


SECTION
SECTION E
SECTION E
SEE DET
D
B
C
E
12
10
9'-6"
10'-2"
8'-0"
10'-2 1/2"
1'-9"
3'-5"
2'-4"
6'-6"
1'-4"
1'-9"
1'-9"
1'-9

61

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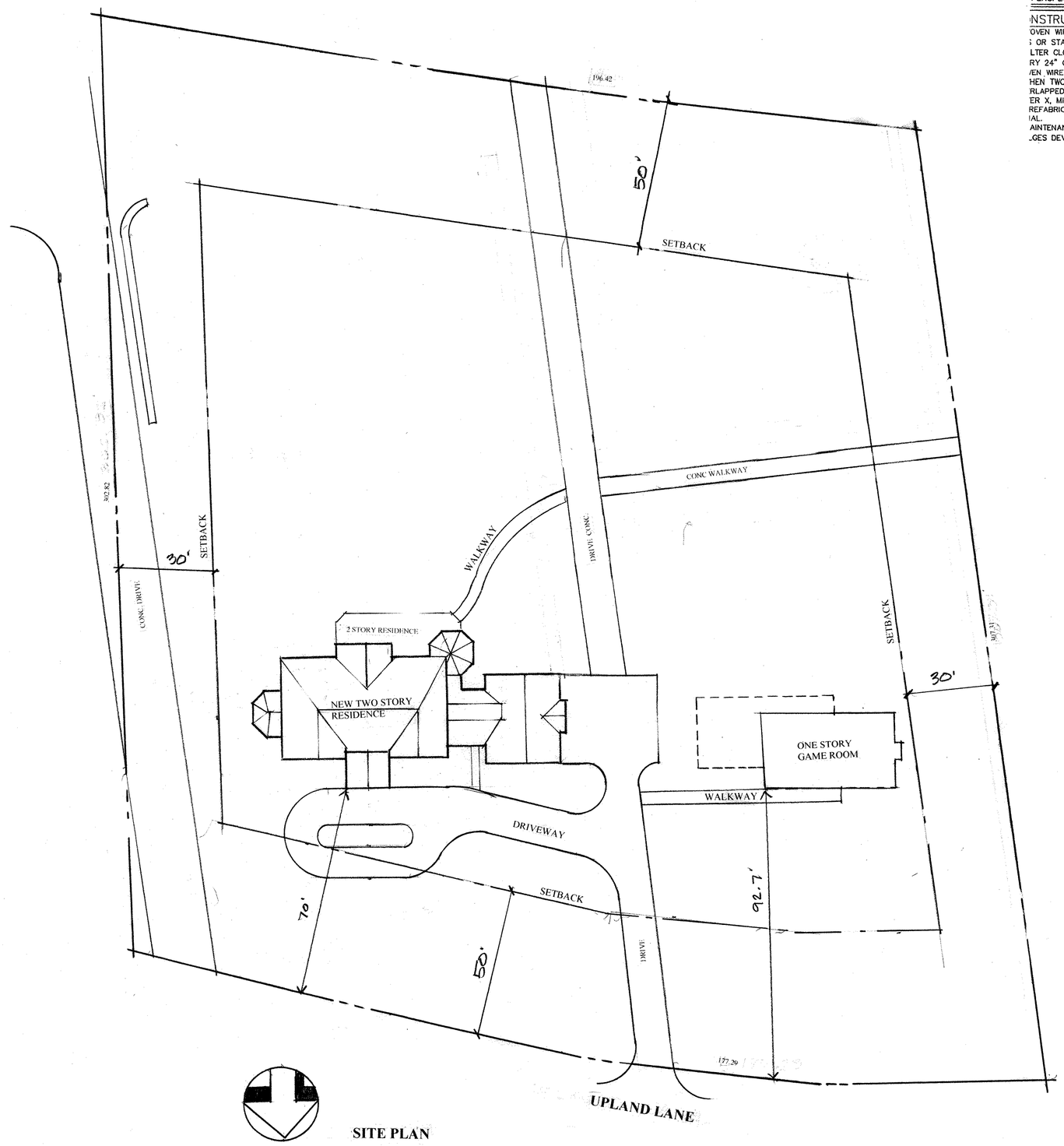
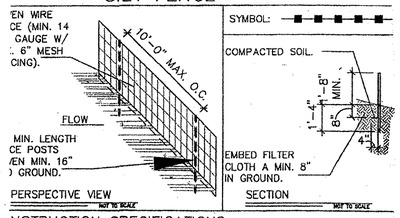


SITE PLAN

SILT FENCE



NSTRUCTION SPECIFICATIONS:

OVEN WIRE FENCE TO BE FASTENED SECURELY TO FENCE POST W/ WIRE
OR STAPLES. POST SHALL BE EITHER "T" OR "U" TYPE STL. OR HARDWD.
LTER CLOTH TO BE FASTENED SECURELY TO WOVEN WIRE FENCE W/ TIES
RY 24" O.C. AT TOP & MID SECTION. FENCE SHALL BE 14 1/2 GAUGE
/EN WIRE. 6" MAX. MESH OPENING.
HEN TWO SECTIONS OF FILTER CLOTH ADJOIN THEY SHALL BE
RLAPPED BY SIX INCHES & FOLDED. FILTER CLOTH SHALL BE EITHER
ER X, MIRAFI 100X, STABILINKA T140N, OR APPROVED EQUAL.
REFABRICATED UNITS SHALL BE GEOFAB, ENVIROFENCE, OR APPROVED
AL.
AINTENANCE SHALL BEPERFORMED AS NEEDED & MATERIAL REMOVED WHEN
.GES DEVELOP IN THE SILT FENCE.

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SITE PLAN 1"=20'

MARCH 23 2020

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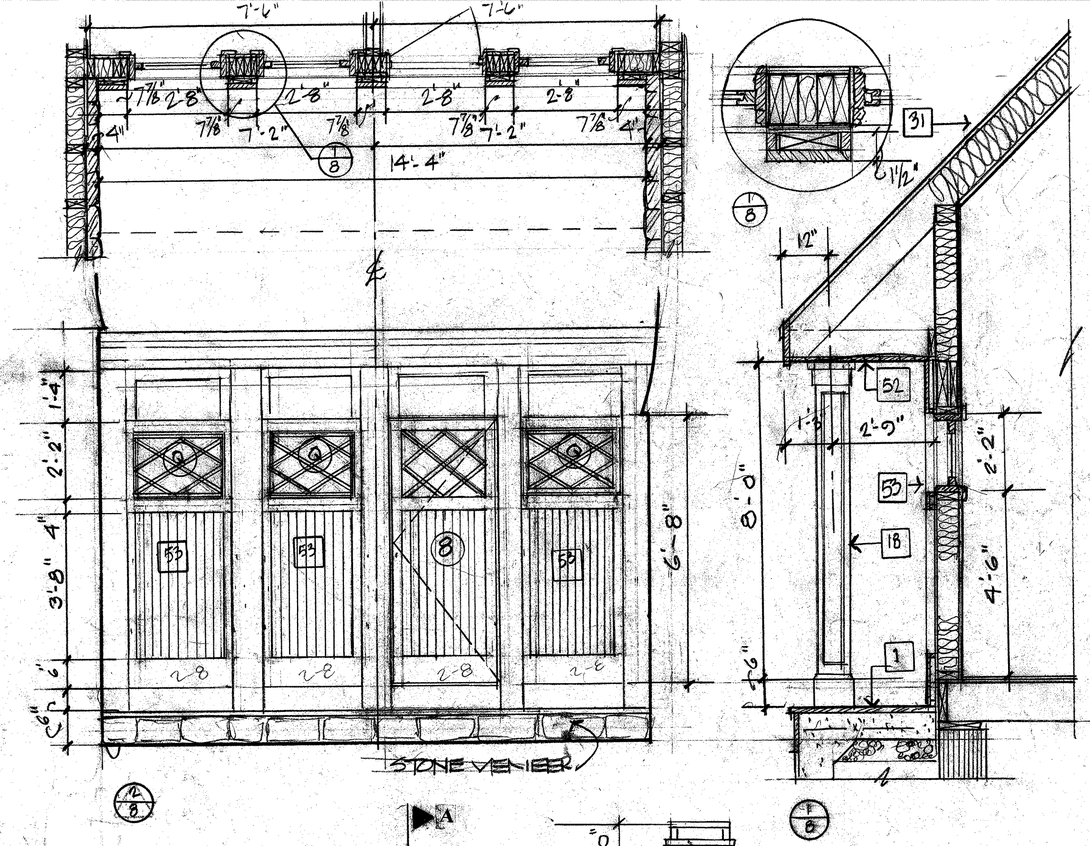

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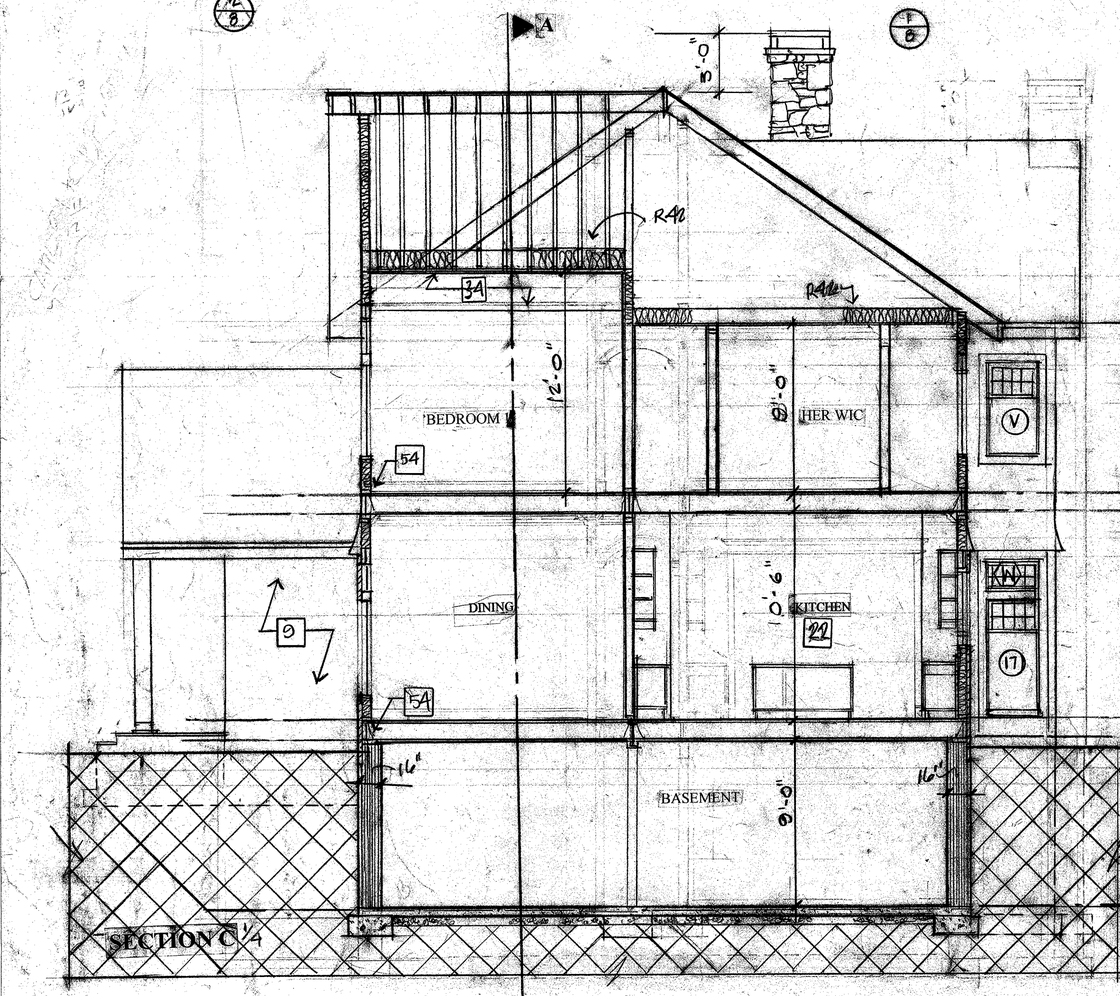
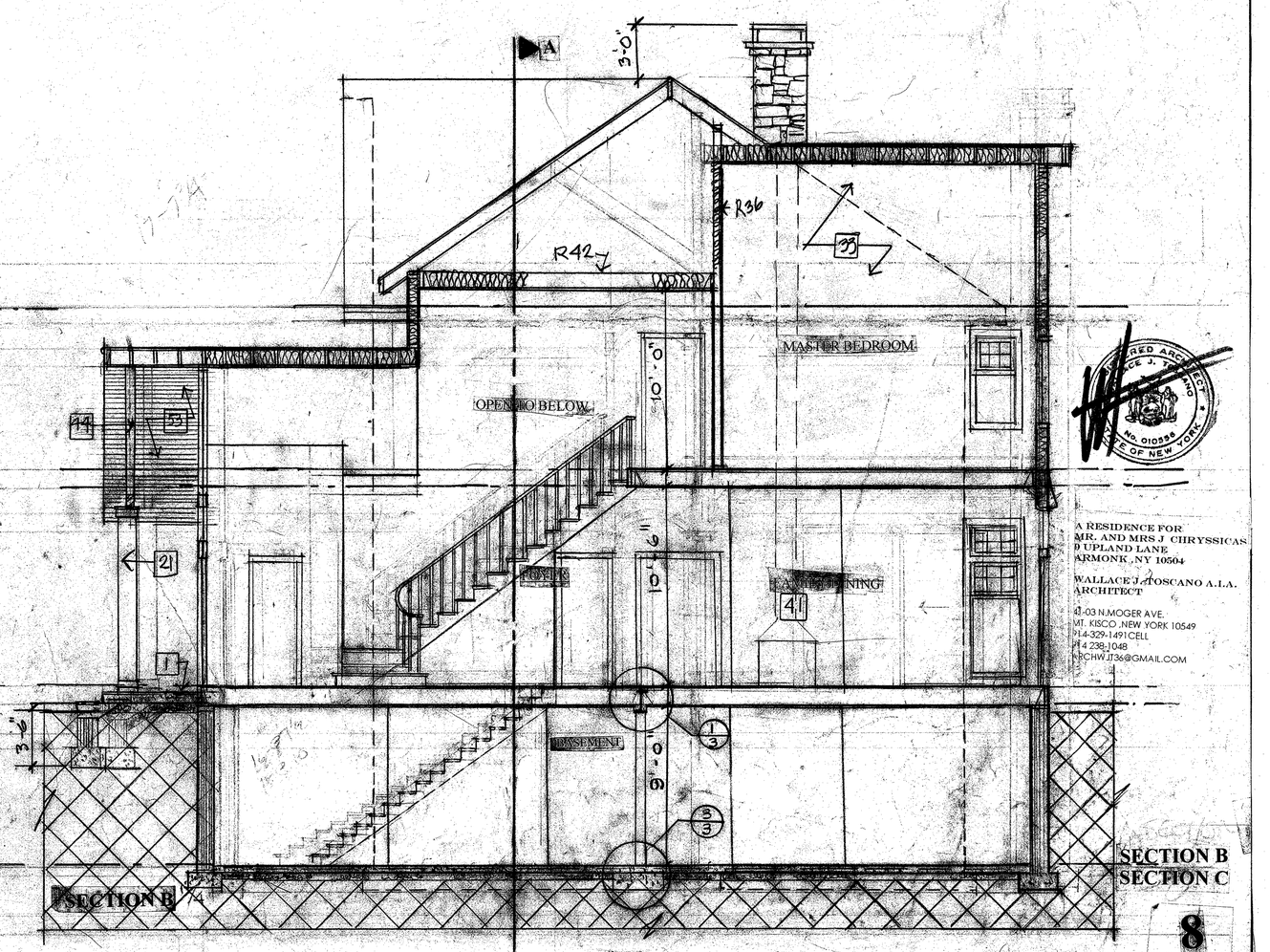


SECTION C 1/4



SECTION B 1/4

A RESIDENCE FOR
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SECTION B
SECTION C

8

MARCH 23 2020

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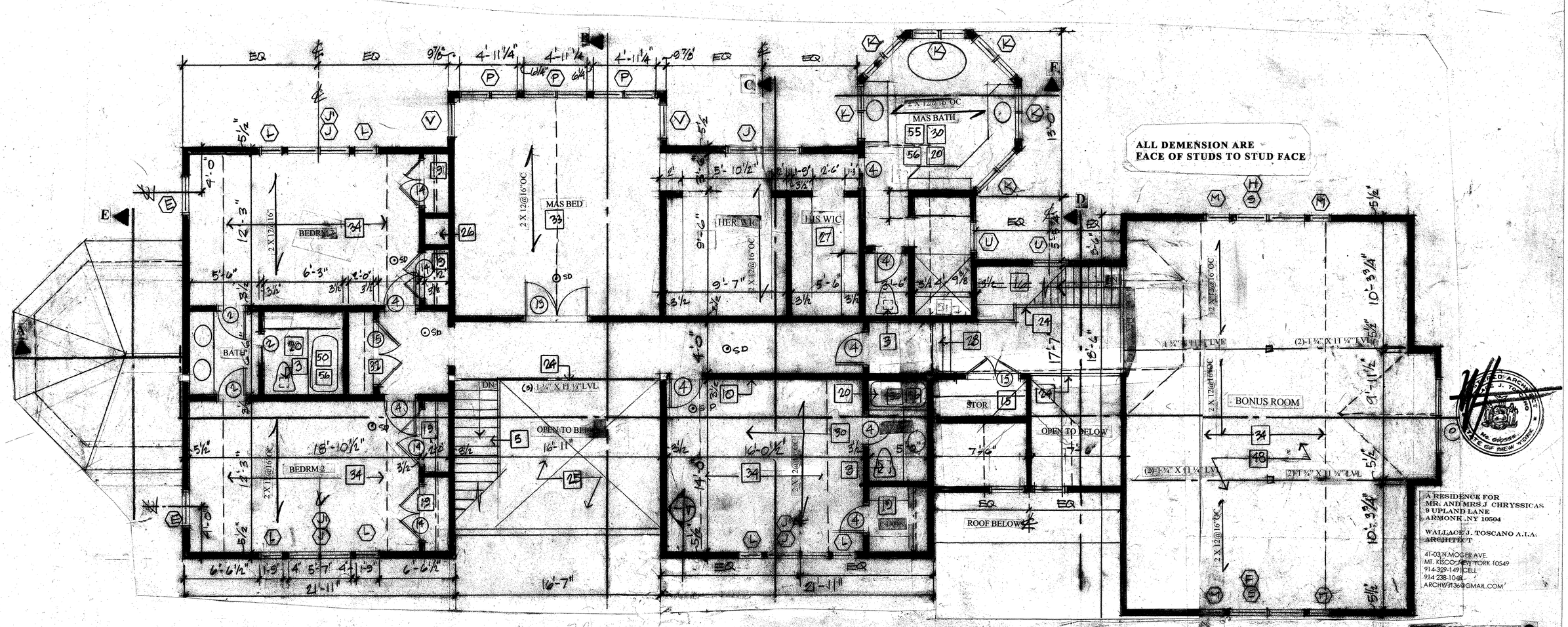

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SECOND FLOOR 2

MARCH 23 2020

GENERAL NOTES:

THE ARCHITECT SHALL INSTRUCT THE OWNER THAT PRIOR TO AWARD OF THE CONTRACT AND DURING SITE VISIT, HE IS NOT TO GIVE ANY INSTRUCTIONS, ATTEMPT TO CLARIFY THE PROJECT, CHANGE ANY PART OF THE PROJECT, OR IN ANY WAY MAKE ANY INTERPRETATION OF THE PROJECT.

THE CONTRACTOR IS HELD RESPONSIBLE FOR ENSURING THAT ANY QUESTIONS THAT ARISE BY HIM OR ANY SUBCONTRACTORS SHALL BE DIRECTED TO THE ARCHITECT AND NO ONE ELSE.

WHEN QUESTIONS ARISE, HE IS TO ADVISE THE CONTRACTOR OR HIS SUBCONTRACTOR TO DIRECT THEIR QUESTIONS TO THE ARCHITECT.

TABLE R301.2(1)
CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND DESIGN				SEISMIC DESIGN CATEGORY[f]	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP[e]	ICE BARRIER UNDERLAYMENT REQUIRED[h]	FLOOD HAZARDS[g]	AIR FREEZING INDEX[i]	MEAN ANNUAL TEMP[j]
	Speed[d] (mph)	Topographic effects[k]	Special wind region[l]	Wind-borne debris zone[m]		Weathering[a]	Frost line depth[b]	Termite[c]					
30	115	YES	YES	YES	B	SEVERE	42	MOD/SEV	1	YES	5.512	1500	48°

For SI: 1 pound per square foot = 0.0479 kPa, 1 mile per hour = 0.447 m/s.

a. Weathering may require a higher strength concrete or *grade* of masonry than necessary to satisfy the structural requirements of this code. The weathering column shall be filled in with the weathering index, "negligible," "moderate" or "severe" for concrete as determined from Figure R301.2(3). The *grade* of masonry units shall be determined from ASTM C 34, C 55, C 62, C 73, C 90, C 129, C 145, C 216 or C 652.

b. The frost line depth may require deeper footings than indicated in Figure R403.1(1). The *jurisdiction* shall fill in the frost line depth column with the minimum depth of footing below finish *grade*.

c. The *jurisdiction* shall fill in this part of the table to indicate the need for protection depending on whether there has been a history of local subterranean termite damage.

d. The *jurisdiction* shall fill in this part of the table with the wind speed from the basic wind speed map [Figure R301.2(4)A]. Wind exposure category shall be determined on a site-specific basis in accordance with Section R301.2.1.4.

e. The outdoor design dry-bulb temperature shall be selected from the columns of 97½-percent values for winter from Appendix D of the *International Plumbing Code*. Deviations from the Appendix D temperatures shall be permitted to reflect local climates or local weather experience as determined by the *building official*.

f. The *jurisdiction* shall fill in this part of the table with the seismic design category determined from Section R301.2.2.1.

g. The *jurisdiction* shall fill in this part of the table with (a) the date of the *jurisdiction's* entry into the National Flood Insurance Program (date of adoption of the first code or ordinance for management of flood hazard areas), (b) the date(s) of the Flood Insurance Study and (c) the panel numbers and dates of the currently effective FIRMs and FBFMs or other flood hazard map adopted by the authority having *jurisdiction*, as amended.

h. In accordance with Sections R905.1.2, R905.4.3.1, R905.5.3.1, R905.6.3.1, R905.7.3.1 and R905.8.3.1, where there has been a history of local damage from the effects of ice dammming, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall fill in this part of the table with "NO."

i. The *jurisdiction* shall fill in this part of the table with the 100-year return period air freezing index (BF-days) from Figure R403.3(2) or from the 100-year (99 percent) value on the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

j. The *jurisdiction* shall fill in this part of the table with the mean annual temperature from the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

k. In accordance with Section R301.2.1.5, where there is local historical data documenting structural damage to buildings due to topographic wind speed-up effects, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

l. In accordance with Figure R301.2(4)A, where there is local historical data documenting unusual wind conditions, the *jurisdiction* shall fill in this part of the table with "YES" and identify any specific requirements. Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

m. In accordance with Section R301.2.1.2.1, the *jurisdiction* shall indicate the wind-borne debris wind zone(s). Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

WOOD HEADER SCHEDULE

OPENING WIDTH	FLOOR	SIZE
UP TO 4'-1"	FIRST	(2) 2 x 10 or 2-1 3/4" X 7 1/4" LVL'S
4'-1" to 6'-1"	FIRST	(2) 2 x 12 or 2-1 3/4" X 9 1/2" LVL'S
6'-1" to 8'-1"	FIRST	2-1 3/4" X 11 7/8" LVL'S or 3-1 3/4" X 9 1/2" LVL'S
UP TO 4'-1"	SECOND & ATTIC	(2) 2 x 8 or 2-1 3/4" X 7 1/4" LVL'S
4'-1" to, 6'-1"	SECOND & ATTIC	(2) 2 x 10 or 2-1 3/4" X 9 1/2" LVL'S
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G.C. TO DETERMINE IN FIELD, AVAILABLE ROOM FOR HEADER, AS INDICATED PRIOR TO FRAMING ROUGH OPENING.
SEE PLANS FOR HEADERS WITH SPANS GREATER THAN 8'-1" OR WITH LARGE POINT LOADS.

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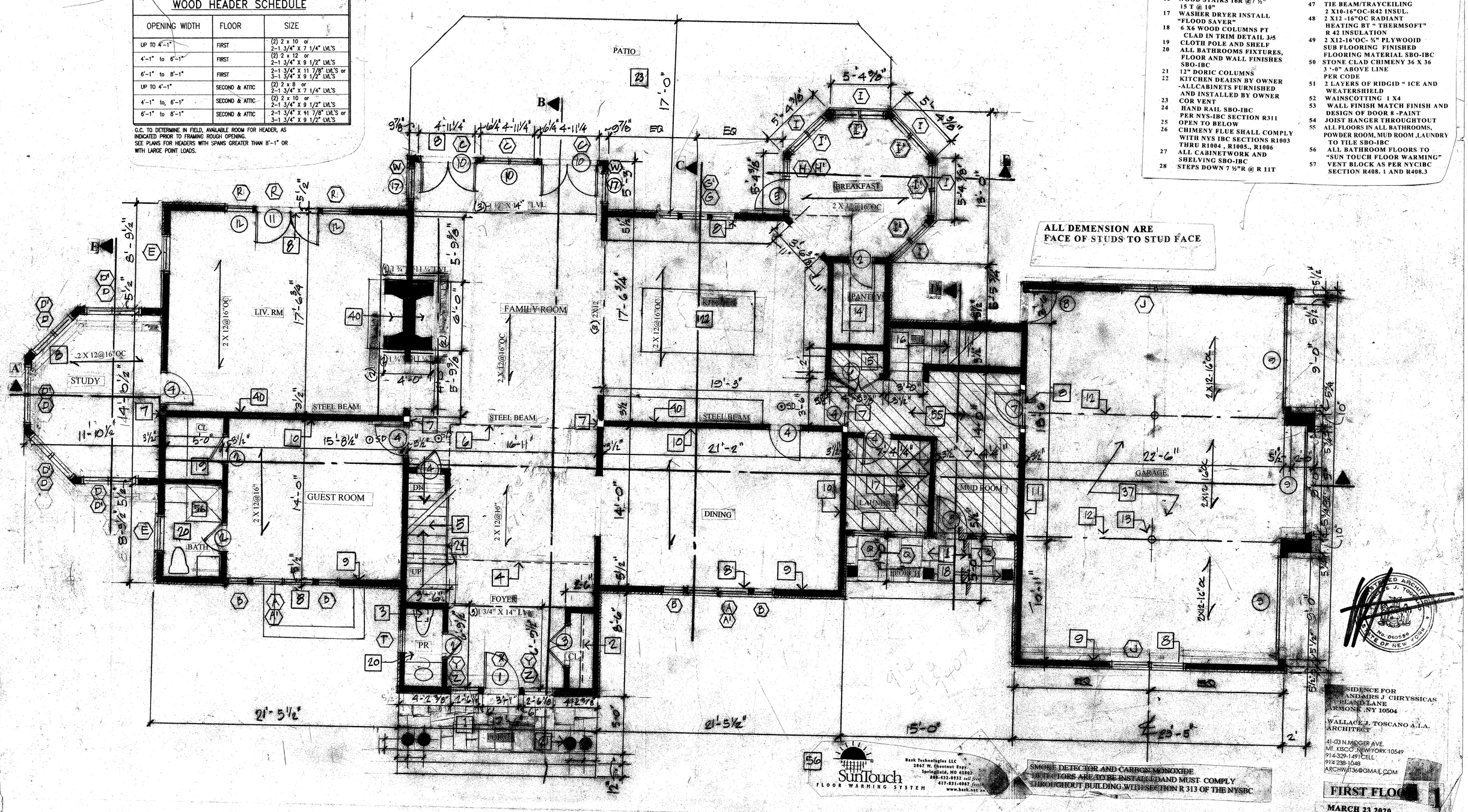
48 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49 2 X12-16'OC- ¾" PLYWOOID SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
50 STONE CLAD CHIMENY 36 X 36 3 '-0" ABOVE LINE PER CODE
51 2 LAYERS OF RIDGID " ICE AND WEATERSHIELD
52 WAINSCOTTING 1 X4
53 WALL FINISH MATCH FINISH AND DESIGN OF DOOR 8 -PAINT
54 JOIST HANGER THROUGHTOUT
55 ALL FLOORS IN ALL BATHROOMS, POWDER ROOM, MUD ROOM ,LAUNDRY TO TILE SBO-IBC
56 ALL BATHROOM FLOORS TO "SUN TOUCH FLOOR WARMING"
57 VENT BLOCK AS PER NYCIBC SECTION R408. 1 AND R408.3

ALL DEMENSION ARE FACE OF STUDS TO STUD FACE



SMOKE DETECTOR AND CARBON MONOXIDE DETECTORS ARE TO BE INSTALLED AND MUST COMPLY THROUGHOUT BUILDING WITH SECTION R 313 OF THE NYSBC

RESIDENCE FOR
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FIRST FLOOR

MARCH 23 2020

1 BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2 SHELF AND CLOTH POLE
3 EXHAUST FAN PANOSONIC FV08VQ2
4 LINE OF CEILING ABOVE
5 STAIRS UP 18R@ 7 ¾' 17 T @ 10 ½" PER NYS-IBC SECTION311
6 EDGE OF BALCONY ABOVE
7 6 X 6 POST
8 SEE WOOD HEADER SCHEDULE SHEET 1
9 EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHING , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
10 ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND POWDER ROOM WALL- SOUND INSULATE
11 GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
12 (3) 2X 12 BEAMS
13 6" STEEL COL SEE DETAIL 3/3
14 PANTRY SHELF BY OWNER
15 SHELVING BY OWNER
16 WOOD STAIRS 16R @7 ½" 15 T @ 10"
17 WASHER DRYER INSTALL "FLOOD SAVER"
18 6 X6 WOOD COLUMNS PT CLAD IN TRIM DETAIL 3/5
19 CLOTH POLE AND SHELF
20 ALL BATHROOMS FIXTURES, FLOOR AND WALL FINISHES SBO-IBC
21 12" DORIC COLUMNS
22 KITCHEN DEAISN BY OWNER -ALLCABINETS FURNISHED AND INSTALLED BY OWNER
23 COR VENT
24 HAND RAIL SBO-IBC PER NYS-IBC SECTION R311
25 OPEN TO BELOW
26 CHIMENY FLUE SHALL COMPLY WITH NYS IBC SECTIONS R1003 THRU R1004 , R1005., R1006
27 ALL CABINETWORK AND SHELVING SBO-IBC
28 STEPS DOWN 7 ½"R @ R 11T
29 1x8 FASICA –SEE DETAIL
30 FLOOR MATERIAL SBO-IBC
31 "OWENS CORNING" LAM. ARCH. ROOF SHINGLES BROWNWOOD
33 CATHEDRAL CEILING
34 TRAY CEILING
35 16"CONC BLOCK FOUND.WALL ON 12X 36 FOOTING W/(4) ST. REBARS BOTHWAYS CARRIED BELOW FROST LINE
36 6 "STEEL COL.ON 1-3 X 3-0 CONC FOOTING SEEDET.3/3 ON SHT 3
37 6" CONC.SLAB WITH 4 X 4 WWF ON 6" COMPACTED FILL SLOP FLOOR TO FRONT
38 12 X12 CONC FOOTING ON 36 X 36 CONC FOUNDATION W/(4) #5 ST. BARS BOTH WAYS– SEE DET.2/3 SHT3
39 CRAWL SPACE PER NYS IBC
40 LOAD BEARINGWALL
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42 STUCT. BEAM
43 2 X6 -16"0C ,R36 INSULATION – EXT SEATHING -1/2' DRY WALL SECOND FLOOR SIDING TO BE - CEDAR SHAKES BY"CEDAR VALLEY"
44 4 X4 CEDAR DECORATIVE BEAMS PAINTED
45 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46 CRICKRET/COOPER FLASHING
47 TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
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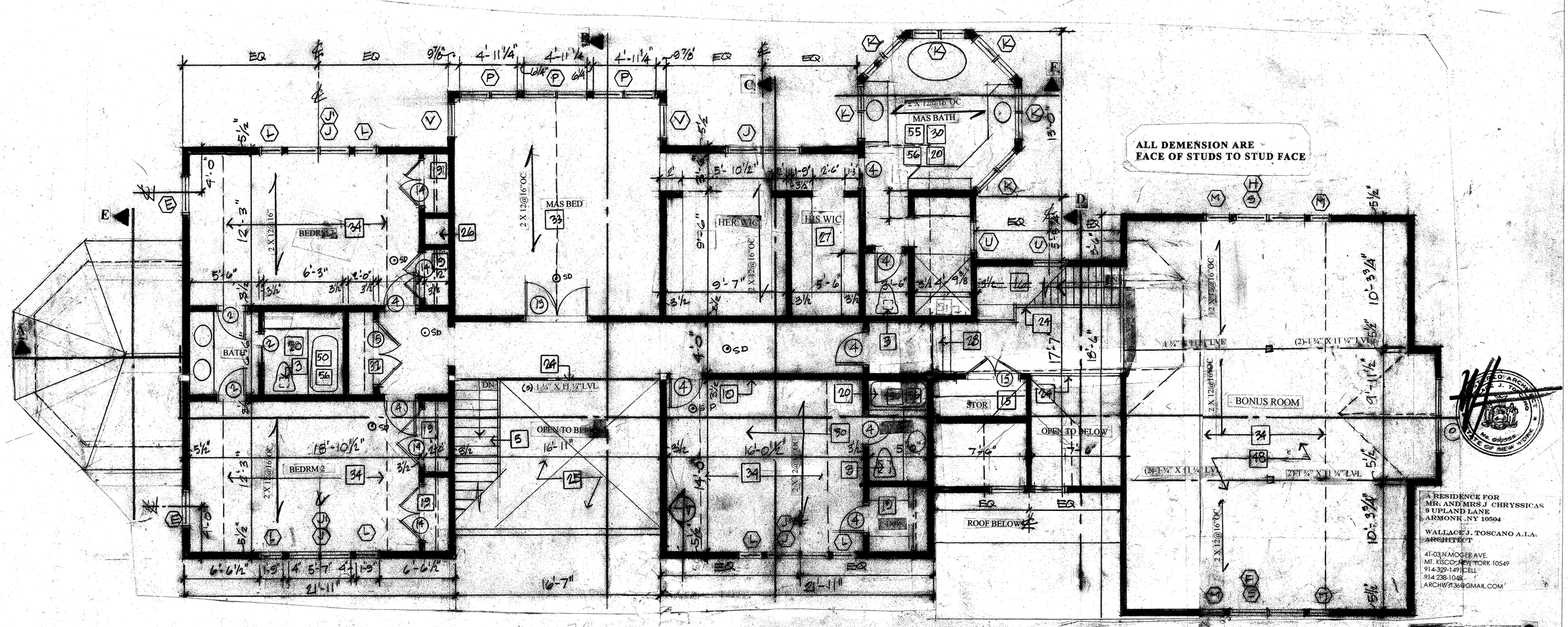

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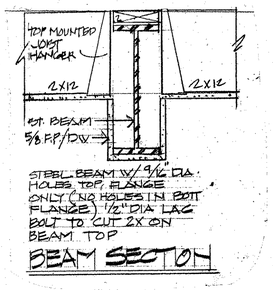
SECOND FLOOR 2

MARCH 23 2020



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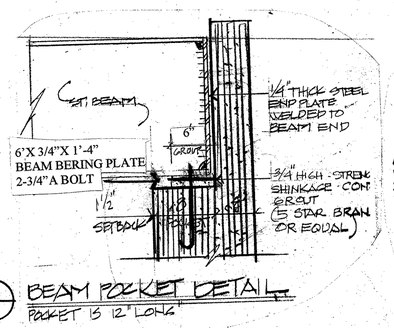

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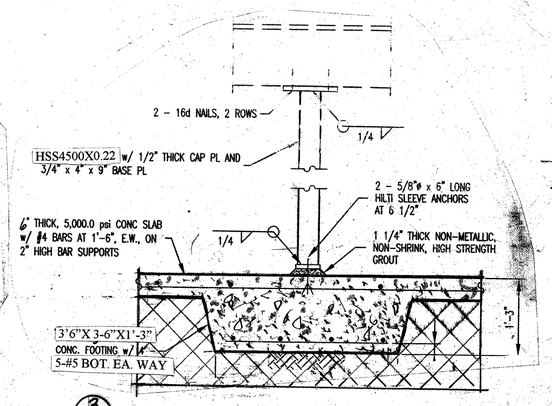
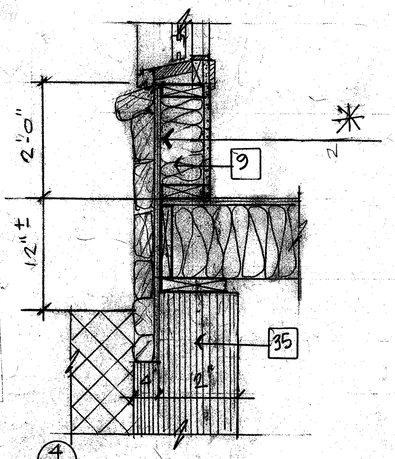


3/3



4/3

1 BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2 SHELF AND CLOTH POLE
3 EXHAUST FAN PANOSONIC FV08VQ2
4 LINE OF CEILING ABOVE
5 STAIRS UP 18R@ 7 ¾" 17 T @ 10 ½" PER NYS-IBC SECTION311
6 EDGE OF BALCONY ABOVE
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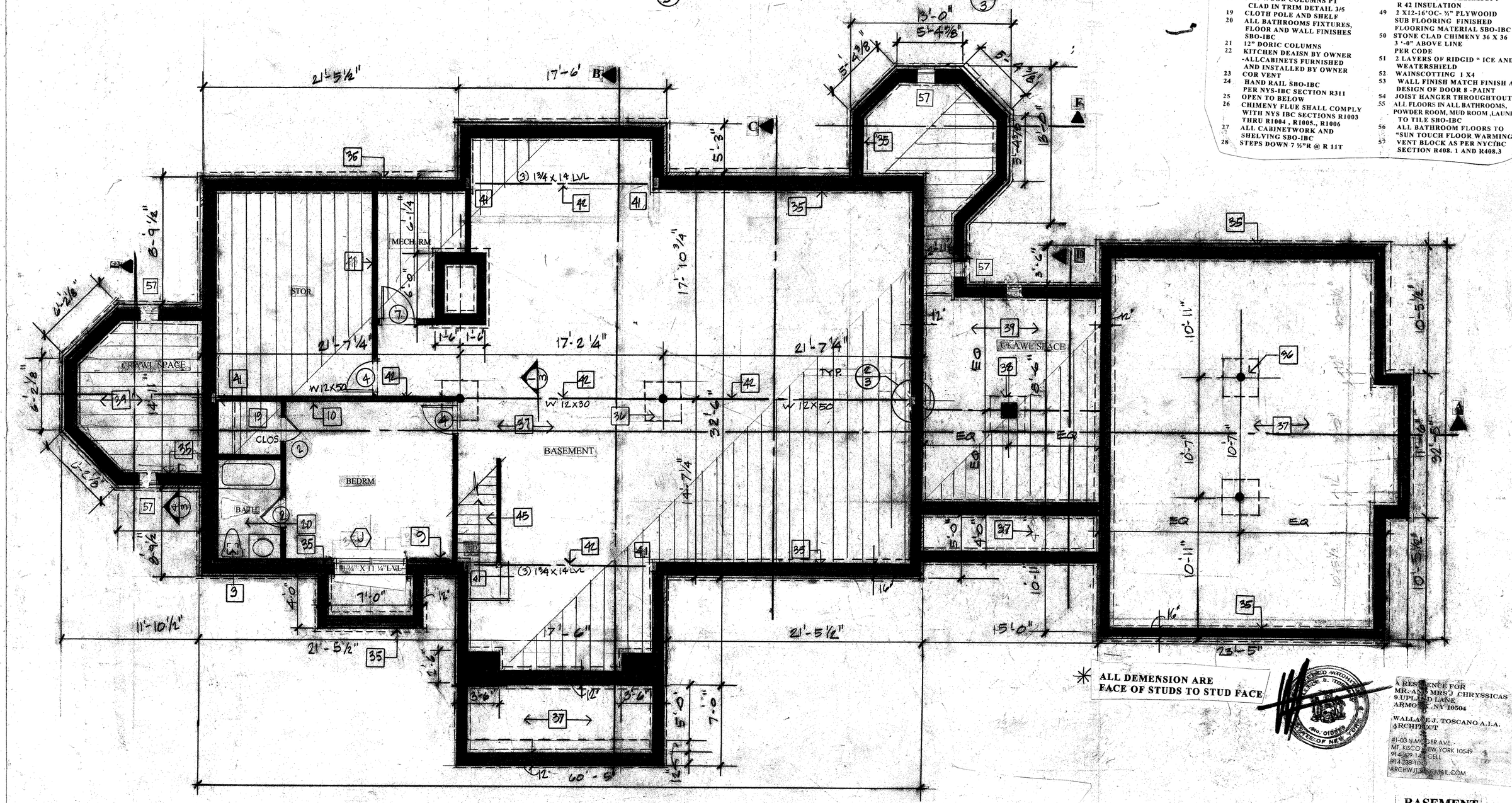

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BASEMENT
MARCH 23 2020

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29	1X8 FASCIA –SEE DETAIL	
30	FLOOR MATERIAL SBO-IBC	
31	"OWENS CORNING" LAM. ARCH.	
33	CATHEDRAL CEILING	
34	TRAY CEILING	
35	16"CONC BLOCK FOUND.WALL	
	ON 12X 36 FOOTING W/(4) ST.	
	REBARS BOTH WAYS	
36	6 "STEEL COL.ON 1-3 X 3-0 CONC	
	FOOTING SEE DET.3/3 ON SHT 3	
37	6" CONC.SLAB WITH 4 X 4 WWF	
	ON 6" COMPACTED FILL SLOP	
38	12 X12 CONC FOOTING ON 36 X 36	
	CONC FOUNDATION W/(4) #5 ST.	
	BARS BOTH WAYS–	
39	CRAWL SPACE PER NYS IRC	
40	LOAD BEARINGWALL	
41	FIRE PLACE FINISHES SBO-IRC	
42	STUCT. BEAM	
43	EXT SATHING -/2" DRY WALL	
	2 X6 -16"OC .R36 INSULATION –	
44	SECOND FLOOR SIDING TO BE	
	4 X4 CEDAR SHAKES BW"CEDAR VALLEY	
45	CEDAR SHAKES BW"CEDAR VALLEY"	
	PAINTED	
46	4" STONE VENEER –STYLE TO BE	
	SELECTED BY ARCHITECT	
47	CHICKERT/COOPER FLASHING	
48	TEE BEAM/TRAVECEILING	
	2 X10-16"OC-R42 INSUL.	
49	HEATING SYST BY" THERMSOFT"	
	R 42 INSULATION	
	2 X12-16"OC- ¾" PLYWOOD	
50	SUB FLOORING FINISHED	
	FLOORING MATERIAL SBO-IBC	
51	STONE CLAD CHIMENEY 36 X 36	
	3 '-0" ABOVE LINE	
52	2 LAYERS OF RIDGID " ICE AND	
	WEATHERSHIELD	
53	WAINSCOTTING 1 X4	
54	WALL FINISH MATCH FINISH AND	
	DESIGN OF DOOR 8 –PAINT	
55	JOIST HANGER THROUGHTOUT	
	ALL FLOORS IN ALL BATHROOMS.	
56	POWDER ROOM. MUD ROOM LAUNDRY	
	ALL BATHROOM FLOORS TO	
57	TO TILE SBO-IBC	
	"SUN TOUCH FLOOR WARMING"	
	VENT BLOCK AS PER MFGRC	
	SECTION R408. 1 AND R408.3	

1	BLUESTONE ON CONC. SLAB
	RANDOM PATTERN CRAFT
	TO MATCH
2	SHELF AND CLOTH POLE
3	EXHAUST FAN PANASONIC
	FV08VQ2
4	LINE OF CEILING ABOVE
5	STAIRS UP 18R@ 7 ¾"
	17 T @ 10 ½" PER NYS-IR
	SECTION311
6	EDGE OF BALCONY ABOVE
7	6 X 6 POST
8	SEE WOOD HEADER SCHEDULE
9	EXTERIOR WALL ON FIRST
	SHEET 1
	FLOOR 2 X6 16 " OC R36 ½ DW
	SHEATHING , 4" STONE VENEER
	STYLE TO BE SELECTED BY
	ARCHITECT
10	ALL INTERIOR WALLS TO BE 2 X4
	16" OC ¾" DRY WALL BOTH
	USE WATER PROOF DW
	ON ALL BATHROOM AND
	POWDER ROOM WALL–
11	GARAGE WALL -2X 6 16" O
	SOUND INSULATE
	5/8" FIRE PROOF DW BOTH SIDE
	R36 INSULATION
12	(3) 2X 12 BEAMS
13	6" STEEL COL SEE DETAIL 3/3
14	PANTRY SHELF BY OWNER
15	SHELVING BY OWNER
16	WOOD STAIRS 16R @7 ¾"
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	WASHER DRYER INSTALL
18	6 X6 WOOD COLUMNS PT
	"FLOOD SAVER"
19	CLAD IN TRIM DETAIL 3/5
20	CLOTH POLE AND SHELF
	ALL BATHROOMS FIXTURES
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24	COR VENT
	HAND RAIL SBO-IBC
25	PER NYS-IRC SECTION R311
26	OPEN TO BELOW
	CHIMENY FLUE SHALL COMPLY
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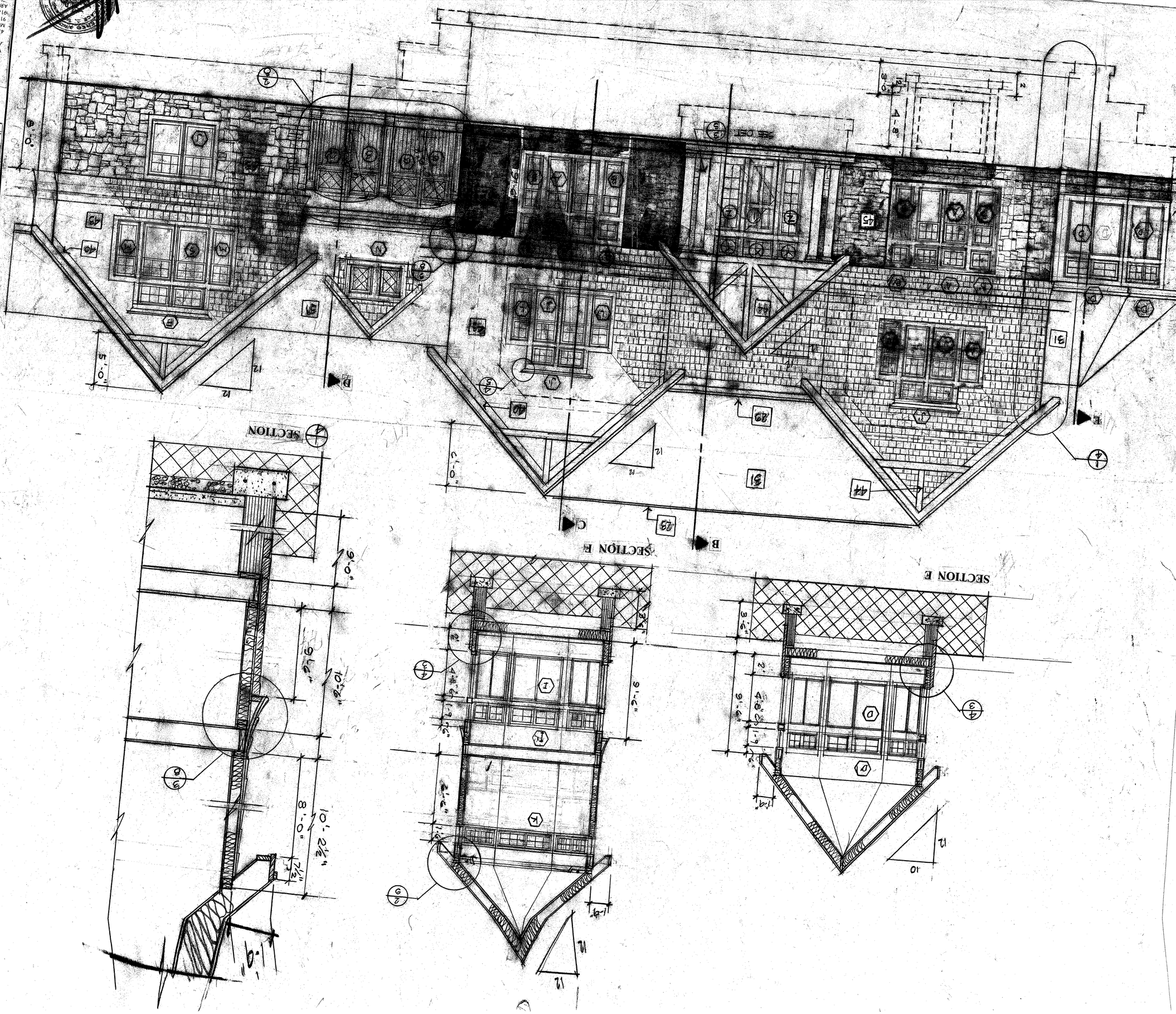
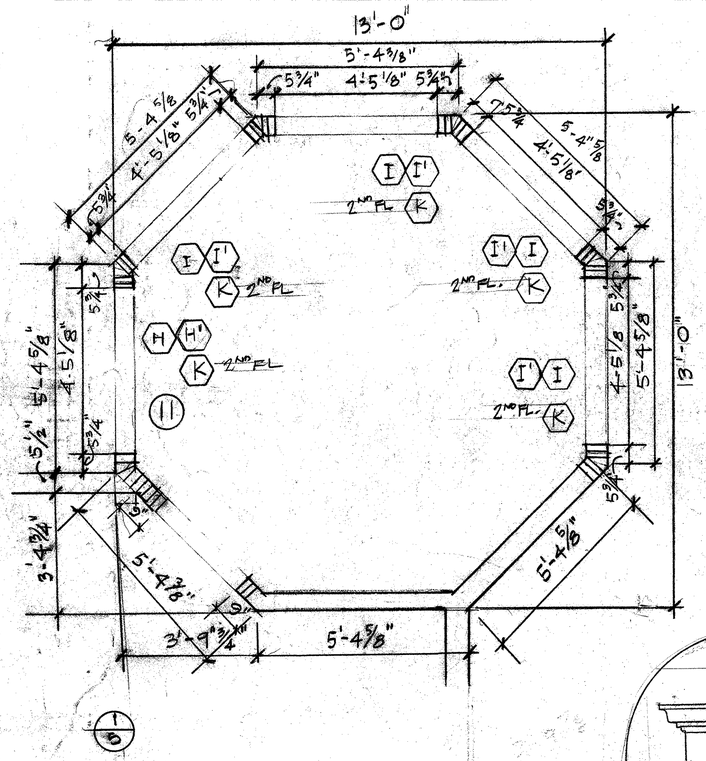
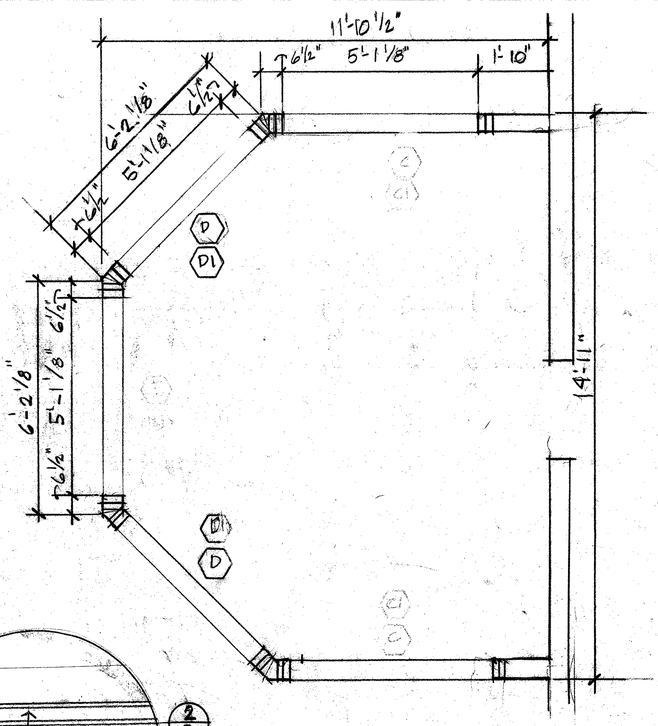
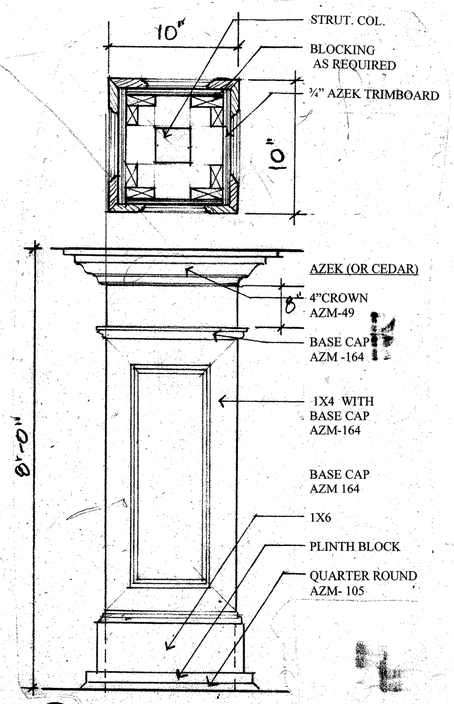
27	THRU R1004 , R1005, R1006
	ALL CABINETWORK AND
28	SHELVING SBO-IRC
	STEPS DOWN 7 ¾"R @ R LIT

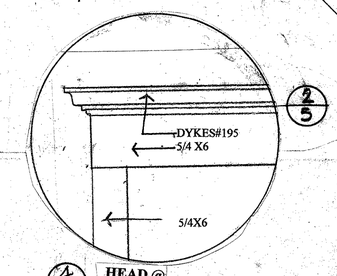

SECTION
SECTION E
SECTION E
SEE DET
D
B
C
E
12
10
9'-6"
10'-2"
8'-0"
10'-2 1/2"
1'-9"
3'-5"
2'-4"
6'-6"
1'-4"
1'-9"
1'-9"
1'-9



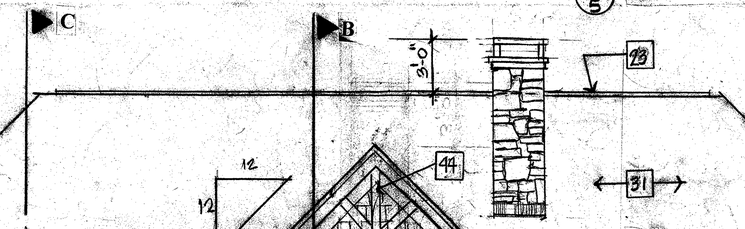


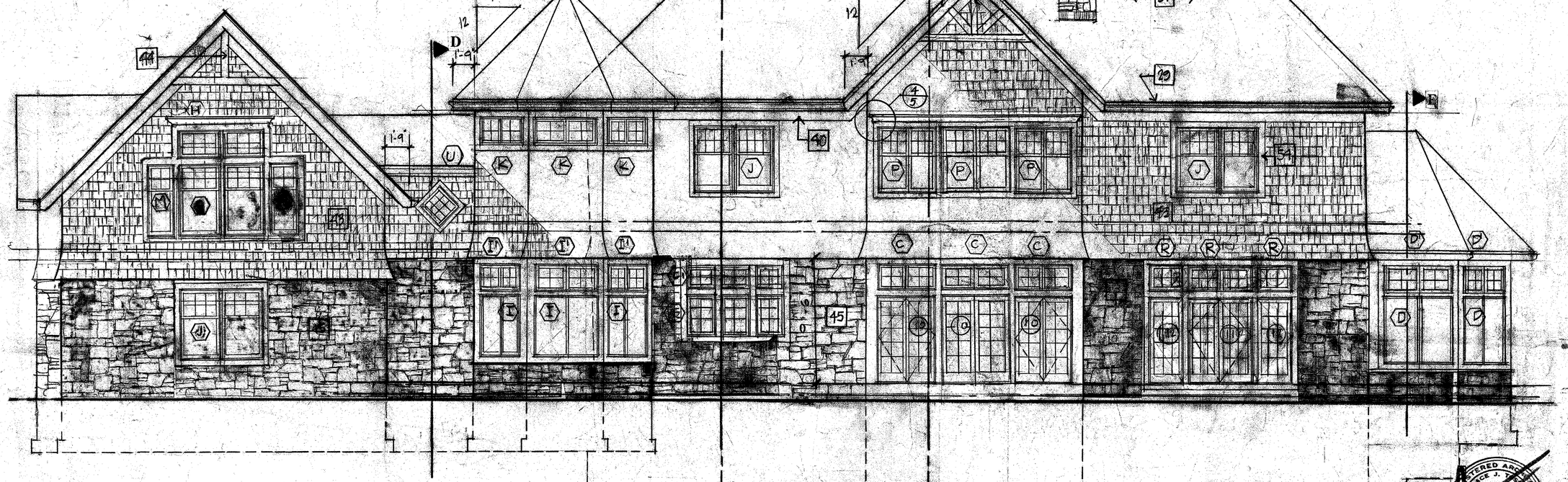


3/5 PORCH COLUMN 1/4"



4/5 HEAD @ WINDOWS





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REAR SIDE 1/4

MARCH 23 2020

5

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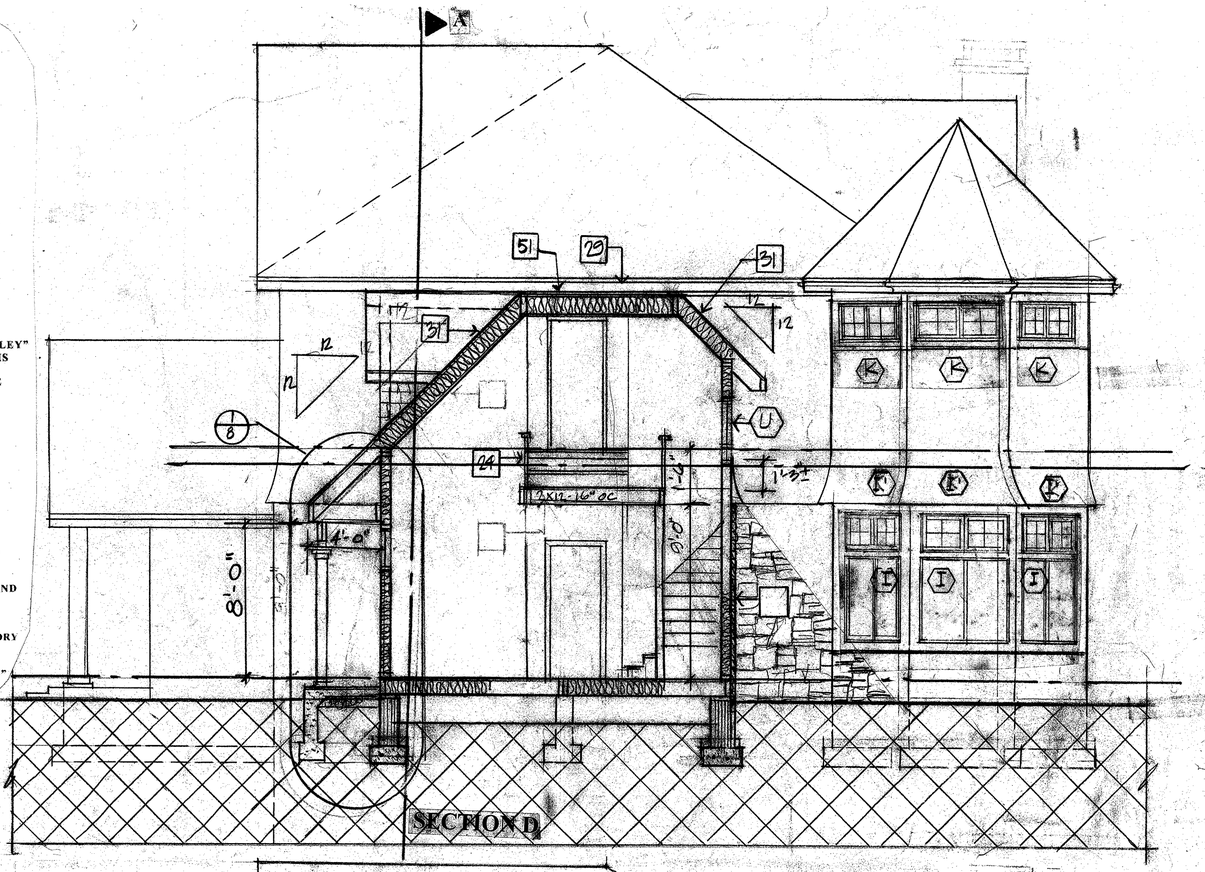

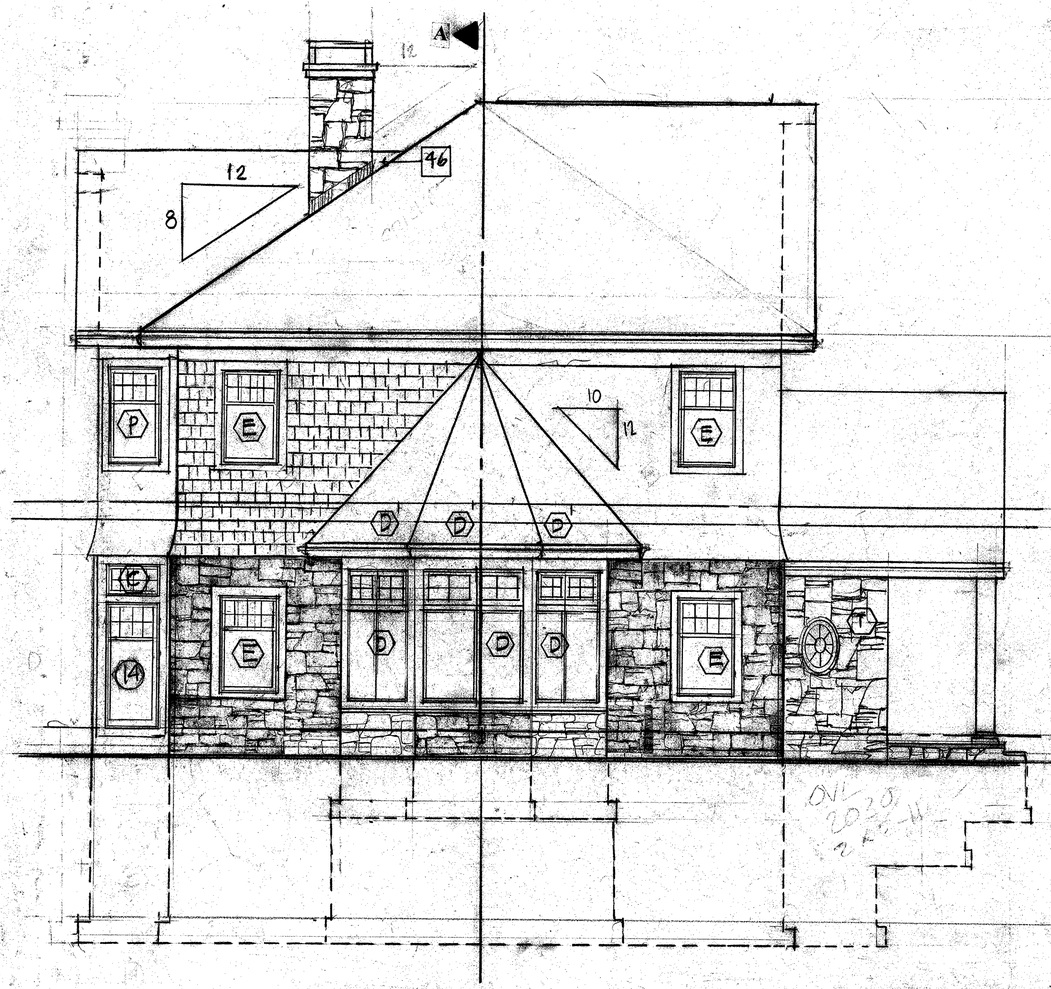

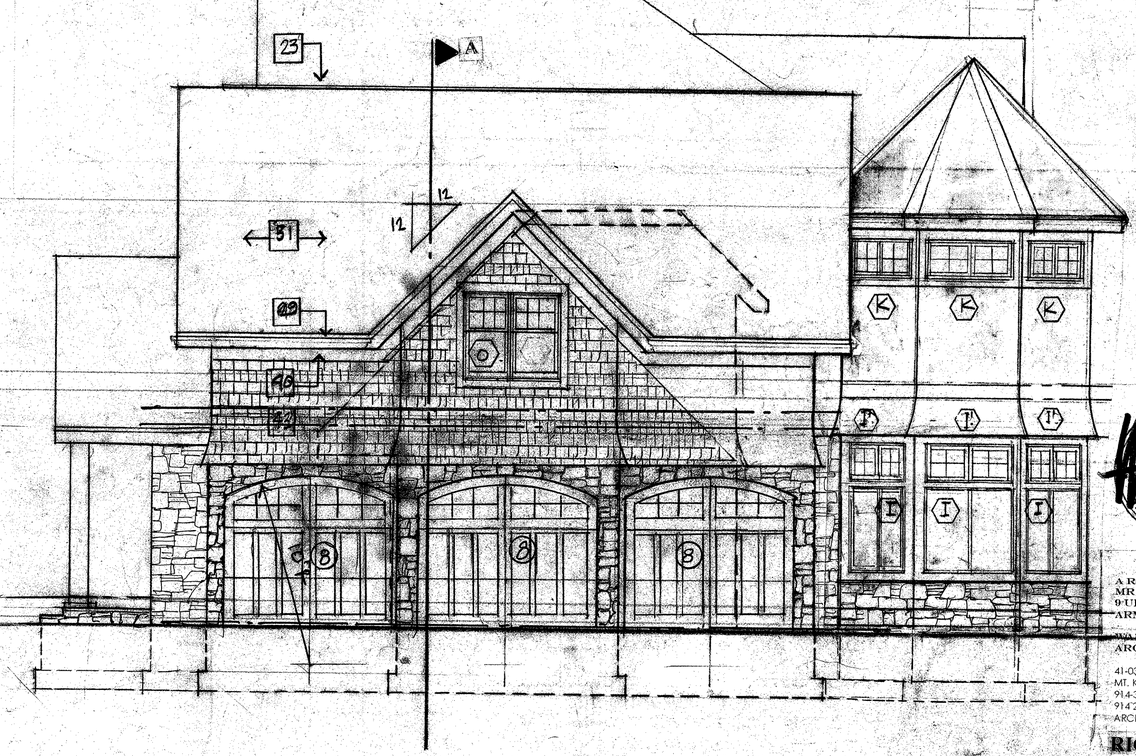

WALLACE J. TOSCANO
LICENSED ARCHITECT
No. 010550
STATE OF NEW YORK

A RESIDENCE FOR
MR. AND MRS J. CHRYSSICAS
9 UPLAND LANE
ARMONK, NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT
41-03 N.ROGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

RIGHT SIDE 1/4
LEFT SIDE 1/4

MARCH 23 2020

6

CHRYSSICAS RESIDENCE
ZONING CHART

LOT 101.4 SECTIONB 2C LOT 4,Zoning district R2

	REQUIRED	*EXISTING HOUSE*	*PROPOSED*
LOT AREA	20,000 SF	100,884 SF	NO CHANGE
WIDTH MIM.	**150**		**72'**
MIM. SETBACK			
FRONT	**50'**		**72'**
REAR	**50'**		**192'**
SIDE	**30'**		**45'**
MAX. LOT GROSS LAND COVERAGE	**14,302SF**		**10.744**
COVERAGE MAX BUILD COVERAGE	**8%**		**4.6%**
MIM DWELLING UNIT SIZE	**1400 SF**		**6378 SF**
FLOOR AREA RATIO	**10677SF**		**9.860 SF**
MAX. BUILD. HGT.	**--- 30' (2 ½)**		**28'**

WINDOW SCHUDULE

NUMBER	*UNIT SIZE* W x H	*MODEL*	*MANUFACTURE*
A	2-11 x 4-8	TW21046	ANDERSON
AI	2-11'X 1-9	TWT210017	"
B	1-9 X 4-8	TW1846	"
C	2-5 X 1-9 MULL PAIR	TWT1821	"
D	5-0 X 4-8 MULL PAIR	CUSTOM PAIR	"
DI	5-0 X 1-9 MULLPAIR	CUSTOM PAIR	"
E	2-11 X 4-8	TWT21046	"
G	2-0 X 2-11	CW123	"
GI	2-1 X 2-0	TWT2017	"
F	1-9 X 3-1	TWT3017	"
H	1-9 X 4-8	TW1846	"
HI	1-9 X 1-9	TW1817	"
I	4-4 X 4-8 MUL PAIR	CUSTOM	"
II	4-4 X 1-9 MUL PAIR	CUSTOM	"
J	3-1 X 4-8 EGRESS	TW 3046	"
JI	3-1 X 1-9	TW3017	"
K	4-4 x 1-6 MUL PAIR	CUSTOM	"
L	2-1 x 4-8	TW2046	"
M	2-1 X 5-4	TW 2052	"
N	2-11 X 2-11	CXW13	"
O	2-5 X 4-8	TW2446	"
P	2-1 x 4-8	TW2046	"
Q	2-2 X 2-2	WTR 201111	"
R	1-9 X 2-5	TWT 2417	"
S	3-1 X 5-4	TW 3052	"
T	2-0 X 2-11	OVL2030	"
U	2-7 x 2-5	TWT2623	"
V	3-1 X 4-8 EGRESS	TW3046	"
W	2-11 X 1-9	TWT21017	"
X	2-5 X 2-5	TWT2423	"
Y	2-5 x 3-1	TWT3023	"
Z	2-6 1/8"X6-8 SIDE LIGHT	FWH2768AR	"

DOOR SCHUDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
1	*3-0 X 6-8*		
2	*2-4 X 7-0*	*F44*	
3	*4-0X 7-0 PAIR*	"	*SIMPSON*
4	*2-6 X 7-0*	"	"
5	*2-6 X 6-8*	"	"
6	*2-6 X 7-0 PAIR*	"	"
7	*3-0 X 7-0 FIRE DOOR"*	*510*	"
8	*2-8X 6-8*	*F7228U*	*THERMA TRU*
9	*7-0 X 9-0 GARAGE*	*AS SHOWN*	*SIMPSON*
10	*4-0 X 6-8*	*FWH4168APLR*	*OVERHEAD DOORS*
11	*3-0 X 6-8*	*FWH5068APLR*	*ANDERSON*
12	*2-6 X6-8*	*FWH2768AR*	"
13	*5-0 X 6-8 PAIR*	*F44*	"
14	*4-0x 6-8 PAIR*	"	*SIMPSON*
15	5-0 X6-8 PAIR	"	"

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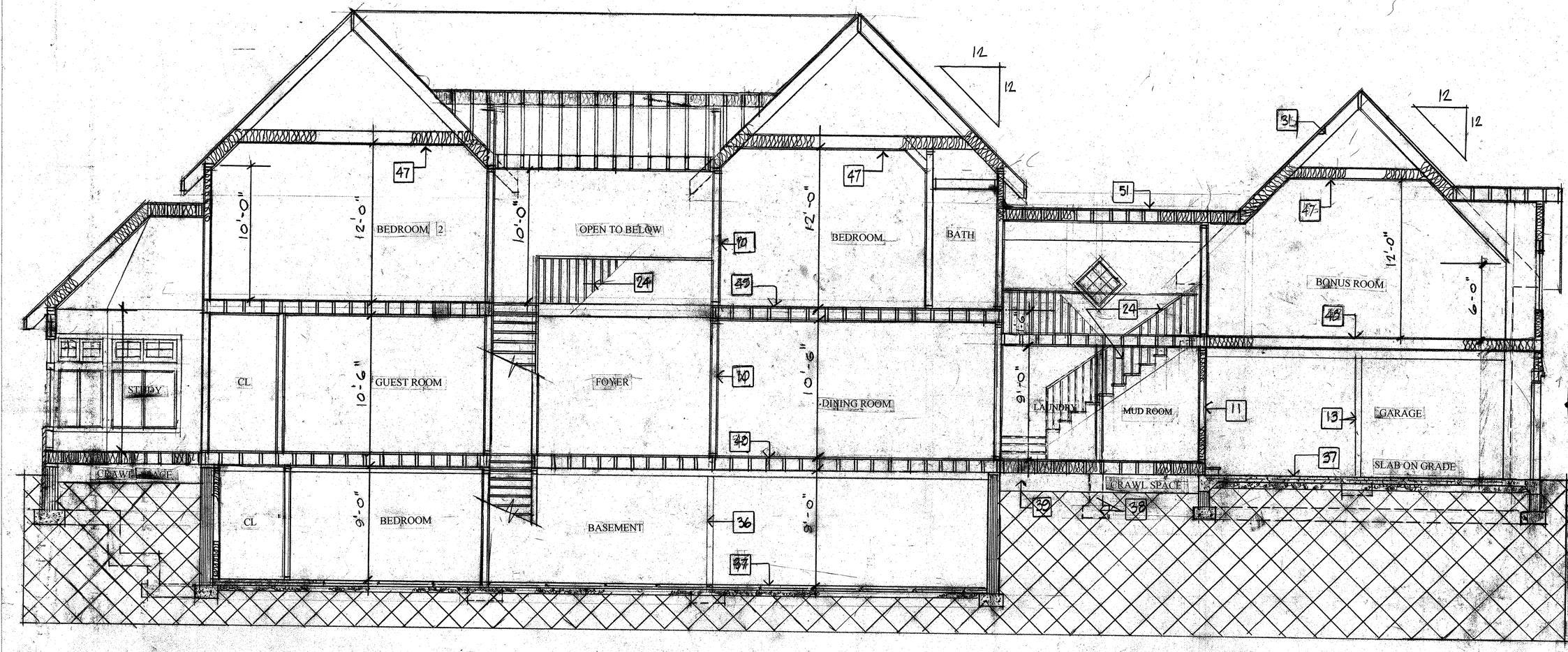

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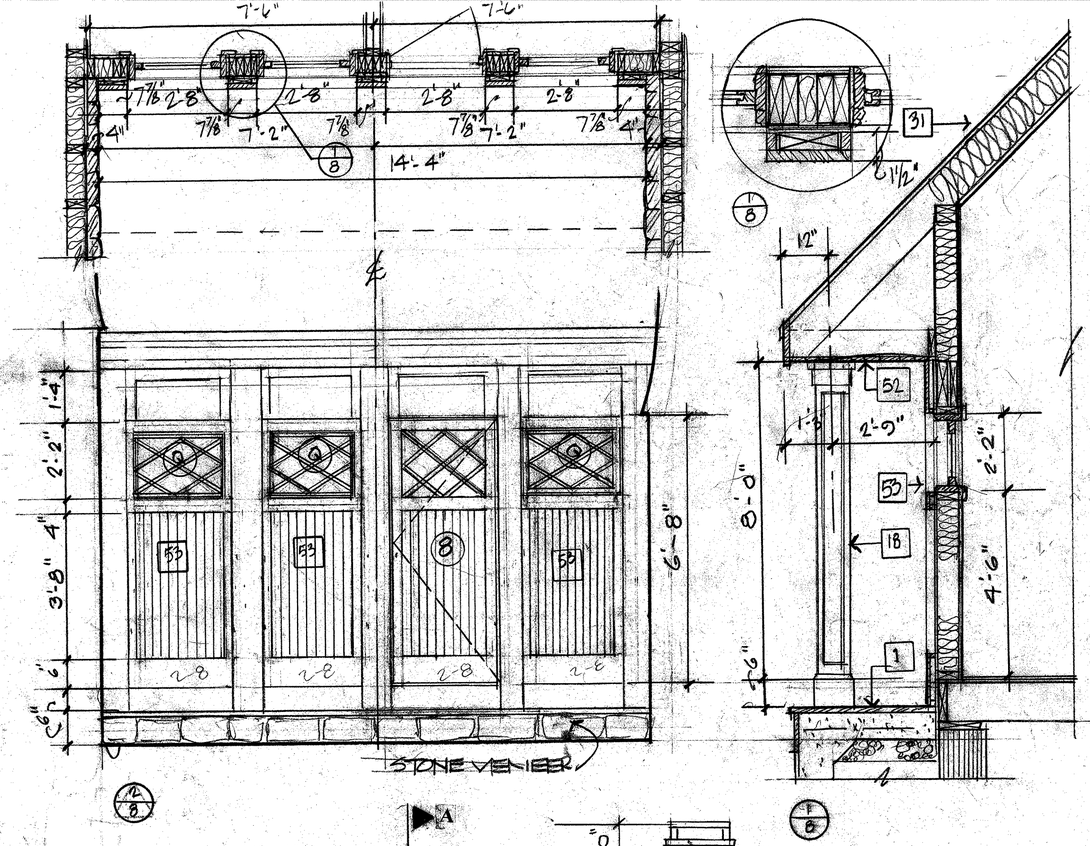
SECTION A
MARCH 23 2020



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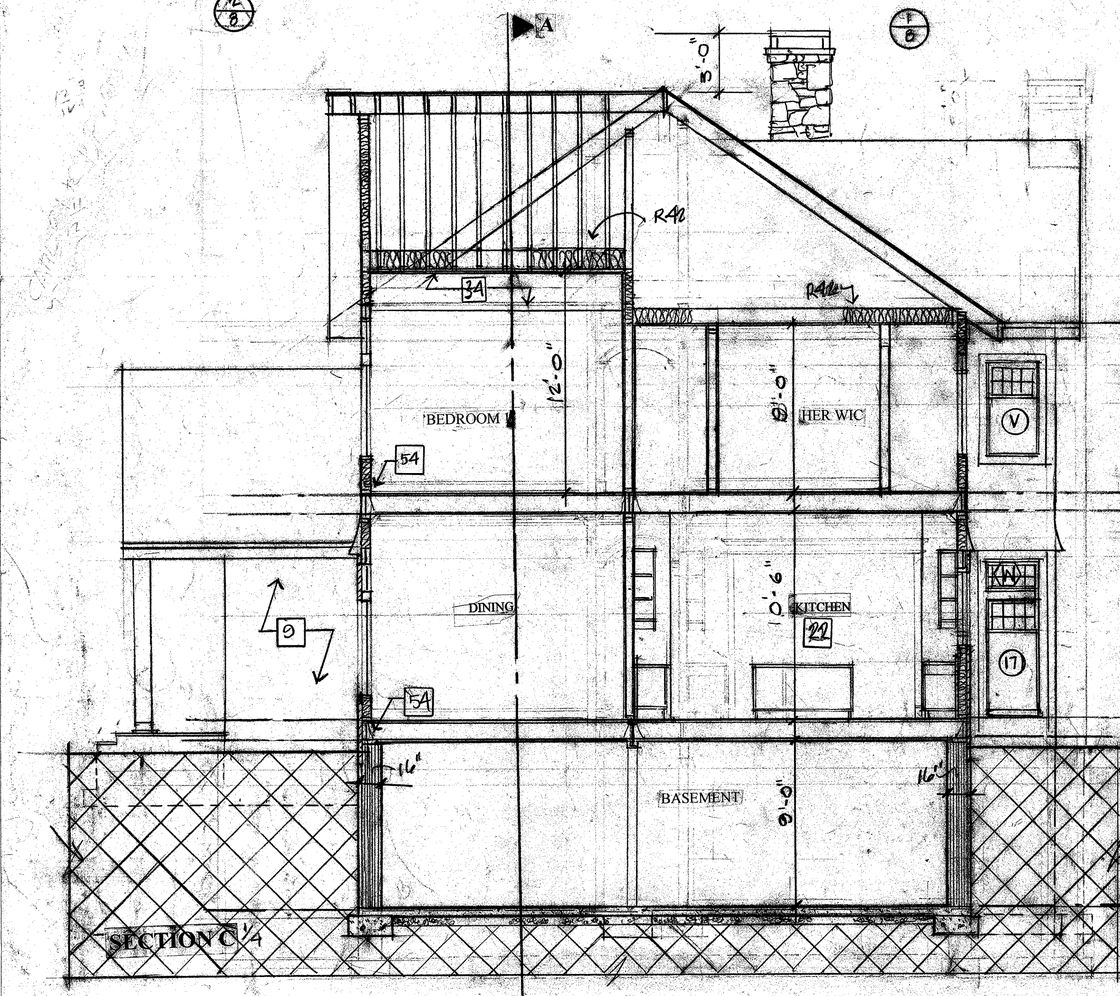

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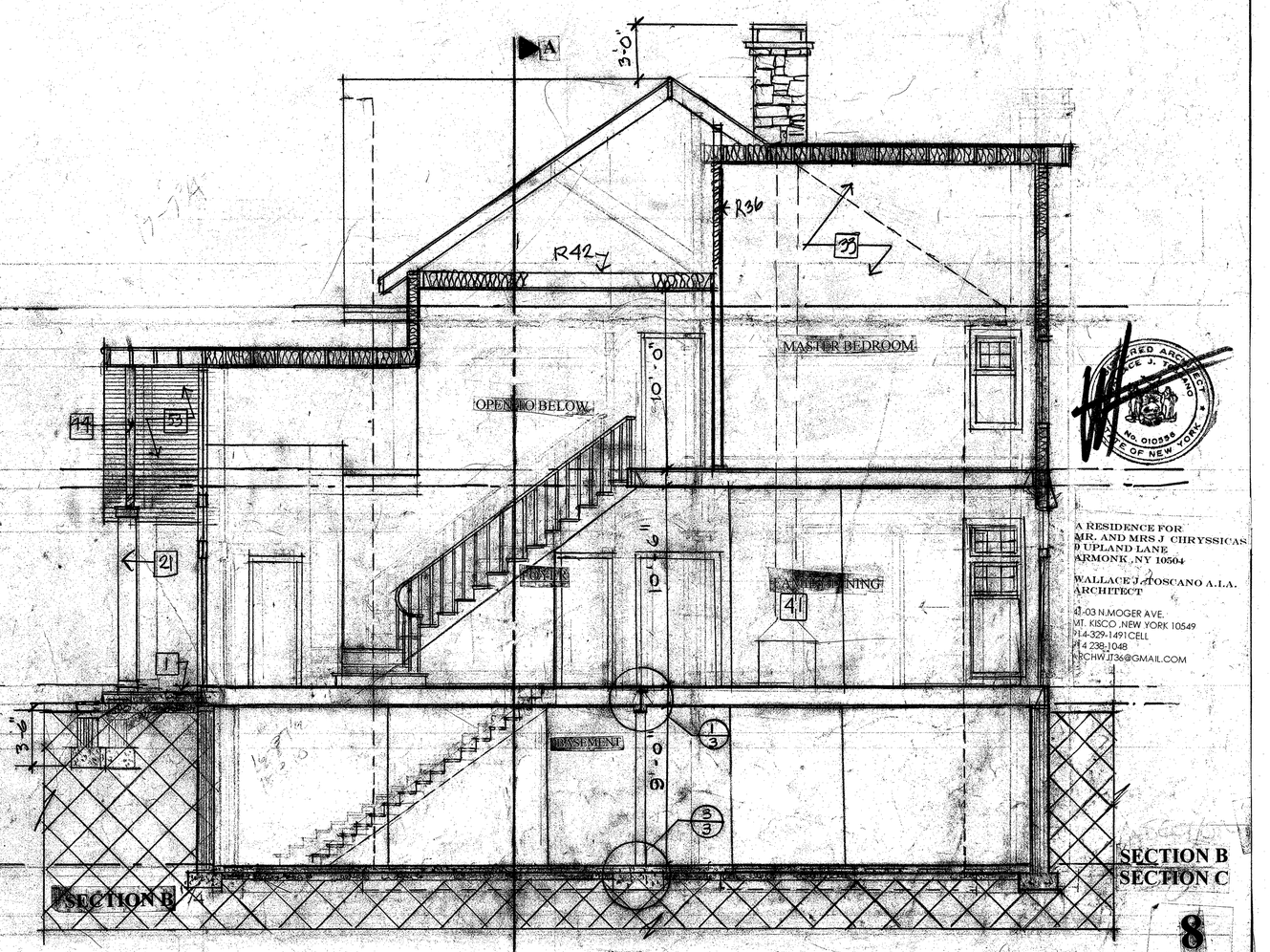

SECTION B 1/4

A RESIDENCE FOR
MR. AND MRS J. CHRYSSICAS
9 UPLAND LANE
ARMONK , NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

47-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
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SECTION B
SECTION C

8

MARCH 23 2020

TOWN OF NORTH CASTLE
WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING DEPARTMENT
Adam R. Kaufman, AICP
Director of Planning

Telephone: (914) 273-3542
Fax: (914) 273-3554
www.northcastleny.com

Application for Special Use Permit Approval

Application Name

CHRYSSICAS RESIDENCE

TOWN OF NORTH CASTLE
WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING DEPARTMENT
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PLANNING BOARD SCHEDULE OF ESCROW ACCOUNT DEPOSITS

Type of Application Deposit*	Amount of Initial Escrow Account
Concept Study	$500.00
Site Plan Waiver for Change of Use	$500.00
Site Development Plan for:	
Multifamily Developments	$3,000.00 plus $100.00 per proposed dwelling unit
Commercial Developments	$3,000.00 plus $50.00 for each required parking space
1 or 2 Family Projects	$2,000.00
Special Use Permit	$2,000.00 plus $50.00 for each required parking space
Subdivision:	
Lot Line Change resulting in no new lots	$1,500.00
All Others	$3,000.00 plus $200.00 per proposed new lot in excess of two (2)
Preparation or Review of Environmental Impact Statement	$15,000.00

* If a proposed action involves multiple approvals, a single escrow account will be established. The total amount of the initial deposit shall be the sum of the individual amounts indicated. When the balance in such escrow account is reduced to one-third (1/3) of its initial amount, the applicant shall deposit additional funds into such account to restore its balance to the amount of the initial deposit.

Wallace E. — 5.27.20

Applicant Signature — Date

Short Environmental Assessment Form
Part 1 - Project Information

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:
CHRTSSICAS RESDENCE

Project Location (describe, and attach a location map):
9 UPLAND LANE

Brief Description of Proposed Action:
NEW 2 STORT RESDENCE

Name of Applicant or Sponsor:
WALLACE J. TOSCANO AIA

Telephone: 914 329 1491
ARCHWJT36@GMAIL.COM

Address:
41-03 MOGER AVE, #4

City/PO:
MT. KISCO

State: NY

Zip Code: 10545

	NO	YES
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.	☒	☐
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:	☒	☐

3 a. Total acreage of the site of the proposed action? 2.316 acres
b. Total acreage to be physically disturbed? .278 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.
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☒ Residential (suburban)
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other (specify): _____
☐ 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?	☐	☐	☐

	NO	YES
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	☐	☑
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	☒	☐
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?	☒	☐
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:	☐	☒
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	☒	☐
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	☒	☐
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?	☒	☐
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: _____	☒	☐

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:
☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional
☐ Wetland ☐ Urban ☒ Suburban

	NO	YES
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?	☒	☐
16. Is the project site located in the 100 year flood plain?	☒	☐
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? ☒ NO ☐ YES	☒	☐
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: ☐ NO ☒ YES		

	NO	YES
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:	☒	☐
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:	☒	☐
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:	☒	☐

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: WALLACE J. TOSCANO Date: 5.29.20

Signature:

PRINT FORM

I. IDENTIFICATION OF PROPERTY OWNER, APPLICANT AND PROFESSIONAL REPRESENTATIVES

Name of Property Owner: MR&MRS J. CHRTSSICAS

Mailing Address: 18 MAPLE WAY

Telephone: 914 213 4322 Fax: _____ e-mail: JCHRTSSICAS@GMAIL.COM

Name of Applicant (if different): W. TOSCANO

Address of Applicant: 41 N. MOGER AVE, MT. KISCO NY

Telephone: 914 329-1491 Fax: _____ e-mail: ARCHWST3G@GMAIL.COM

Interest of Applicant, if other than Property Owner: ARCHITECT

Is the Applicant (if different from the property owner) a Contract Vendee?

Yes ☐ No ☑

If yes, please submit affidavit stating such. If no, application cannot be reviewed by Planning Board

Name of Professional Preparing Site Plan: _____

Address: W. TOSCANO

Telephone: 914-329-1491 Fax: _____ e-mail: ARCHWST3G@GMAIL.COM

Name of Other Professional: —

Address: _____

Telephone: _____ Fax: _____ e-mail _____

Name of Attorney (if any): —

Address: _____

Telephone: _____ Fax: _____ e-mail _____

Applicant Acknowledgement

By making this application, the undersigned Applicant agrees to permit Town officials and their designated representatives to conduct on-site inspections in connection with the review of this application.

The Applicant also agrees to pay all expenses of publication and the giving of public notice as required, and further acknowledges that he/she shall be responsible for reimbursing the Town for the cost of professional review services required for this application.

It is further acknowledged by the Applicant that all bills for the expenses of publication and the giving of public notice as well as professional consultant review services shall be mailed to the Applicant, unless the Town is notified in writing by the Applicant at the time of initial submission of the application that such mailings should be sent to a designated representative instead.

Signature of Applicant: _____ Date: 5.28.20

Signature of Property Owner: _____ Date: 5.28.20

MUST HAVE BOTH SIGNATURES

II. IDENTIFICATION OF SUBJECT PROPERTY

Street Address: 9 UPLAND LANE

Location (in relation to nearest intersecting street):

200 feet (north, south, east or west) of MAPLE NOT

Abutting Street(s): _____

Tax Map Designation (NEW): Section 101.4 Block 2 Lot 4

Tax Map Designation (OLD): Section _____ Block _____ Lot _____

Zoning District: R2 Total Land Area 100,884

Land Area in North Castle Only (if different) ~

Fire District(s) _____ School District(s) _____

Is any portion of subject property abutting or located within five hundred (500) feet of the following:

The boundary of any city, town or village?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____
If yes, please identify name(s): _____

The boundary of any existing or proposed County or State park or any other recreation area?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The right-of-way of any existing or proposed County or State parkway, thruway, expressway, road or highway?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The existing or proposed right-of-way of any stream or drainage channel owned by the County or for which the County has established channel lines?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The existing or proposed boundary of any county or State owned land on which a public building or institution is situated?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The boundary of a farm operation located in an agricultural district?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

Does the Property Owner or Applicant have an interest in any abutting property?
No ✓ Yes _____

If yes, please identify the tax map designation of that property:

_____

III. DESCRIPTION OF PROPOSED DEVELOPMENT

Type of Special Use Permit:

Accessory Apartment _____

Accessory Structure over 800 square feet ✓

Gross Floor Area: Existing _____ S.F. Proposed _____ S.F.

Number of Parking Spaces: Existing _____ Proposed _____

Earthwork Balance: Cut _____ C.Y. Fill _____ C.Y. _____

Will Development on the subject property involve any of the following:

Areas of special flood hazard? No ✓ Yes _____
(If yes, application for a Development Permit pursuant to Chapter 177 of the North Castle Town Code may also be required)

Trees with a diameter at breast height (DBH) of 8" or greater?
No ✓ Yes _____
(If yes, application for a Tree Removal Permit pursuant to Chapter 308 of the North Castle Town Code may also be required.)

Town-regulated wetlands? No ✓ Yes _____
(If yes, application for a Town Wetlands Permit pursuant to Chapter 340 of the North Castle Town Code may also be required.)

State-regulated wetlands? No ✓ Yes _____
(If yes, application for a State Wetlands Permit may also be required.)

V. INFORMATION TO BE INCLUDED ON SPECIAL USE PERMIT SITE PLAN

The following checklist is provided to enable the Applicant to determine if he/she has provided enough information on the special use permit plan for the Planning Board to review his/her proposal. Applicants are advised to review Chapter 355 Article VII of the North Castle Town Code for a complete enumeration of pertinent requirements and standards prior to making application for special use permit approval.

The application for special use permit approval will not be accepted for Planning Board review unless all items identified below are supplied and **so indicated with a check mark in the blank line provided.** If a particular item is not relevant to the subject property or the development proposal, **the letters "NA" should be entered instead**.

The information to be included on a site development plan shall include:

Legal Data:

✓ Name of the application or other identifying title.

✓ Name and address of the Property Owner and the Applicant, (if different).

✓ Name, address and telephone number of the architect, engineer or other legally qualified professional who prepared the plan.

___ Names and locations of all owners of record of properties abutting and directly across any and all adjoining streets from the subject property, including the tax map designation of the subject property and abutting and adjoining properties, as shown on the latest tax records.

✓ Existing zoning, fire, school, special district and municipal boundaries.

✓ Size of the property to be developed, as well as property boundaries showing dimensions and bearings as determined by a current survey; dimensions of yards along all property lines; name and width of existing streets; and lines of existing lots, reservations, easements and areas dedicated to public use.

___ Reference to the location and conditions of any covenants, easements or deed restrictions that cover all or any part of the property, as well as identification of the document where such covenants, easements or deed restrictions are legally established.

✓ Schedule of minimum zoning requirements, as well as the plan's proposed compliance with those requirements, including lot area, frontage, lot width, lot depth, lot coverage, yards, off-street parking, off-street loading and other pertinent requirements.

✓ Locator map, at a convenient scale, showing the Applicant's entire property in relation to surrounding properties, streets, etc., within five hundred (500) feet of the site.

✓ North arrow, written and graphic scales, and the date of the original plan and all revisions, with notation identifying the revisions.

___ A signature block for Planning Board endorsement of approval.

Existing Conditions Data:

✓ Location use and design of existing buildings, identifying first floor elevation, and other structures.

____ Location of existing facilities for water supply, sanitary sewage disposal, storm water drainage, and gas and electric service, with pipe sizes, grades, rim and inverts, direction of flow, etc. indicated.

✓ Location of all other existing site improvements, including pavement, walks, curbing, retaining walls and fences.

____ Location, type, direction, power and time of use of existing outdoor lighting.

____ Existing topographical contours with a vertical interval of two (2) feet or less.

____ Location of existing floodplains, wetlands, slopes of 15% or greater, wooded areas, landscaped areas, single trees with a DBH of 8" or greater, rock outcrops, stone walls and any other significant existing natural or cultural features.

Proposed Development Data:

____ Proposed location of lots, streets, and public areas, and property to be affected by proposed easements, deed restrictions and covenants.

✓ Proposed location, use and architectural design of all buildings, including proposed floor plans and elevations.

✓ Proposed means of vehicular and pedestrian access to and egress from the site onto adjacent streets.

____ Proposed sight distance at all points of vehicular access.

____ Proposed streets, with profiles indicating grading and cross-sections showing the width of the roadway; the location and width of sidewalks; and the location and size of utility lines.

____ Proposed location and design of any pedestrian circulation on the site and off-street parking and loading areas, including handicapped parking and ramps, and including details of construction, surface materials, pavement markings and directional signage.

____ Proposed location and design of facilities for water supply, sanitary sewage disposal, storm water drainage, and gas and electric service, with pipe sizes, grades, rim and inverts, direction of flow, etc. indicated.

____ Proposed location of all structures and other uses of land, such as walks, retaining walls, fences, designated open space and/or recreation areas and including details of design and construction.

____ Location, type, direction, power and time of use of proposed outdoor lighting.

____ Location of proposed landscaping and buffer screening areas, including the type (scientific and common names), size and amount of plantings.

____ The proposed location, size, design and use of all temporary structures and storage areas to be used during the course of construction.

____ Proposed grade elevations, clearly indicating how such grades will meet existing grades of adjacent properties or the street.

____ Proposed soil erosion and sedimentation control measures.

____ For all proposed plans containing land within an area of special flood hazard, the data required to ensure compliance with Chapter 177 of the North Castle Town Code.

____ For all proposed plans involving clearing or removal of trees with a DBH of 8" or greater, the data required to ensure compliance with Chapter 308 of the North Castle Town Code.

____ For all proposed plans involving disturbance to Town-regulated wetlands, the data required to ensure compliance with Chapter 340 of the North Castle Town Code.

The special use permit application package shall also include a narrative document that demonstrates compliance with the following:

✓ The location and size of the use, the nature and intensity of the operations involved in it or conducted in connection with it, the size of the site in relation to it and the location of the site with respect to streets giving access to it are such that it will be in harmony with the appropriate and orderly development of the district in which it is located and that it complies with all special requirements for such use.

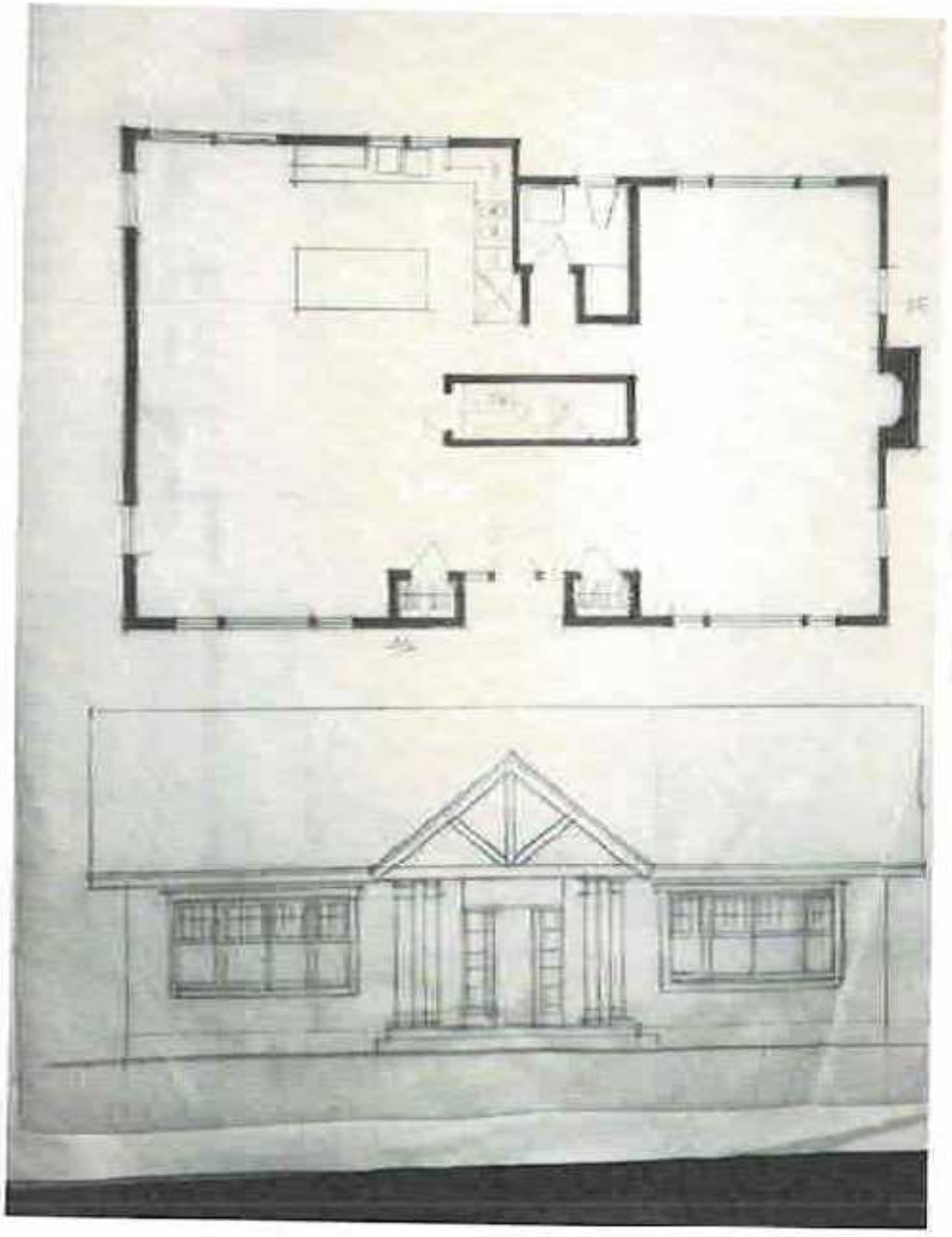
✓ The location, nature and height of buildings, walls, fences and the nature and extent of existing or proposed plantings on the site are such that the use will not hinder or discourage the appropriate development and use of adjacent land and buildings.

✓ Operations in connection with any special use will not be more objectionable to nearby properties by reason of noise, fumes, vibration or other characteristics than would be the operations of any permitted uses not requiring a special permit.

✓ Parking areas will be of adequate size for the particular use, properly located and suitably screened from adjoining residential uses, and the entrance and exit drives shall be laid out so as to achieve maximum convenience and safety.

✓ Where required, The provisions of the Town Flood Hazard Ordinance shall be met.

✓ The proposed special permit use will not have a significant adverse effect on the environment.



PROPOSED ALTERATION TO THE
EXISTING HOUSE AT 9 UPLAND LANE

CHRYSSICAS RESIDENCE
ZONING CHART

LOT 101.4 SECTIONB 2C LOT 4,Zoning district R2

	REQUIRED	*EXISTING HOUSE*	*PROPOSED*
LOT AREA	20,000 SF	100,884 SF	NO CHANGE
WIDTH MIM.	**150**		**72'**
MIM. SETBACK			
FRONT	**50'**		**72'**
REAR	**50'**		**192'**
SIDE	**30'**		**45'**
MAX. LOT GROSS LAND COVERAGE	**14,302SF**		**10.744**
COVERAGE MAX BUILD COVERAGE	**8%**		**4.6%**
MIM DWELLING UNIT SIZE	**1400 SF**		**6378 SF**
FLOOR AREA RATIO	**10677SF**		**9.860 SF**
MAX. BUILD. HGT.	**--- 30' (2 ½)**		**28'**

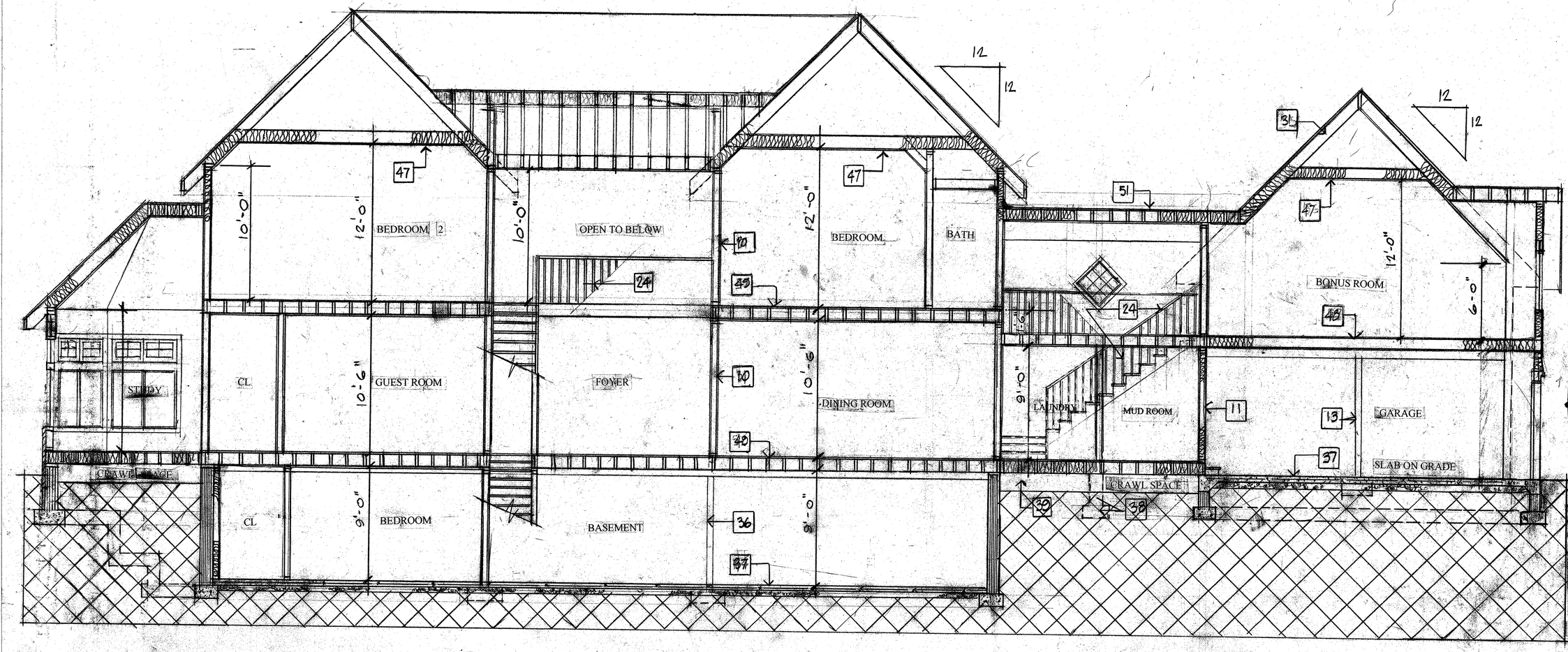
WINDOW SCHUDULE

NUMBER	*UNIT SIZE* W x H	*MODEL*	*MANUFACTURE*
A	2-11 x 4-8	TW21046	ANDERSON
AI	2-11'X 1-9	TWT210017	"
B	1-9 X 4-8	TW1846	"
C	2-5 X 1-9 MULL PAIR	TWT1821	"
D	5-0 X 4-8 MULL PAIR	CUSTOM PAIR	"
DI	5-0 X 1-9 MULLPAIR	CUSTOM PAIR	"
E	2-11 X 4-8	TWT21046	"
G	2-0 X 2-11	CW123	"
GI	2-1 X 2-0	TWT2017	"
F	1-9 X 3-1	TWT3017	"
H	1-9 X 4-8	TW1846	"
HI	1-9 X 1-9	TW1817	"
I	4-4 X 4-8 MUL PAIR	CUSTOM	"
II	4-4 X 1-9 MUL PAIR	CUSTOM	"
J	3-1 X 4-8 EGRESS	TW 3046	"
JI	3-1 X 1-9	TW3017	"
K	4-4 x 1-6 MUL PAIR	CUSTOM	"
L	2-1 x 4-8	TW2046	"
M	2-1 X 5-4	TW 2052	"
N	2-11 X 2-11	CXW13	"
O	2-5 X 4-8	TW2446	"
P	2-1 x 4-8	TW2046	"
Q	2-2 X 2-2	WTR 201111	"
R	1-9 X 2-5	TWT 2417	"
S	3-1 X 5-4	TW 3052	"
T	2-0 X 2-11	OVL2030	"
U	2-7 x 2-5	TWT2623	"
V	3-1 X 4-8 EGRESS	TW3046	"
W	2-11 X 1-9	TWT21017	"
X	2-5 X 2-5	TWT2423	"
Y	2-5 x 3-1	TWT3023	"
Z	2-6 1/8"X6-8 SIDE LIGHT	FWH2768AR	"

DOOR SCHUDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
1	*3-0 X 6-8*		
2	*2-4 X 7-0*	*F44*	
3	*4-0X 7-0 PAIR*	"	*SIMPSON*
4	*2-6 X 7-0*	"	"
5	*2-6 X 6-8*	"	"
6	*2-6 X 7-0 PAIR*	"	"
7	*3-0 X 7-0 FIRE DOOR"*	*510*	"
8	*2-8X 6-8*	*F7228U*	*THERMA TRU*
9	*7-0 X 9-0 GARAGE*	*AS SHOWN*	*SIMPSON*
10	*4-0 X 6-8*	*FWH4168APLR*	*OVERHEAD DOORS*
11	*3-0 X 6-8*	*FWH5068APLR*	*ANDERSON*
12	*2-6 X6-8*	*FWH2768AR*	"
13	*5-0 X 6-8 PAIR*	*F44*	"
14	*4-0x 6-8 PAIR*	"	*SIMPSON*
15	5-0 X6-8 PAIR	"	"

1 BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2 SHELF AND CLOTH POLE
3 EXHAUST FAN PANOSONIC FV08VQ2
4 LINE OF CEILING ABOVE
5 STAIRS UP 18R@ 7 ¾' 17 T @ 10 ½" PER NYS-IBC SECTION311
6 EDGE OF BALCONY ABOVE
7 6 X 6 POST
8 SEE WOOD HEADER SCHEDULE SHEET 1
9 EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHG , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
10 ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND POWDER ROOM WALL- SOUND INSULATE
11 GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
12 (3) 2X 12 BEAMS
13 6" STEEL COL SEE DETAIL 3/3
14 PANTRY SHELF BY OWNER
15 SHELVING BY OWNER
16 WOOD STAIRS 16R @7 ½" 15 T @ 10"
17 WASHER DRYER INSTALL "FLOOD SAVER"
18 6 X6 WOOD COLUMNS PT CLAD IN TRIM DETAIL 3/5
19 CLOTH POLE AND SHELF
20 ALL BATHROOMS FIXTURES, FLOOR AND WALL FINISHES SBO-IBC
21 12" DORIC COLUMNS
22 KITCHEN DEAISN BY OWNER -ALLCABINETS FURNISHED AND INSTALLED BY OWNER
23 COR VENT
24 HAND RAIL SBO-IBC PER NYS-IBC SECTION R311
25 OPEN TO BELOW
26 CHIMENY FLUE SHALL COMPLY WITH NYS IBC SECTIONS R1003 THRU R1004 , R1005., R1006
27 ALL CABINETWORK AND SHELVING SBO-IBC
28 STEPS DOWN 7 ½"R @ R 11T
29 1;8 FASICA –SEE DETAIL
30 FLOOR MATERIAL SBO-IBC
31 "OWENS CORNING" LAM. ARCH. ROOF SHINGLES BROWNWOOD
33 CATHEDRAL CEILING
34 TRAY CEILING
35 16"CONC BLOCK FOUND.WALL ON 12X 36 FOOTING W/(4) ST. REBARS BOTHWAYS CARRIED BELOW FROST LINE
36 6 "STEEL COL.ON 1-3 X 3-0 CONC FOOTING SEEDET.3/3 ON SHT 3
37 6" CONC.SLAB WITH 4 X 4 WWF ON 6" COMPACTED FILL SLOP FLOOR TO FRONT
38 12 X12 CONC FOOTING ON 36 X 36 CONC FOUNDATION W/(4) #5 ST. BARS BOTH WAYS– SEE DET.2/3 SHT3
39 CRAWL SPACE PER NYS IBC
40 LOAD BEARINGWALL
41 FIRE PLACE FINISHES SBO-IBC
42 STUCT. BEAM
43 2 X6 -16"0C ,R36 INSULATION – EXT SEATHING -1/2' DRY WALL SECOND FLOOR SIDING TO BE - CEDAR SHAKES BY"CEDAR VALLEY"
44 4 X4 CEDAR DECORATIVE BEAMS PAINTED
45 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46 CRICKRET/COOPER FLASHING
47 TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49 2 X12-16'OC- ¾" PLYWOOID SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
50 STONE CLAD CHIMENY 36 X 36 3 '-0" ABOVE LINE PER CODE
51 2 LAYERS OF RIDGID " ICE AND WEATERSHIELD
52 WAINSCOTTING 1 X4
53 WALL FINISH MATCH FINISH AND DESIGN OF DOOR 8 -PAINT
54 JOIST HANGER THROUGHTOUT
55 ALL FLOORS IN ALL BATHROOMS, POWDER ROOM, MUD ROOM ,LAUNDRY TO TILE SBO-IBC
56 ALL BATHROOM FLOORS TO "SUN TOUCH FLOOR WARMING"
57 VENT BLOCKAS PER NYCIBC SECTION R408. 1 AND R408.3



A RESIDENCE FOR
MR. AND MRS J CHRYSSICAS
0 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

SECTION A
MARCH 23 2020

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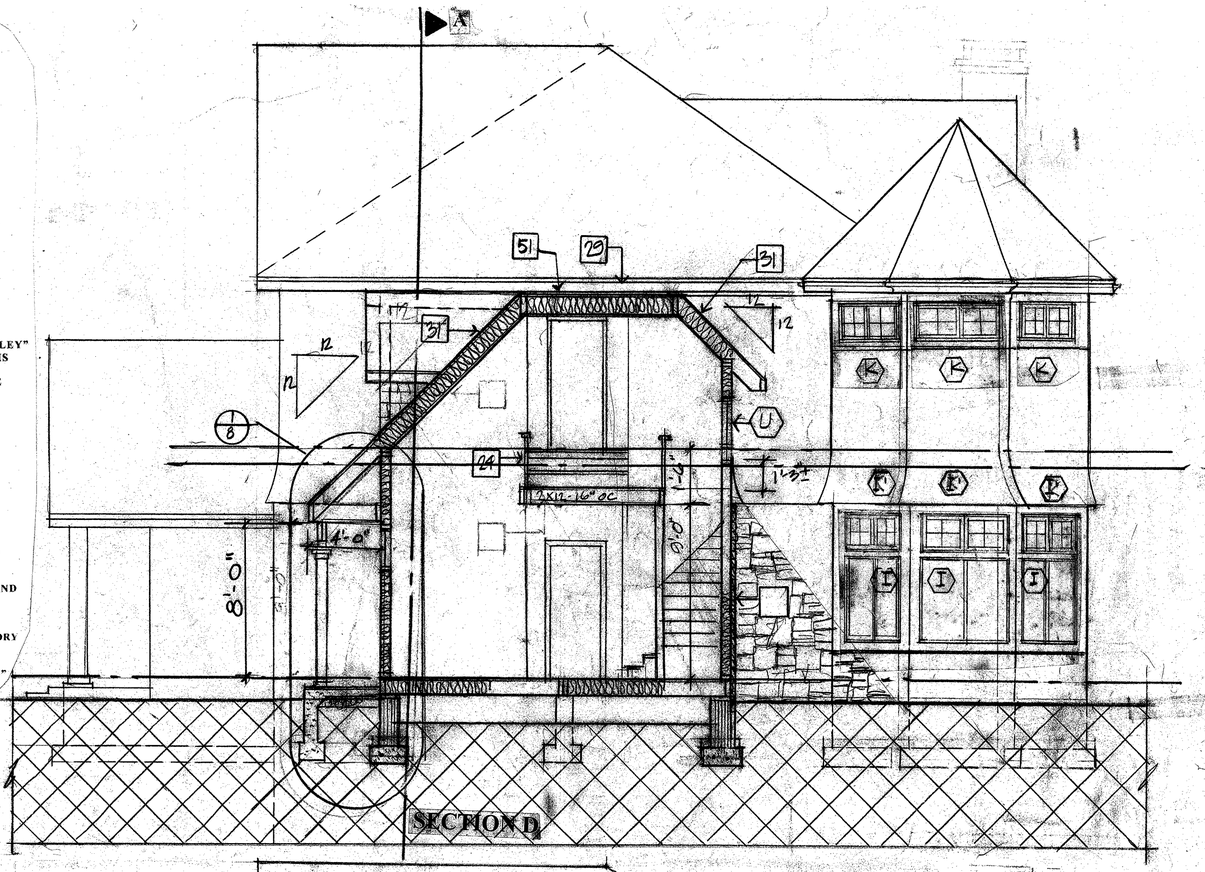

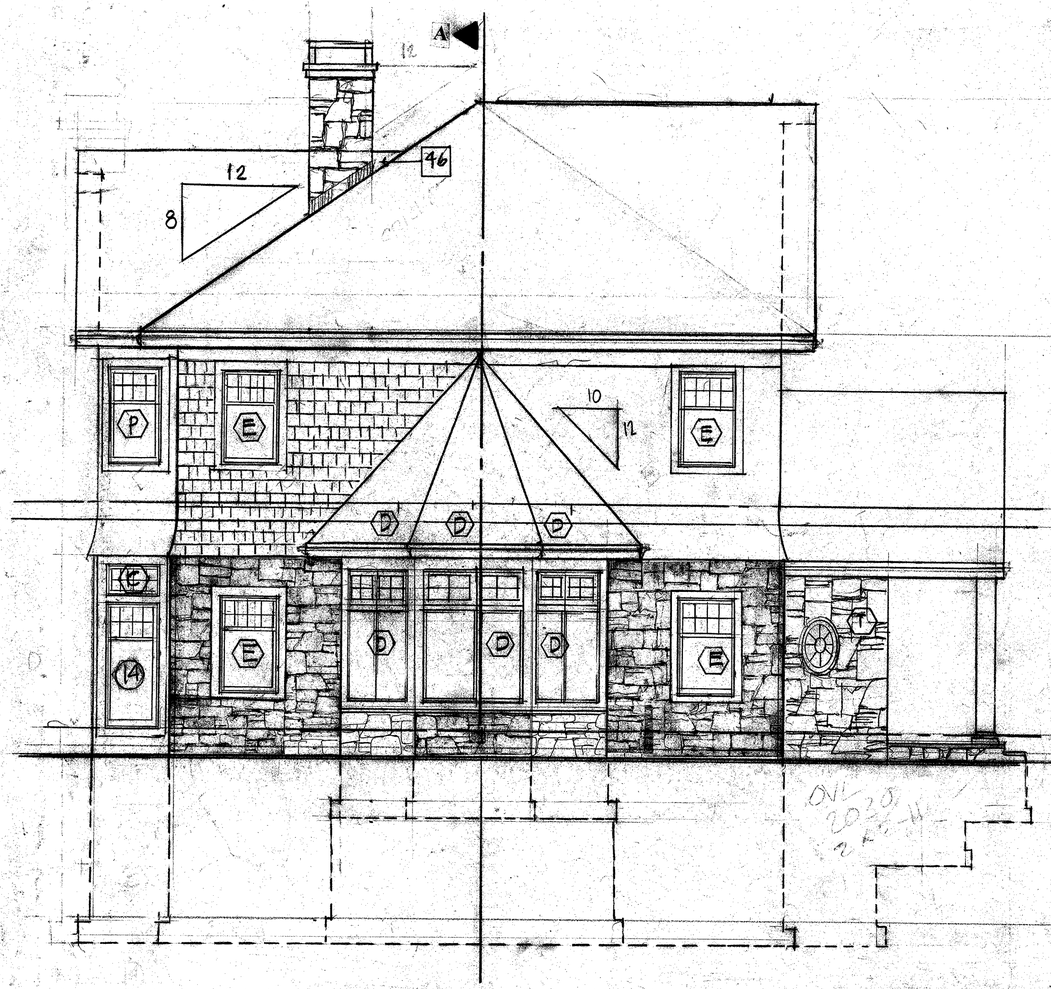

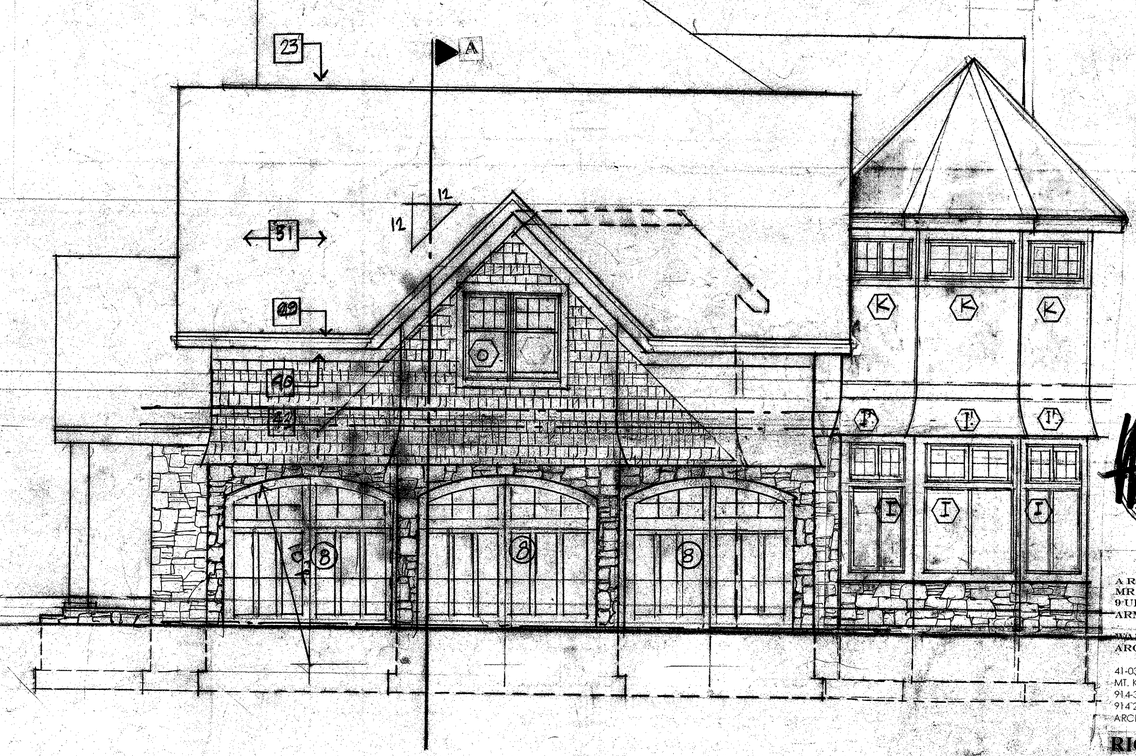

WALLACE J. TOSCANO
LICENSED ARCHITECT
No. 010550
STATE OF NEW YORK

A RESIDENCE FOR
MR. AND MRS J. CHRYSSICAS
9 UPLAND LANE
ARMONK, NY 10504

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914-329-1491CELL
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ARCHWJT36@GMAIL.COM

RIGHT SIDE 1/4
LEFT SIDE 1/4

MARCH 23 2020

6

Town of North Castle Building Department
17 Bedford Road
Armonk, New York 10504-1898
Telephone: (914) 273-3000 ext. 44 Fax: (914) 273-3554
www.northcastleny.com

Residential Building Permit Application

NOTE: TWO (2) SETS OF ALL REQUIRED DOCUMENTS MUST BE SUBMITTED WITH THIS APPLICATION

Section I- PROJECT ADDRESS: 9 UPLAND LANE DATE: 5.13.20

Section II- CONTACT INFORMATION: (Please print clearly. All information must be current)

APPLICANT: WALLACE J. TOSCANO A.I.A. ARCHITECT
ADDRESS: 41-03 MOGER AVE. MT. KISCO, NEW YORK, 10549
PHONE: 914-238-1048 MOBILE: ~~914-329-1491 CELL~~ EMAIL: ARCHWJT36@GMAIL.COM

PROPERTY OWNER: MR & MRS S FRASER
ADDRESS: 18 MAPLE WAY, ARMONK. NY 10504
PHONE: (914) 273-4322 MOBILE: - EMAIL: AUKSTER@MSN.COM

Section III- DESCRIPTION OF WORK: (Any work conducted outside of the house requires approval from the RPRC unless the proposed action is minor in nature and complies with 355-26 C (3) of the Town of North Castle code.)

NEW 2 STORY RESIDENCE

RECEIVED
MAY 20 2020
TOWN OF NORTH CASTLE
BUILDING DEPARTMENT

Section IV- USE AND OCCUPANCY:

EXISTING/ CURRENT USE:

PROPOSED RESIDENTIAL:

[ ] One Family Dwelling [ ] Two Family Dwelling [ ] Townhouse [ ] Detached Accessory Structure

Section V- PERMIT FEES: ($20 app fee for the first $15,000 and $30 app fee, over $15,001 and $12 per $1000, cost of construction.)

ESTIMATED COST OF CONSTRUCTION (Based on fair market value labor & material) $ 1,200,000

AFFIDAVIT OF CONSTRUCTION COST: This affidavit must be completed by the Design Professional if the estimated cost is $20,000 or more.

Town of North Castle Building Department

Section V- (Continued)

I W. TOSCANO do hereby affirm and certify as follows: (i) I am the architect/engineer (circle one) licensed by the State of New York; (ii) I have reviewed the plans, drawings and specifications for this application and am fully familiar with the proposed construction; (iii) based on my experience, I estimate the total cost of construction including all labor, all materials, all professional fees and all associated costs to be approximately $ 4,200,000, and (iv) pursuant to Penal Law 210.45, I acknowledge that a false statement made knowingly is a Class A misdemeanor.

Signature: _____ Date: 5.13.20

Sign and Affix Seal Here

Section VI- CONTACT INFORMATION: (Please print clearly. All information must be current)

ARCHITECT/ ENG: WALLACE J. TOSCANO A.I.A.
ARCHITECT

ADDRESS: ~~41-03 MOGER AVE.~~
MT. KISCO, NEW YORK, 10549

PHONE: ~~914-238-1048~~ MOBILE: 914-329-1491 CELL

EMAIL: ARCHWJT36@GMAIL.COM

CONTRACTOR: N.A.

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: _____

PLUMBER: NA

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: _____

ELECTRICIAN: NA

ADDRESS: _____

PHONE: _____ MOBILE: _____ EMAIL: _____

Section VII- APPLICANT CERTIFICATION

I hereby certify that I have read the instructions & examined this application and know the same to be true & correct. All provisions of laws & ordinances covering this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or land use or the performance of construction.

Signature: _____ Date: 5.13.20

Wallace Toscano
building form
Feb 25, 2020 at 11:19:57 AM
Stu. Elise Fraser **Stu. Elise Fraser**

Hi
Can you sign the enclosed and have it notarized. send it back to me.

Town of North Castle Building Department

MARIA SCHARF
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01SC6377346
Qualified in Westchester County
Commission Expires July 2, 2022

Section VIII- AFFIDAVIT OF OWNER AUTHORIZATION:

STATE OF NEW YORK)
COUNTY OF WESTCHESTER) SS:

The applicant Wallace Toscano has proper consent from said owner to make this application as submitted and said owner agrees to all terms and conditions placed upon same.

Owner's Name (PRINT) STUART A FRASER Owner's Signature [signature]
Sworn to before me this 26 day of February, 2020 [signature]

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Zone: ____ Station: ____ Block: ____ Lot: ____

Building Department Checklist:

Does this permit require RPRC approval? [ ] Yes [ ] No

[ ] GC License [ ] Work. Comp. [ ] Liability. Ins. [ ] Disability [ ] Two sets of documents

[ ] Permit fee: ____ Payment: [ ] Check #: ____ [ ] Cash

Name on check: ____

Received By: ____ Application No.: ____

BUILDING INSPECTOR APPROVAL

Has all the conditions of the RPRC been met? [ ] Yes

Is a Flood Development permit required? [ ] Yes [ ] No

Reviewed By ____ Date: ____

Building Inspector Approval: ____ Date: ____

Conditions: ____

TOWN OF NORTH CASTLE ENVIRONMENTAL QUESTIONNAIRE

The purpose of this Questionnaire is to determine whether a Town Wetland Permit/Coverage under the NYSDEC SPDES General Permit for Stormwater Discharges is required. This form does not provide authorization to commence work.

Project Information

Project Address: CHRISS/CAS RESIDENCE

Sheet: 101.4 Block: 2 Lot(s): 4

Project Description: NEW 2 STORY RESIDENCE

Note: This questionnaire must be accompanied with a Plot Plan that clearly illustrates the location and dimensions of the proposed activity. Said Plot Plan must include a line which encircles the total area of proposed land disturbance and the approximate area of disturbance must be calculated (square feet). Failure to submit these items will delay review.

Owner's Information

Owner's Name: MR & MRS. S. FRASER Phone: (917) 733 5514

Owner's Address: 18 MAPLE WEST

Authorized Agent's Information (if applicable)

Agent's Name: W. TOSCANO AIA Phone: (914) 329-1491

Agent's Adress: 41 N. MOGER AVE, MT. KISCO NY

As the owner/agent (circle one), I hereby state that to the best of my knowledge, the information provided herein is accurate. In addition, I hereby grant permission to the Town's professional consultants to enter onto my property to conduct a site inspection.

Owner/Agent Name (print): W. TOSCANO

Owner/Agent Name (signature): [signature] Date: 2-24-20

FOR TOWN USE - PLEASE DO NOT WRITE BELOW THIS LINE

---

1. The existing/proposed use is: ☐ Residential ☐ Nonresidential
2. Is a Town Wetland Permit required? ☐ Yes ☐ No
3. Date of RPRC Review: _____
4. If Yes, what type of Wetland Permit is required? ☐ Administrative ☐ Planning Board
5. Reason why a Wetland Permit is required: _____
6. Is the project located within the NYCDEP Watershed? ☐ Yes ☐ No
7. Area of proposed disturbance: ☐ < 5,000 s.f. ☐ 5,000 s.f. - < 1 acre ☐ ≥1 acre
8. Will the project require coverage under the NYSDEC SPDES General Permit for Stormwater Discharges and the preparation of a SWPPP? ☐ Yes ☐ No ☐ TBD
9. Requested Waivers: _____

Notes: _____

Signature: _____ Date: _____

Town of North Castle
Residential Project Review Committee
17 Bedford Road Armonk, New York 10504
(914) 273-3542 (914) 273-3554 (fax)

RPRC COMPLETENESS REVIEW FORM

This form represents the standard requirements for a completeness review for all Residential Project Review Committee submissions. Failure to provide all of the information requested will result in a determination that the application is incomplete.

Project Name on Plan: _____

☒ Initial Submittal ☐ Revised Preliminary

Street Location: 9 UPLAND LANE

Zoning District: 2 Property Acreage: 2.316 Tax Map Parcel ID: 101.4/2/4

Date: 5.13.20

DEPARTMENTAL USE ONLY

Date Filed: _____ Staff Name: _____

Preliminary Plan Completeness Review Checklist
Items marked with a "☒" are complete, items left blank "☐" are incomplete and must be completed, "NA" means not applicable.

☐1. Plan prepared by a registered architect or professional engineer

☐2. Aerial photo (Google Earth) showing the applicant's entire property and adjacent properties and streets

☐3. Map showing the applicant's entire property and adjacent properties and streets

☐4. A locator map at a convenient scale

☐5. The proposed location, use and design of all buildings and structures (including floor plans and elevations)

☐6. Existing topography and proposed grade elevations

☐7. Location of drives

☐8. Location of all existing and proposed site improvements, including drains, culverts, retaining walls and fences

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BUILDING DEPARTMENT

☐9. Description of method of water supply and sewage disposal and location of such facilities

☐10. The name and address of the applicant, property owner(s) if other than the applicant and of the planner, engineer, architect, surveyor and/or other professionals engaged to work

☐11. Submission of a Zoning Conformance Table depicting the plan's compliance with the minimum requirements of the Zoning District

☐12. If a tree removal permit is being sought, submission of a plan depicting the location and graphical removal status of all Town-regulated trees within the proposed area of disturbance. In addition, the tree plan shall be accompanied by a tree inventory includes a unique ID number, the species, size, health condition and removal status of each tree.

☐13. If a wetlands permit is being sought, identification of the wetland and the 100-foot wetland buffer.

_____ On this date, all items necessary for a technical review of the proposed site plan have been submitted and constitute a COMPLETE APPLICATION.

TOWN OF NORTH CASTLE
WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING DEPARTMENT
Adam R. Kaufman, AICP
Director of Planning

Telephone: (914) 273-3542
Fax: (914) 273-3554
www.northcastleny.com

GROSS LAND COVERAGE CALCULATIONS WORKSHEET

Application Name or Identifying Title: CHRYSSICAS RESIDENCE Date: 5·13·20

Tax Map Designation or Proposed Lot No.: 101.4/2/4

Gross Lot Coverage

1.	Total lot Area (Net Lot Area for Lots Created After 12/13/06):	100,884
2.	**Maximum** permitted gross land coverage (per Section 213-22.2C):	14,302
3.	**BONUS** maximum gross land cover (per Section 213-22.2C):	
	Distance principal home is beyond minimum front yard setback _____ x 10 =	250
4.	**TOTAL Maximum Permitted gross land coverage** = Sum of lines 2 and 3	14,552
5.	Amount of lot area covered by **principal building:** _____ existing + 3412 proposed =	3412
6.	Amount of lot area covered by **accessory buildings:** 1350 existing + _____ proposed =	1350
7.	Amount of lot area covered by **decks:** _____ existing + _____ proposed =	—
8.	Amount of lot area covered by **porches:** _____ existing + _____ proposed =	—
9.	Amount of lot area covered by **driveway, parking areas and walkways:** 3320 existing + 3570 proposed =	6890
10.	Amount of lot area covered by **terraces:** _____ existing + 480 proposed =	480
11.	Amount of lot area covered by **tennis court, pool and mechanical equip:** _____ existing + _____ proposed =	—
12.	Amount of lot area covered by **all other structures:** _____ existing + _____ proposed =	—
13.	Proposed **gross land coverage:** Total of Lines 5 – 12 =	12,132

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If Line 13 is less than or equal to Line 4, your proposal **complies** with the Town's maximum gross land coverage regulations and the project may proceed to the Residential Project Review Committee for review. If Line 13 is greater than Line 4 your proposal does not comply with the Town's regulations.

Signature and Seal of Professional Preparing Worksheet

5·13·20
Date

LOT AREA, NET – Lot area minus seventy five (75) percent of the area of any wetlands, waterbodies and, watercourses, but excluding any adjacent areas, all as defined in Chapter 209 Wetlands and Drainage, of the Town Code, and the area of any steep slopes, as defined Chapter 213, except that in the case of one-family lots, the deduction for steep slopes shall be only fifty (50) percent.

Lot Size	Maximum Permitted Gross Land Coverage for One-Family Dwelling Lots* (square feet)
Less than 5,000 square feet	50% of the lot area
5,000 to 9,999 square feet	2,500 plus 30% of the lot area in excess of 5,000 square feet
10,000 to 14,999 square feet	4,000 plus 24% of the lot area in excess of 10,000 square feet
15,000 square feet to 0.499 acres	5,200 plus 18% of the lot area in excess of 15,000 square feet
0.5 to 0.749 acres	6,420 plus 15% of the lot area in excess of 0.5 acres
0.75 to 0.999 acres	8,050 plus 12% of the lot area in excess of 0.75 acres
1.0 to 1.999 acres	9,350 plus 9% of the lot area in excess of 1.0 acres
2.0 acres or more	13,270 plus 7.5% of the lot area in excess of 2.0 acres

*Permitted gross land coverage limitations for two-family dwelling lots in the R-2F District shall be twenty five (25) percent greater than that permitted for one-family dwelling lots.

NOTWITHSTANDING ABOVE LIMITATIONS, AN ADDITIONAL 10 SQUARE FEET OF GROSS LAND COVERAGE SHALL BE PERMITTED FOR EACH ONE FOOT OF FRONT YARD SETBACK OF THE PRINCIPAL DWELLING IN EXCESS OF THE MINIMUM FRONT YARD SETBACK REQUIRED.

F:\PLAN6.0\Application Forms\2013 Full Set\GROSS LAND COVERAGE CALCULATIONS WORKSHEET 2013.doc

13270
1032
14362

100.887

13,270
1032
14362
250
14552

100.884
87,120
13,764
.75
1032.3

TOWN OF NORTH CASTLE

WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING BOARD
Peg Michelman, Chair

Telephone: (914) 273-3542
Fax: (914) 273-3554
www.northcastleny.com

FLOOR AREA CALCULATIONS WORKSHEET

Application Name or Identifying Title: CHRISSICAS RESIDENCE Date: 5.13.20

Tax Map Designation or Proposed Lot No.: 101.4/2/4

Floor Area

1.	Total Lot Area (Net Lot Area for Lots Created After 12/13/06):	100,884 ☐
2.	**Maximum** permitted floor area (per Section 213-22.2B):	10,446
3.	Amount of floor area contained within first floor: — existing + 3428 proposed =	3428
4	Amount of floor area contained within second floor: — existing + 2950 proposed	2950
5	Amount of floor area contained within garage: ____ existing + 720 proposed	720
6.	Amount of floor area contained within porches capable of being enclosed: ____ existing + 112 proposed	112
7.	Amount of floor area contained within basement (if applicable – see definition): existing + 1200 proposed =	1200
8.	Amount of floor area contained within attic (if applicable – see definition): — existing + — proposed	—
9.	Amount of floor area contained within all accessory buildings: 400 existing + 1050 proposed	1450
10.	**Proposed floor area:** Total of Lines 3 – 9	9860 ☐ OK

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If Line 10 is less than or equal to Line 2, your proposal complies with the Town's maximum floor area regulations and the project may proceed to the Residential Project Review Committee for review. If Line 10 is greater than Line 2 your proposal does not comply with the Town's regulations.

REGISTERED ARCHITECT
WALLACE J. TOSCANO
No. 010556
STATE OF NEW YORK

Signature and Seal of Professional Preparing Worksheet

5.13.20
Date

Lot Size	Maximum Permitted Gross Floor Area for One-Family Dwellings and Accessory Buildings [1] (square feet)
Less than 5,000 square feet	1,875 or 50% of the lot area, whichever is greater
5,000 to 9,999 square feet	2,500 plus 25% of the lot area in excess of 5,000 square feet
10,000 to 14,999 square feet	3,750 plus 20% of the lot area in excess of 10,000 square feet
15,000 square feet to 0.499 acres	4,750 plus 15% of the lot area in excess of 15,000 square feet
0.5 to 0.749 acres	5,768 plus 10% of the lot area in excess of 0.5 acres
0.75 to 0.999 acres	6,856 plus 8% of the lot area in excess of 0.75 acres
1.0 to 1.499 acres	7,727 plus 6% of the lot area in excess of 1.0 acres
1.5 to 1.999 acres	9,034 plus 5% of the lot area in excess of 1.5 acres
2.0 to 3.999 acres	10,122 plus 4% of the lot area in excess of 2.0 acres
4.0 acres or more	13,607 plus 3% of the lot area in excess of 4.0 acres

*Permitted gross floor area for two-family dwellings in the R-2F District shall be one-third (1/3) greater than that permitted for one-family dwellings.

10,122
+ 324
10,446

100,884
− 92,782
8101
× .04
324

810
× 4

800
160
8
1/

810

Quick Search

Your Directions Are Here

Get quick directions with easy access to top providers on your new tab.

Origin- 41 N Moger Ave, Mt Kisco, NY 10549, USA
Destination- 9 Upland Ln, Armonk, NY 10504, USA

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BUILDING DEPARTMENT

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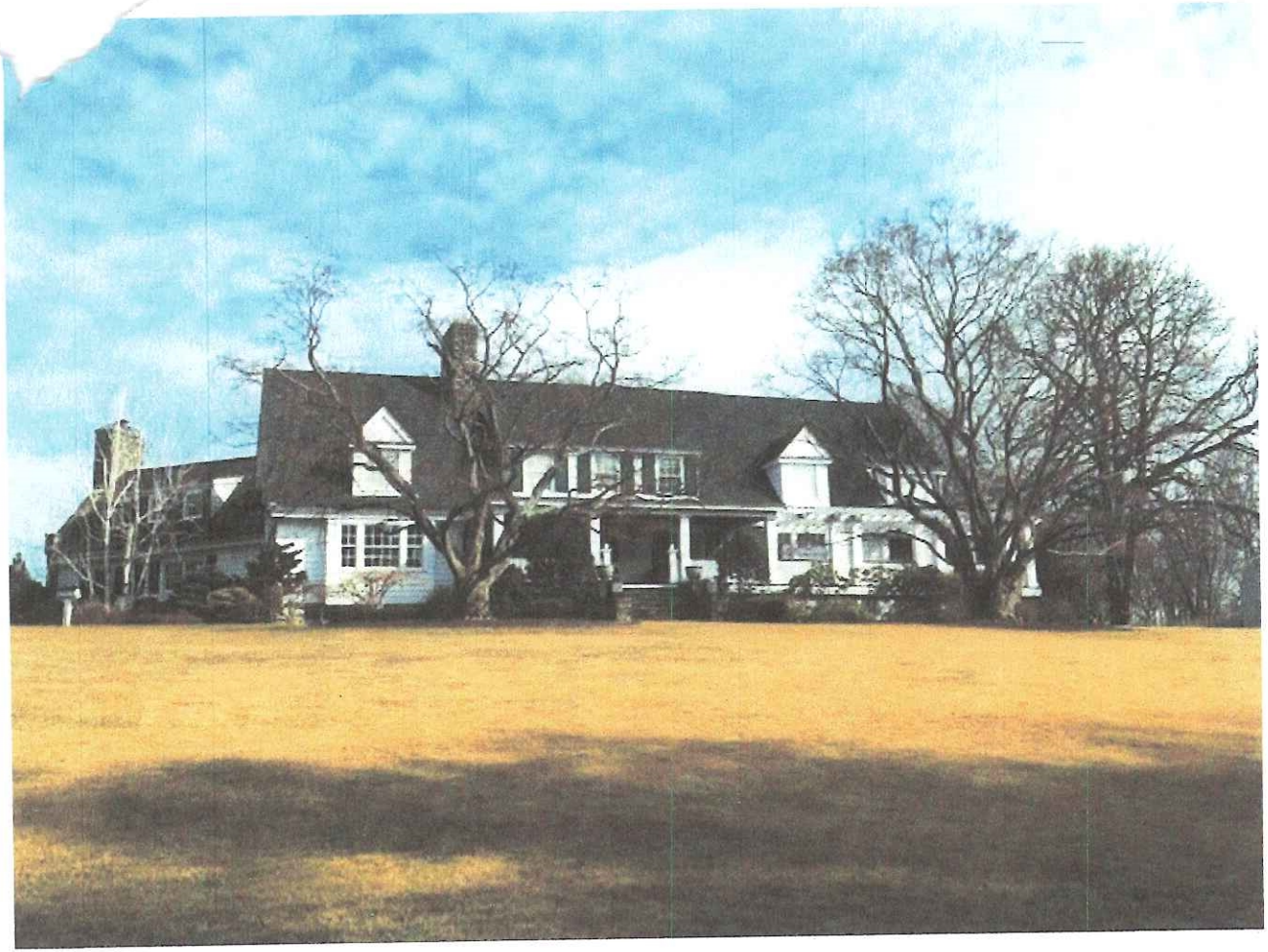


GENERAL NOTES:

THE ARCHITECT SHALL INSTRUCT THE OWNER THAT PRIOR TO AWARD OF THE CONTRACT AND DURING SITE VISIT, HE IS NOT TO GIVE ANY INSTRUCTIONS, ATTEMPT TO CLARIFY THE PROJECT, CHANGE ANY PART OF THE PROJECT, OR IN ANY WAY MAKE ANY INTERPRETATION OF THE PROJECT.

THE CONTRACTOR IS HELD RESPONSIBLE FOR ENSURING THAT ANY QUESTIONS THAT ARISE BY HIM OR ANY SUBCONTRACTORS SHALL BE DIRECTED TO THE ARCHITECT AND NO ONE ELSE.

WHEN QUESTIONS ARISE HE IS TO ADVISE THE CONTRACTOR OR HIS SUBCONTRACTOR TO DIRECT THEIR QUESTIONS TO THE ARCHITECT.

TABLE R301.2(1)
CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND DESIGN				SEISMIC DESIGN CATEGORY[f]	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP[e]	ICE BARRIER UNDERLAYMENT REQUIRED[h]	FLOOD HAZARDS[g]	AIR FREEZING INDEX[i]	MEAN ANNUAL TEMP
	Speed[d] (mph)	Topographic effects[k]	Special wind region[l]	Wind-borne debris zone[m]		Weathering[a]	Frost line depth[b]	Termite[c]					
30	115	YES	YES	YES	B	SEVERE	42	MOD/SEV	4	YES	5/12	1500	48

For SI: 1 pound per square foot = 0.0479 kPa, 1 mile per hour = 0.447 m/s.

a. Weathering may require a higher strength concrete or *grade* of masonry than necessary to satisfy the structural requirements of this code. The weathering column shall be filled in with the weathering index, "negligible," "moderate" or "severe" for concrete as determined from Figure R301.2(3). The *grade* of masonry units shall be determined from ASTM C 34, C 55, C 62, C 73, C 90, C 129, C 145, C 216 or C 652.

b. The frost line depth may require deeper footings than indicated in Figure R403.1(1). The *jurisdiction* shall fill in the frost line depth column with the minimum depth of footing below finish *grade*.

c. The *jurisdiction* shall fill in this part of the table to indicate the need for protection depending on whether there has been a history of local subterranean termite damage.

d. The *jurisdiction* shall fill in this part of the table with the wind speed from the basic wind speed map [Figure R301.2(4)A]. Wind exposure category shall be determined on a site-specific basis in accordance with Sect. n R301.2.1.4.

e. The outdoor design dry-bulb temperature shall be selected from the columns of 97½-percent values for winter from Appendix D of the *International Plumbing Code*. Deviations from the Appendix D temperatures shall be permitted to reflect local climates or local weather experience as determined by the *building official*.

f. The *jurisdiction* shall fill in this part of the table with the seismic design category determined from Section R301.2.2.1.

g. The *jurisdiction* shall fill in this part of the table with (a) the date of the *jurisdiction's* entry into the National Flood Insurance Program (date of adoption of the first code or ordinance for management of flood hazard areas), (b) the date(s) of the Flood Insurance Study and (c) the panel numbers and dates of the currently effective FIRMs and FBFMs or other flood hazard map adopted by the authority having *jurisdiction*, as amended.

h. In accordance with Sections R905.1.2, R905.4.3.1, R905.5.3.1, R905.6.3.1, R905.7.3.1 and R905.8.3.1, where there has been a history of local damage from the effects of ice damming, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall fill in this part of the table with "NO."

i. The *jurisdiction* shall fill in this part of the table with the 100-year return period air freezing index (BF-days) from Figure R403.3(2) or from the 100-year (99 percent) value on the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

j. The *jurisdiction* shall fill in this part of the table with the mean annual temperature from the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

k. In accordance with Section R301.2.1.5, where there is local historical data documenting structural damage to buildings due to topographic wind speed-up effects, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

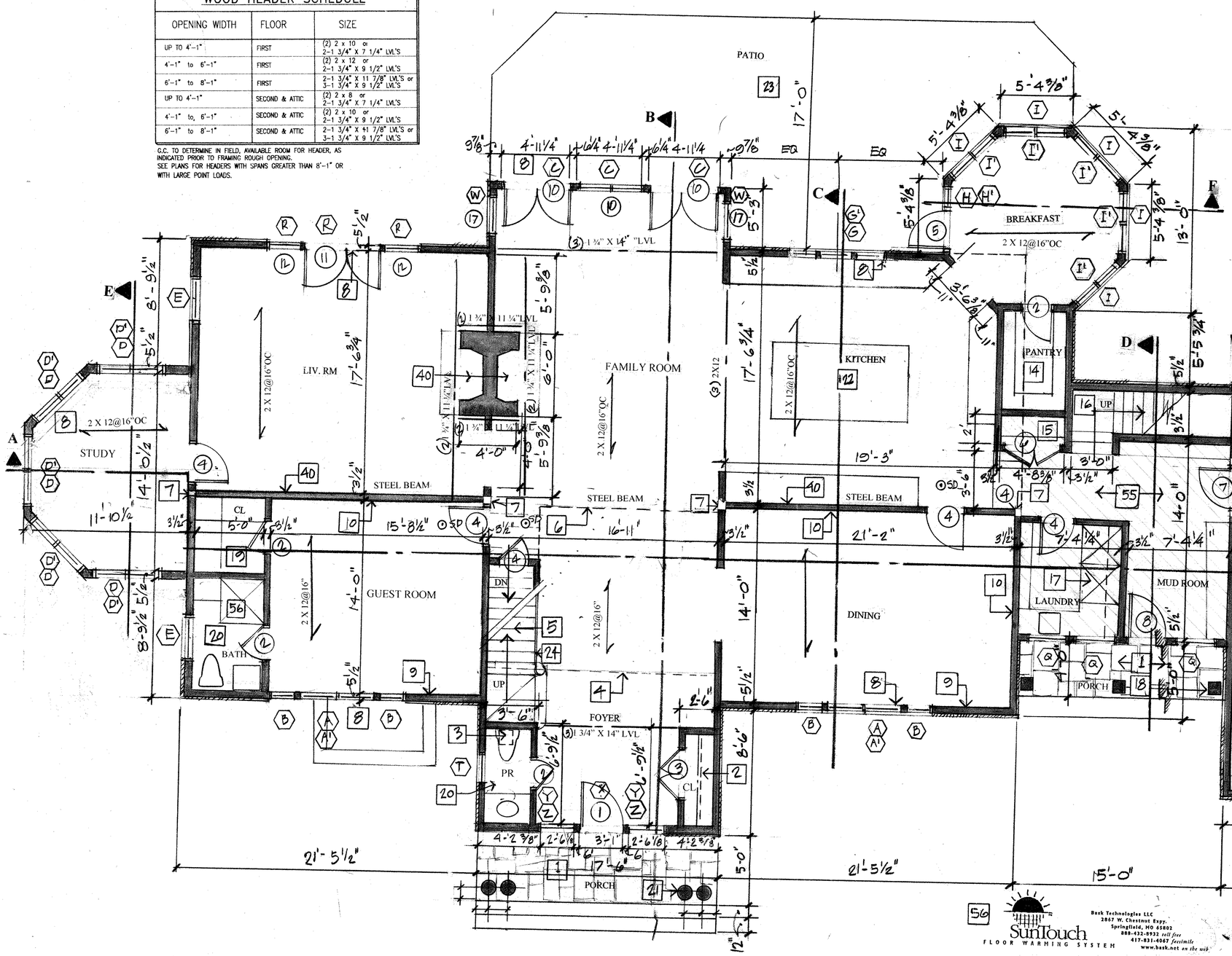
l. In accordance with Figure R301.2(4)A, where there is local historical data documenting unusual wind conditions, the *jurisdiction* shall fill in this part of the table with "YES" and identify any specific requirements. Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

m. In accordance with Section R301.2.1.2.1, the *jurisdiction* shall indicate the wind-borne debris wind zone(s). Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

WOOD HEADER SCHEDULE

OPENING WIDTH	FLOOR	SIZE
UP TO 4'–1"	FIRST	(2) 2 x 10 or 2–1 3/4" X 7 1/4" LVL'S
4'–1" to 6'–1"	FIRST	(2) 2 x 12 or 2–1 3/4" X 9 1/2" LVL'S
6'–1" to 8'–1"	FIRST	2–1 3/4" X 11 7/8" LVL'S or 3–1 3/4" X 9 1/2" LVL'S
UP TO 4'–1"	SECOND & ATTIC	(2) 2 x 8 or 2–1 3/4" X 7 1/4" LVL'S
4'–1" to, 6'–1"	SECOND & ATTIC	(2) 2 x 10 or 2–1 3/4" X 9 1/2" LVL'S
6'–1" to 8'–1"	SECOND & ATTIC	2–1 3/4" X 11 7/8" LVL'S or 3–1 3/4" X 9 1/2" LVL'S

G.C. TO DETERMINE IN FIELD, AVAILABLE ROOM FOR HEADER, AS INDICATED PRIOR TO FRAMING ROUGH OPENING.
SEE PLANS FOR HEADERS WITH SPANS GREATER THAN 8'–1" OR WITH LARGE POINT LOADS.



1 BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2 SHELF AND CLOTH POLE
3 EXHAUST FAN PANOSONIC FV08VQ2
4 LINE OF CEILING ABOVE
5 STAIRS UP 18R@ 7 ¾' 17 T @ 10 ½" PER NYS-IBC SECTION311
6 EDGE OF BALCONY ABOVE
7 6 X 6 POST
8 SEE WOOD HEADER SCHEDULE SHEET 1
9 EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHING , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
10 ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND POWDER ROOM WALL-SOUND INSULATE
11 GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
12 (3) 2X 12 BEAMS
13 6" STEEL COL SEE DETAIL 3/3
14 PANTRY SHELF BY OWNER
15 SHELVING BY OWNER
16 WOOD STAIRS 16R @7 ½" 15 T @ 10"
17 WASHER DRYER INSTALL "FLOOD SAVER"
18 6 X6 WOOD COLUMNS PT CLAD IN TRIM DETAIL 3/5
19 CLOTH POLE AND SHELF
20 ALL BATHROOMS FIXTURES, FLOOR AND WALL FINISHES SBO-IBC
21 12" DORIC COLUMNS
22 KITCHEN DEAISN BY OWNER -ALLCABINETS FURNISHED AND INSTALLED BY OWNER
23 COR VENT
24 HAND RAIL SBO-IBC PER NYS-IBC SECTION R311
25 OPEN TO BELOW
26 CHIMENY FLUE SHALL COMPLY WITH NYS IBC SECTIONS R1003 THRU R1004 , R1005., R1006
27 ALL CABINETWORK AND SHELVING SBO-IBC
28 STEPS DOWN 7 ½"R @ R 11T
29 1x8 FASICA –SEE DETAIL
30 FLOOR MATERIAL SBO-IBC
31 "OWENS CORNING" LAM. ARCH. ROOF SHINGLES BROWNWOOD
33 CATHEDRAL CEILING
34 TRAY CEILING
35 16"CONC BLOCK FOUND.WALL ON 12X 36 FOOTING W/(4) ST. REBARS BOTHWAYS CARRIED BELOW FROST LINE
36 6 "STEEL COL.ON 1-3 X 3-0 CONC FOOTING SEEDET.3/3 ON SHT 3
37 6" CONC.SLAB WITH 4 X 4 WWF ON 6" COMPACTED FILL SLOP FLOOR TO FRONT
38 12 X12 CONC FOOTING ON 36 X 36 CONC FOUNDATION W/(4) #5 ST. BARS BOTH WAYS– SEE DET.2/3 SHT3
39 CRAWL SPACE PER NYS IBC
40 LOAD BEARINGWALL
41 FIRE PLACE FINISHES SBO-IBC
42 STUCT. BEAM
43 2 X6 -16"OC ,R36 INSULATION – EXT SEATHING -1/2" DRY WALL SECOND FLOOR SIDING TO BE - CEDAR SHAKES BY"CEDAR VALLEY"
44 4 X4 CEDAR DECORATIVE BEAMS PAINTED
45 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46 CRICKRET/COOPER FLASHING
47 TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49 2 X12-16'OC- ¾" PLYWOOID SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
50 STONE CLAD CHIMENY 36 X 36 3 '-0" ABOVE LINE PER CODE
51 2 LAYERS OF RIDGID " ICE AND WEATERSHIELD
52 WAINSCOTING 1 X4
53 WALL FINISH MATCH FINISH AND DESIGN OF DOOR 8 -PAINT
54 JOIST HANGER THROUGHTOUT
55 ALL FLOORS IN ALL BATHROOMS, POWDER ROOM, MUD ROOM ,LAUNDRY TO TILE SBO-IBC
56 ALL BATHROOM FLOORS TO "SUN TOUCH FLOOR WARMING"
57 VENT BLOCK AS PER NYCIBC SECTION R408. 1 AND R408.3

ALL DEMENSION ARE FACE OF STUDS TO STUD FACE

SunTouch FLOOR WARMING SYSTEM
Bask Technologies LLC
2867 W. Chestnut Expy.
Springfield, MO 65802
888-432-8932 *toll free*
417-831-4067 *facsimile*
www.bask.net *on the web*

SMOKE DETECTOR AND CARBON MONOXIDE DETECTORS ARE TO BE INSTALLEDAND MUST COMPLY THROUGHOUT BUILDING WITH SECTION R 313 OF THE NYSBC

A RESIDENCE FOR
MR. AND MRS J CHRYSSICAS
9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

FIRST FLOOR 1
MARCH 23 2020

1 BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2 SHELF AND CLOTH POLE
3 EXHAUST FAN PANOSONIC FV08VQ2
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38 12 X12 CONC FOOTING ON 36 X 36 CONC FOUNDATION W/(4) #5 ST. BARS BOTH WAYS– SEE DET.2/3 SHT3
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43 2 X6 -16"0C ,R36 INSULATION – EXT SEATHING -1/2' DRY WALL SECOND FLOOR SIDING TO BE - CEDAR SHAKES BY"CEDAR VALLEY"
44 4 X4 CEDAR DECORATIVE BEAMS PAINTED
45 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46 CRICKRET/COOPER FLASHING
47 TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49 2 X12-16'OC- ¾" PLYWOOID SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
50 STONE CLAD CHIMENY 36 X 36 3 '-0" ABOVE LINE PER CODE
51 2 LAYERS OF RIDGID " ICE AND WEATERSHIELD
52 WAINSCOTTING 1 X4
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55 ALL FLOORS IN ALL BATHROOMS, POWDER ROOM, MUD ROOM ,LAUNDRY TO TILE SBO-IBC
56 ALL BATHROOM FLOORS TO "SUN TOUCH FLOOR WARMING"
57 VENT BLOCK AS PER NYCIBC SECTION R408. 1 AND R408.3

ALL DEMENSION ARE
FACE OF STUDS TO STUD FACE

BEDRM 3
BEDRM 2
BATH
MAS BED
MAS BATH
HER WIC
HIS WIC
BATH
STOR
CLOS
OPEN TO BELOW
ROOF BELOW
BONUS ROOM
DN
SD
2 X 12@16"OC
(3) 1 ¾" X 11 ¾"LVL
(2)-1 ¾" X 11 ¾" LVL
1 ¾" X 11 ¾"LVL

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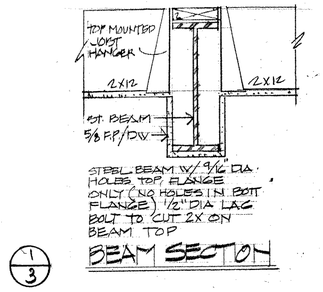
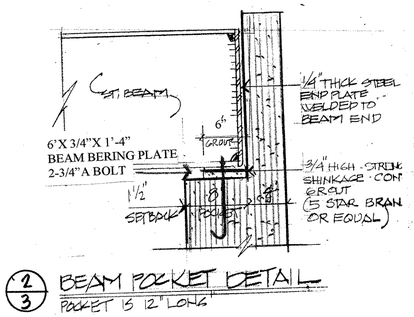
SECOND FLOOR 2

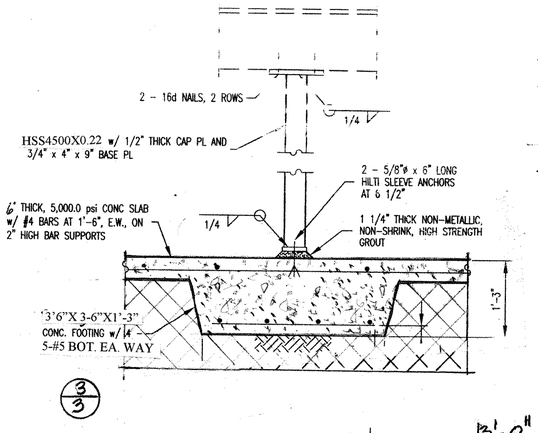
MARCH 23 2020



1/3 BEAM SECTION



2/3 BEAM POCKET DETAIL
POCKET IS 12" LONG



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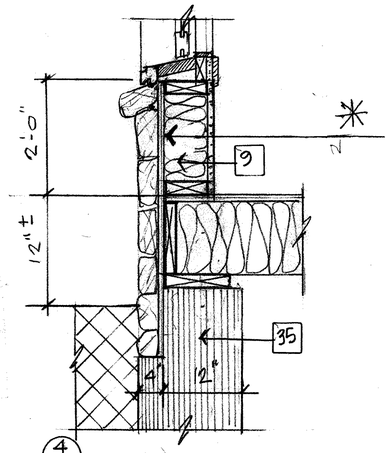

4/3

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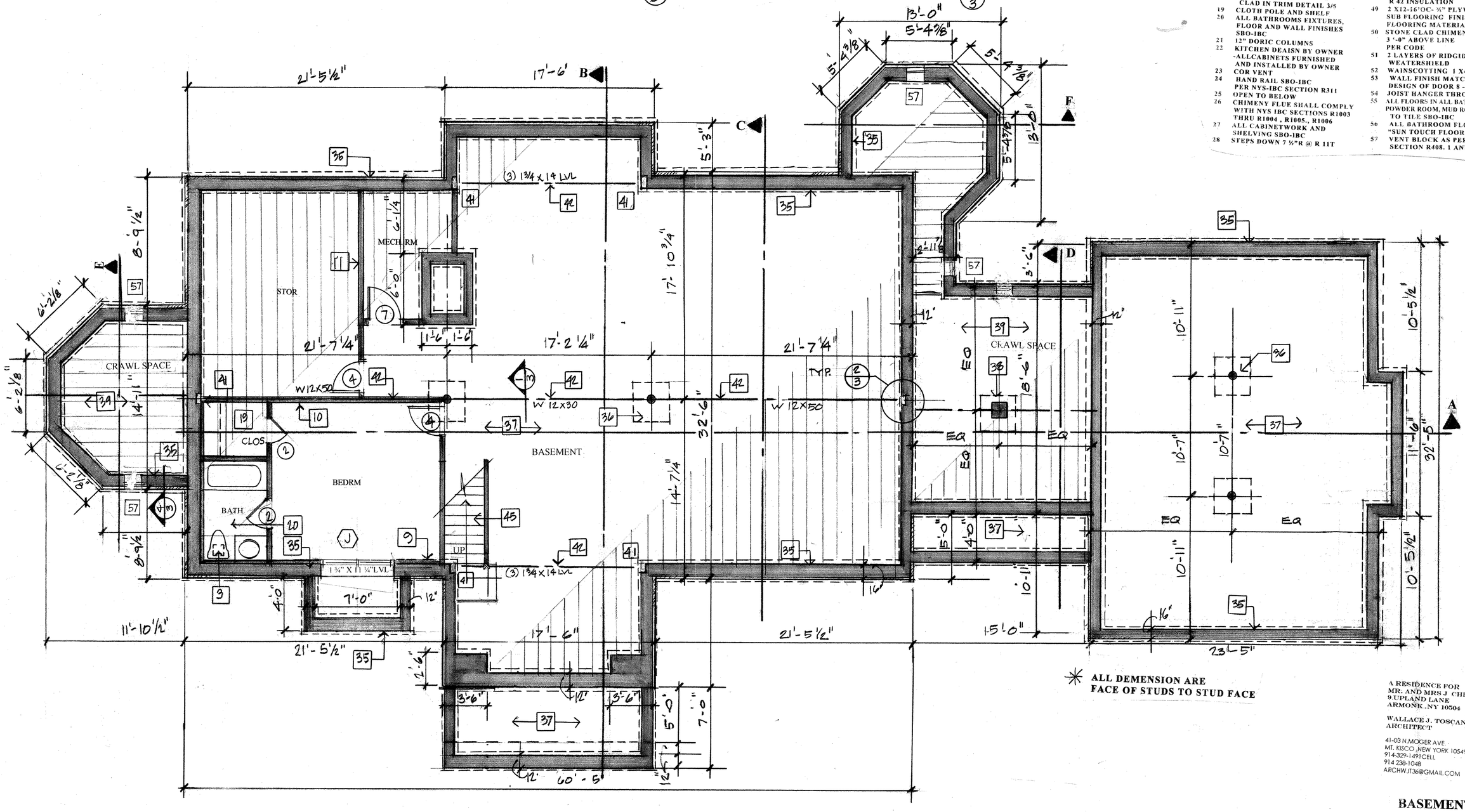

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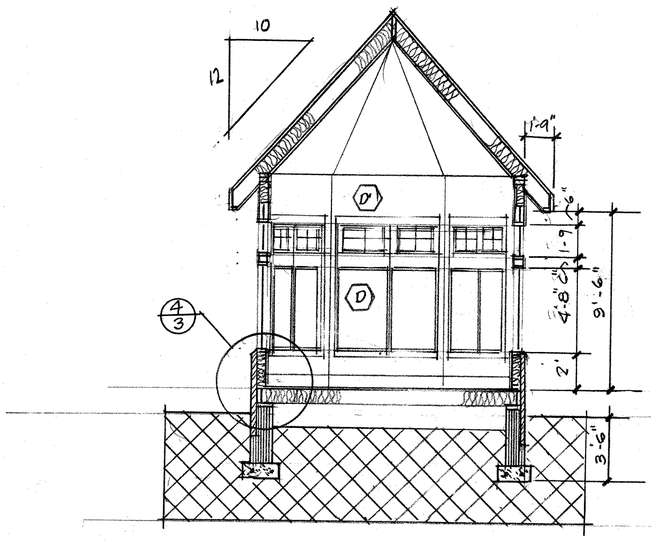
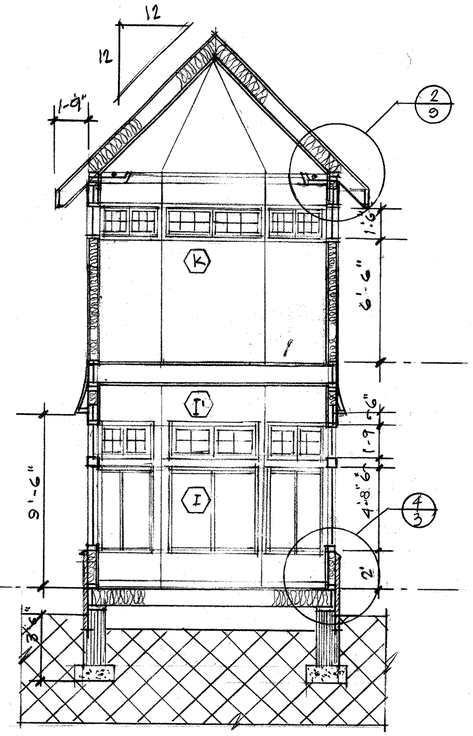
BASEMENT **3**
MARCH 23 2020



SECTION E



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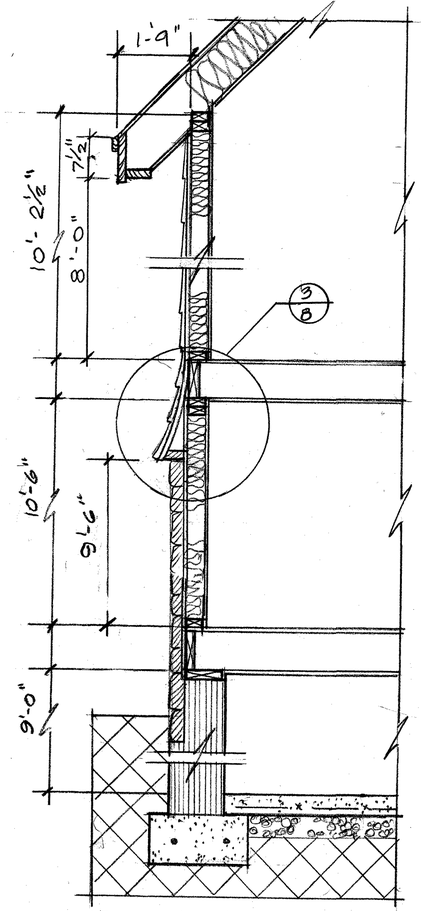

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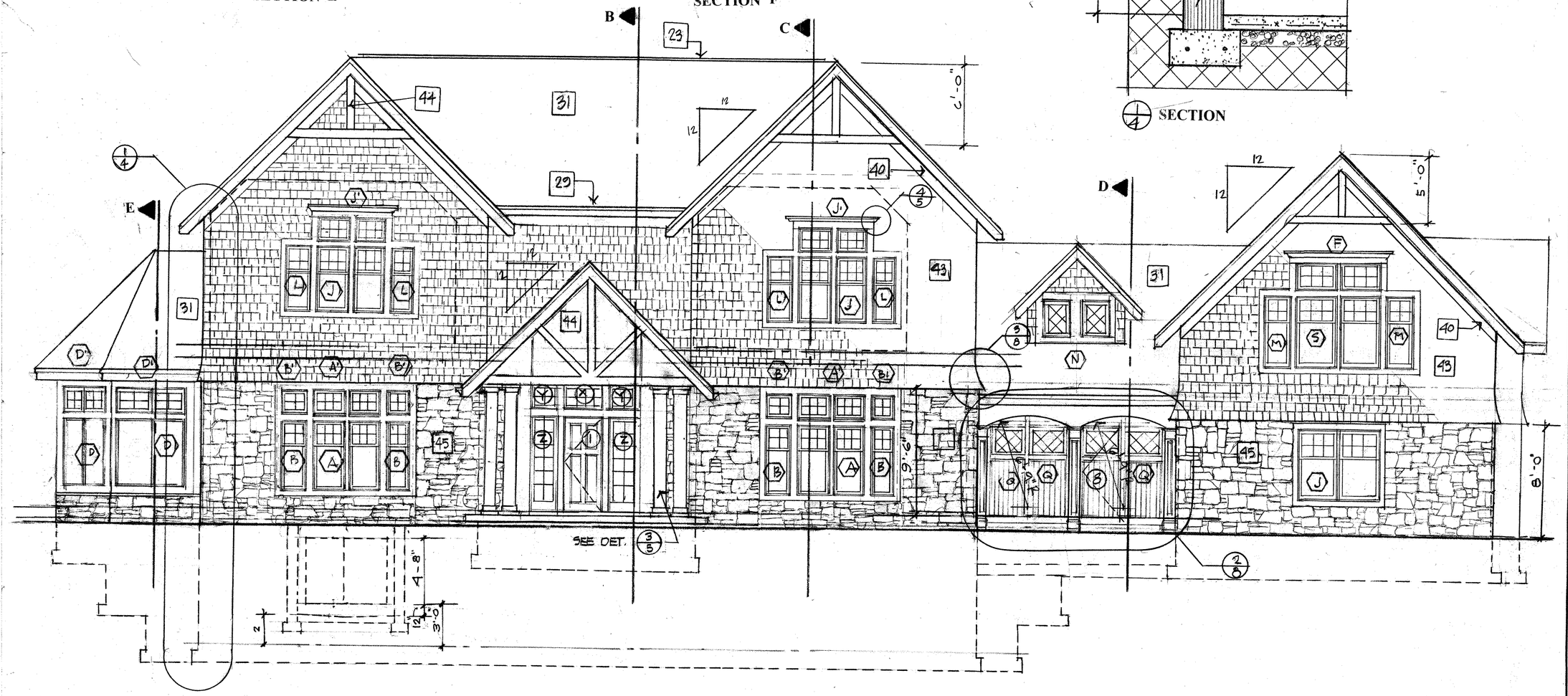

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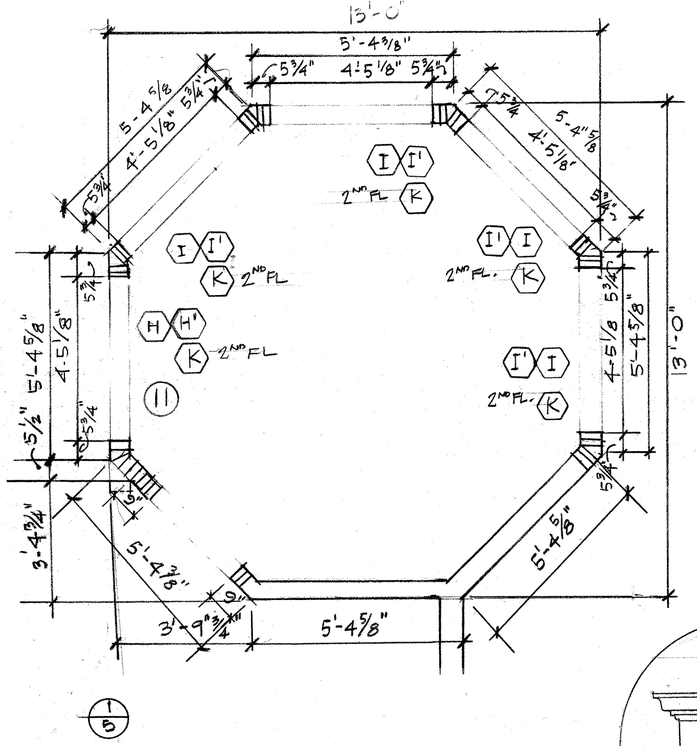
FRONT VIEW 1/4

MARCH 23 2020



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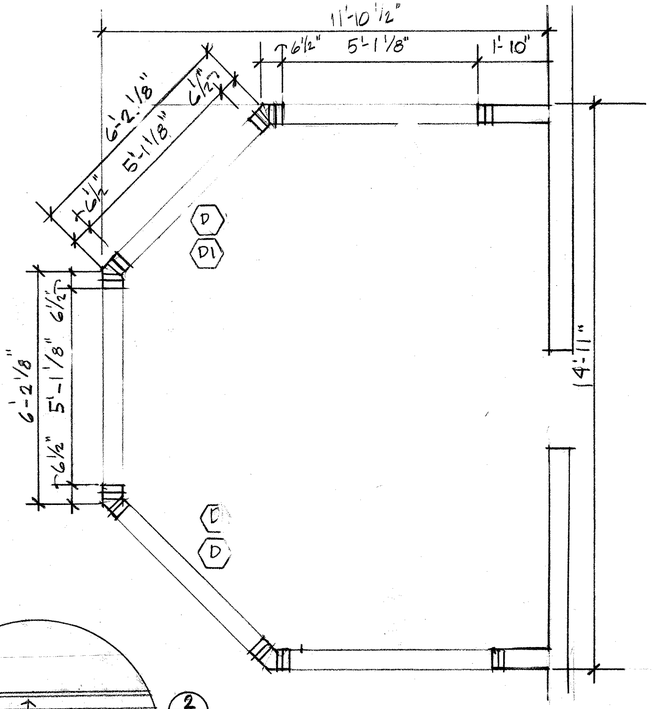
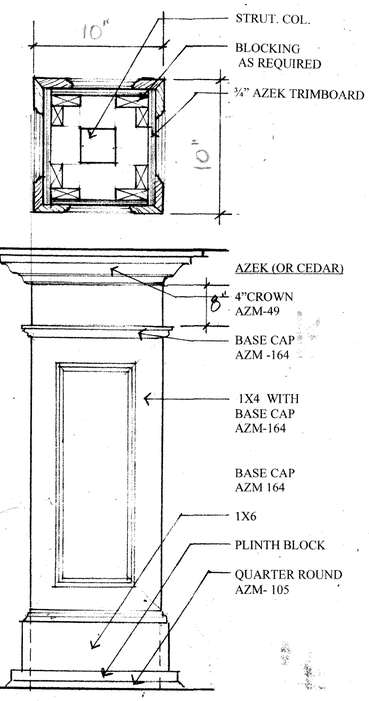
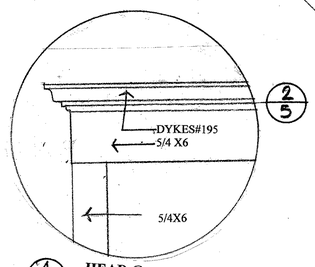
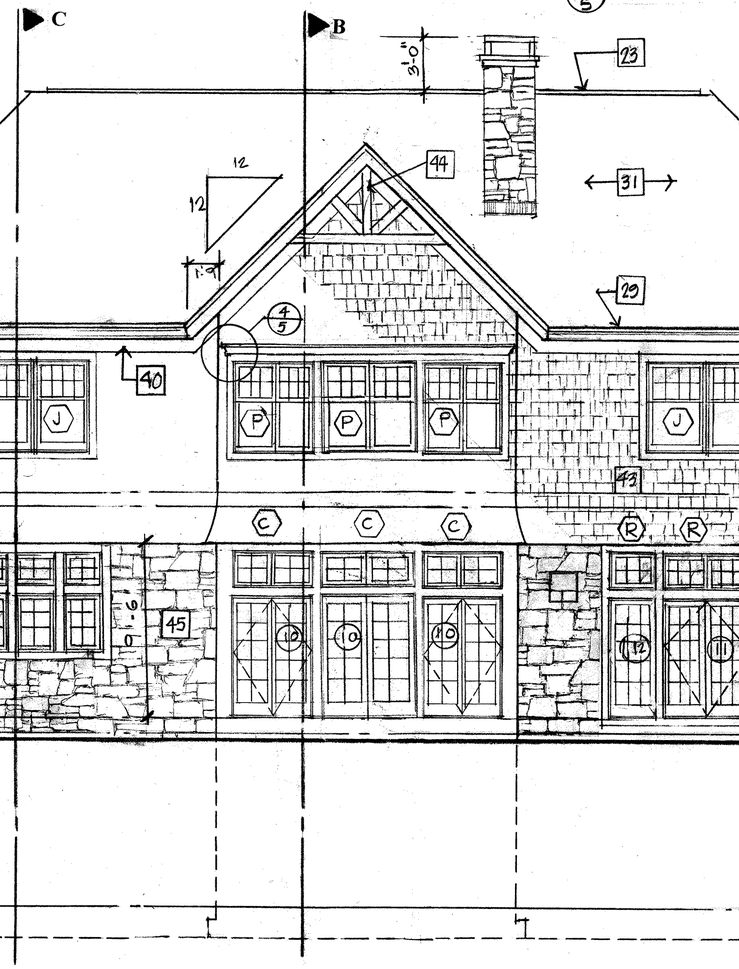




3/5 **PORCH COLUMN 1¼"**



4/5 **HEAD @ WINDOWS**



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REAR SIDE 1/4

MARCH 23 2020

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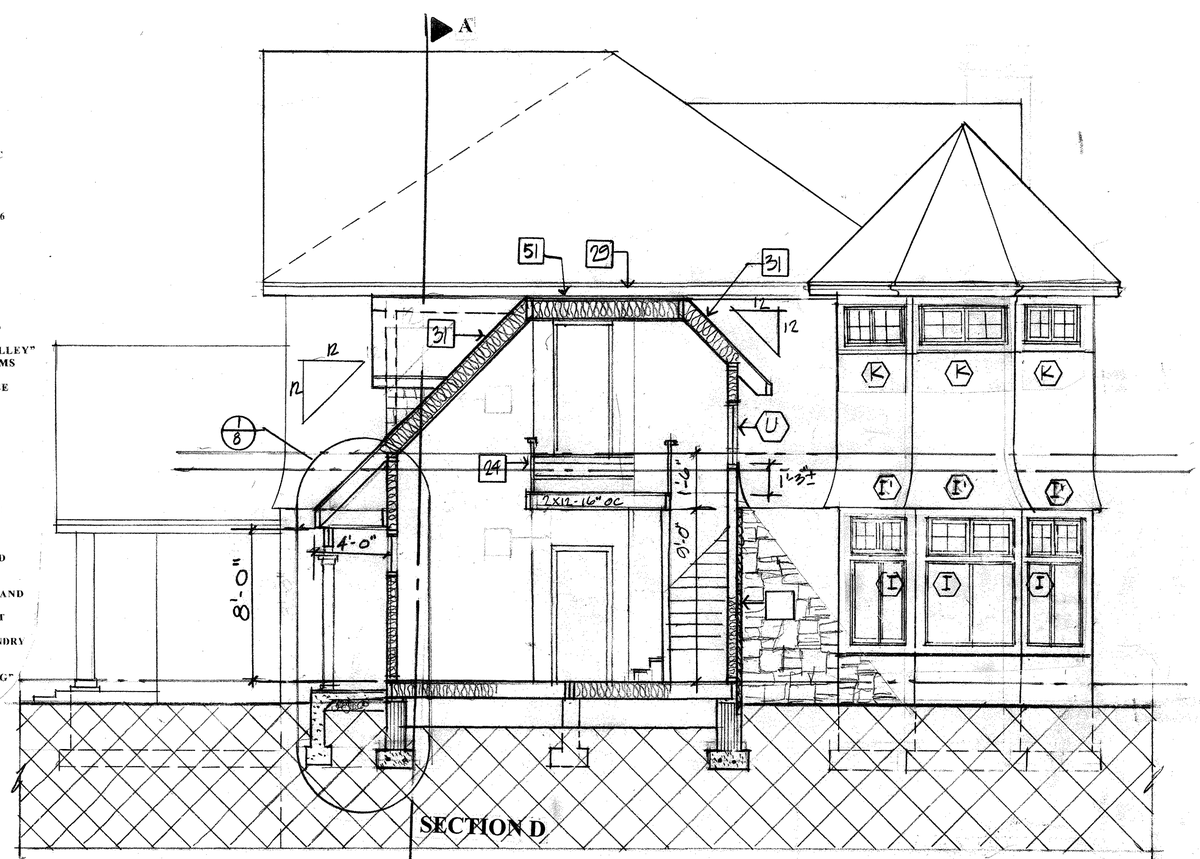
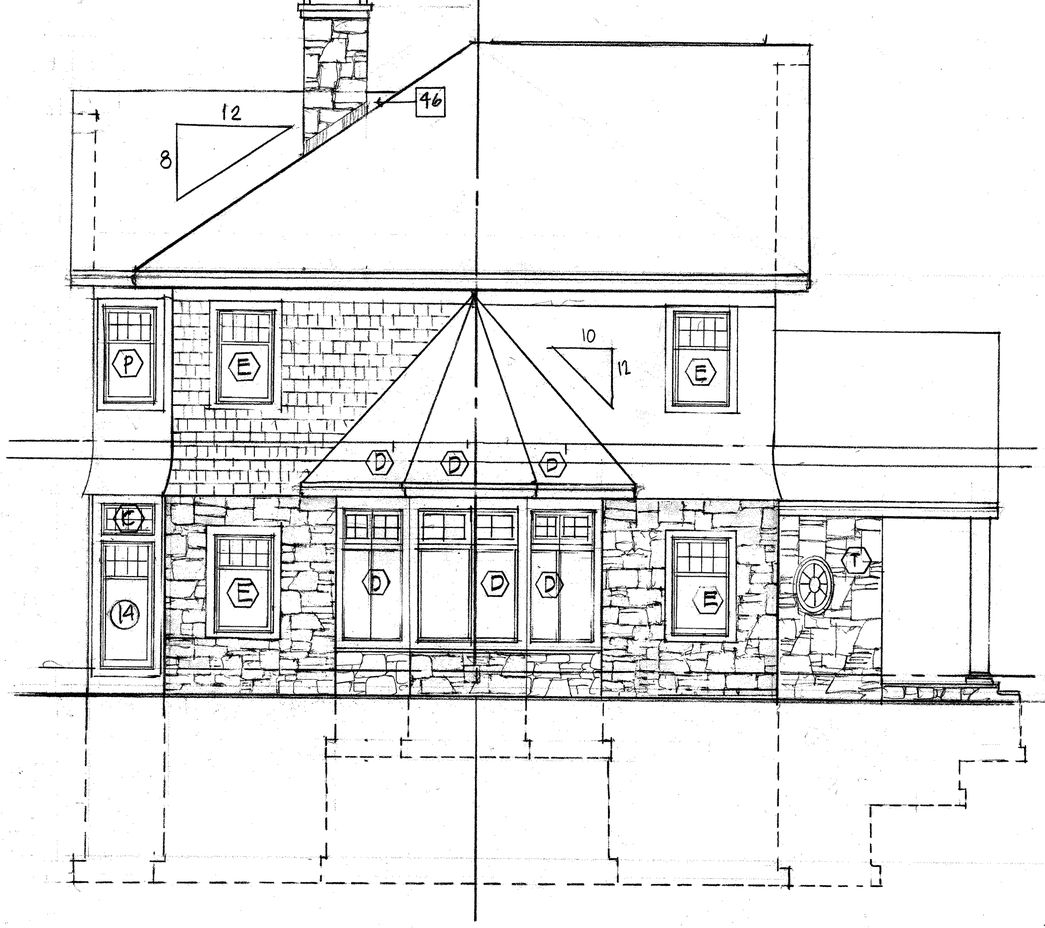
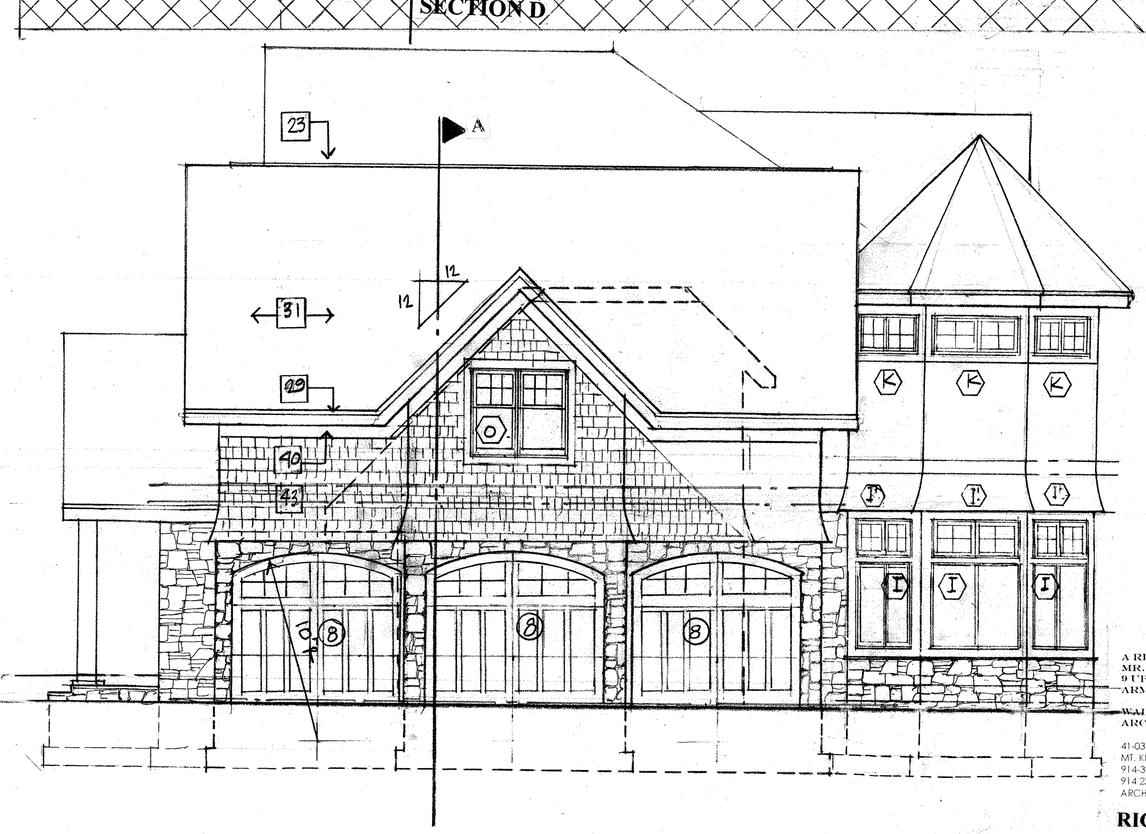


SECTION D





A RESIDENCE FOR
MR. AND MRS J. CHRYSSICAS
9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

RIGHT SIDE 1/4
LEFT SIDE 1/4

MARCH 23 2020

CHRYSSICAS RESIDENCE
ZONING CHART

LOT 101.4 SECTIONB 2C LOT 4,Zoning district R2

	REQUIRED	*EXISTING HOUSE*	*PROPOSED*
LOT AREA	20,000 SF	100,884 SF	NO CHANGE
WIDTH MIM.	**150**	**'**	**72'**
MIM. SETBACK FRONT	**50'**		**72'**
REAR	**50'**		**192'**
SIDE	**30'**		**45'**
MAX. LOT GROSS LAND COVERAGE	**14,302SF**		**10.744**
COVERAGE MAX BUILD COVERAGE	**8%**		**4.6%**
MIM DWELLING UNIT SIZE	**1400 SF**		**6378 SF**
FLOOR AREA RATIO	**10677SF**		**9.860 SF**
MAX. BUILD. HGT.	**--- 30' (2 ½)**		**28'**

WINDOW SCHUDULE

NUMBER	*UNIT SIZE* W x H		*MODEL*	*MANUFACTURE*
A	2-11 x 4-8		TW21046	ANDERSON
A1	2-11'X 1-9		TWT210017	"
B	1-9 X 4-8		TW1846	"
C	2-5 X 1-9	MULL PAIR	TWT1821	"
D	5-0 X 4-8	MULL PAIR	CUSTOM PAIR	"
D1	5-0 X 1-9	MULLPAIR	CUSTOM PAIR	"
E	2-11 X 4-8		TWT21046	"
G	2-0 X 2-11		CW123	"
G1	2-1 X 2-0		TWT2017	"
F	1-9 X 3-1		TWT3017	"
H	1-9 X 4-8		TW1846	"
H1	1-9 X 1-9		TW1817	"
I	4-4 X 4-8	MUL PAIR	CUSTOM	"
I1	4-4 X 1-9	MUL PAIR	CUSTOM	"
J	3-1 X 4-8	EGRESS	TW 3046	"
J1	3-1 X 1-9		TW3017	"
K	4-4 x 1-6	MUL PAIR	CUSTOM	"
L	2-1 x 4-8		TW2046	"
M	2-1 X 5-4		TW 2052	"
N	2-11 X 2-11		CXW13	"
O	2-5 X 4-8		TW2446	"
P	2-1 x 4-8		TW2046	"
Q	2-2 X 2-2		WTR 201111	"
R	1-9 X 2-5		TWT 2417	"
S	3-1 X 5-4		TW 3052	"
T	2-0 X 2-11		OVL2030	"
U	2-7 x 2-5		TWT2623	"
V	3-1 X 4-8	EGRESS	TW3046	"
W	2-11 X 1-9		TWT21017	"
X	2-5 X 2-5		TWT2423	"
Y	2-5 x 3-1		TWT3023	"
Z	2-6 1/8"X6-8	SIDE LIGHT	FWH2768AR	"

DOOR SCHUDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
1	*3-0 X 6-8*		
2	*2-4 X 7-0*	*F44*	*SIMPSON*
3	*4-0X 7-0 PAIR*	"	"
4	*2-6 X 7-0*	"	"
5	*2-6 X 6-8*	"	"
6	*2-6 X 7-0 PAIR*	"	"
7	*3-0 X 7-0 FIRE DOOR"*	*510*	*THERMA TRU*
8	*2-8X 6-8*	*F7228U*	*SIMPSON*
9	*7-0 X 9-0 GARAGE*	*AS SHOWN*	*OVERHEAD DOORS*
10	*4-0 X 6-8*	*FWH4168APLR*	*ANDERSON*
11	*3-0 X 6-8*	*FWH5068APLR*	"
12	*2-6 X6-8*	*FWH2768AR*	"
13	*5-0 X 6-8 PAIR*	*F44*	*SIMPSON*
14	*4-0x 6-8 PAIR*	"	"
15	5-0 X6-8 PAIR	"	"

1. BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2. SHELF AND CLOTH POLE
3. EXHAUST FAN PANOSONIC FV08VQ2
4. LINE OF CEILING ABOVE
5. STAIRS UP 18R@ 7 ¾' 17 T @ 10 ½" PER NYS-IBC SECTION311
6. EDGE OF BALCONY ABOVE
7. 6 X 6 POST
8. SEE WOOD HEADER SCHEDULE SHEET 1
9. EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHING , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
10. ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND FOWDER ROOM WALL-SOUND INSULATE
11. GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
12. (3) 2X 12 BEAMS
13. 6" STEEL COL SEE DETAIL 3/3
14. PANTRY SHELF BY OWNER
15. SHELVING BY OWNER
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18. 6 X6 WOOD COLUMNS PT CLAD IN TRIM DETAIL 3/5
19. CLOTH POLE AND SHELF
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23. COR VENT
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30. FLOOR MATERIAL SBO-IBC
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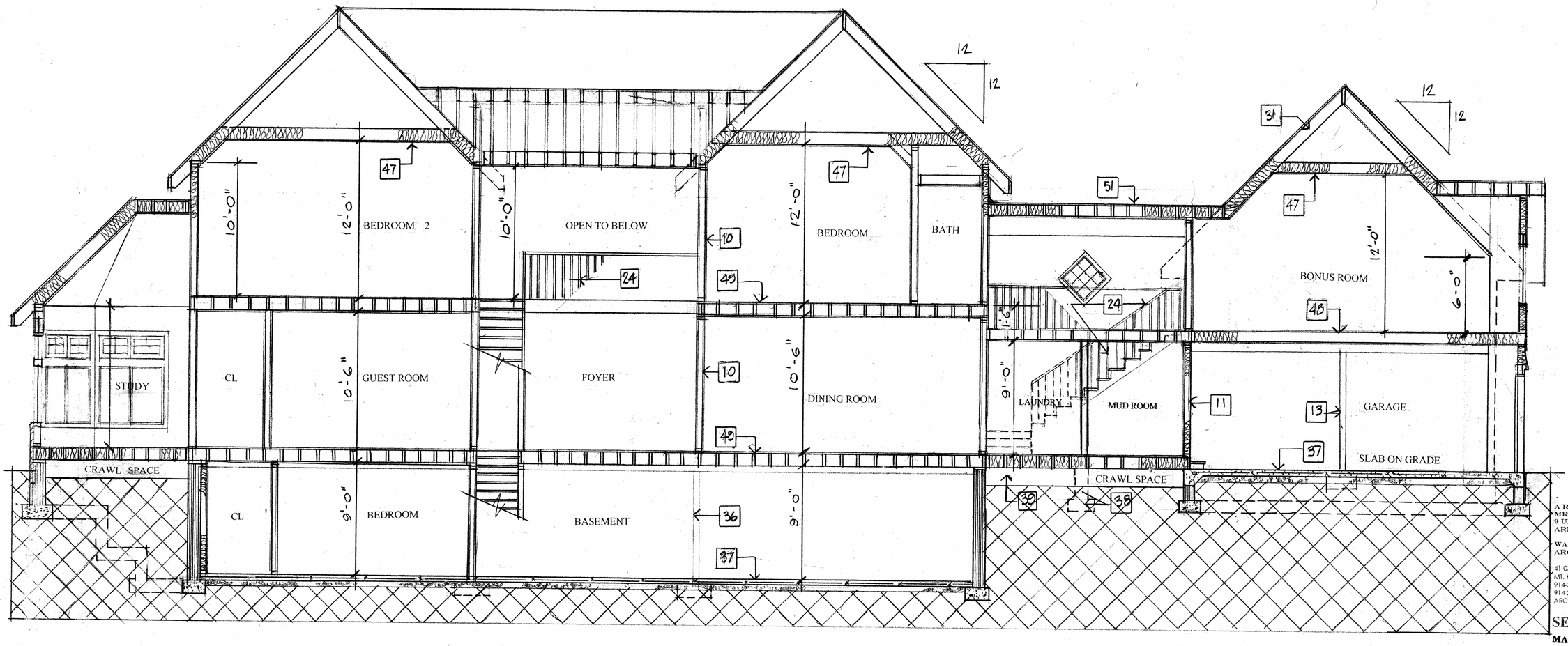
33. CATHEDRAL CEILING
34. TRAY CEILING
35. 16"CONC BLOCK FOUND.WALL ON 12X 36 FOOTING W/(4) ST. REBARS BOTHWAYS CARRIED BELOW FROST LINE
36. 6 "STEEL COL.ON 1-3 X 3-0 CONC FOOTING SEEDET.3/3 ON SHT 3
37. 6" CONC.SLAB WITH 4 X 4 WWF ON 6" COMPACTED FILL SLOP FLOOR TO FRONT
38. 12 X12 CONC FOOTING ON 36 X 36 CONC FOUNDATION W/(4) #5 ST. BARS BOTH WAYS– SEE DET.2/3 SHT3
39. CRAWL SPACE PER NYS IBC
40. LOAD BEARINGWALL
41. FIRE PLACE FINISHES SBO-IBC
42. STUCT. BEAM
43. 2 X6 -16"0C ,R36 INSULATION – EXT SEATHING -1/2' DRY WALL SECOND FLOOR SIDING TO BE - CEDAR SHAKES BY"CEDAR VALLEY"
44. 4 X4 CEDAR DECORATIVE BEAMS PAINTED
45. 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46. CRICKRET/COOPER FLASHING
47. TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48. 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49. 2 X12-16'OC- ¾" PLYWOOD SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
50. STONE CLAD CHIMENY 36 X 36 3 '-0" ABOVE LINE PER CODE
51. 2 LAYERES OF RIDGID " ICE AND WEATERSHIELD
52. WAINSCOTTING 1 X4
53. WALL FINISH MATCH FINISH AND DESIGN OF DOOR 8 -PAINT
54. JOIST HANGER THROUGHTOUT
55. ALL FLOORS IN ALL BATHROOMS, POWDER ROOM, MUD ROOM ,LAUNDRY TO TILE SBO-IBC
56. ALL BATHROOM FLOORS TO "SUN TOUCH FLOOR WARMING"
57. VENT BLOCK AS PER NYCIBC SECTION R606. 1 AND R408.3



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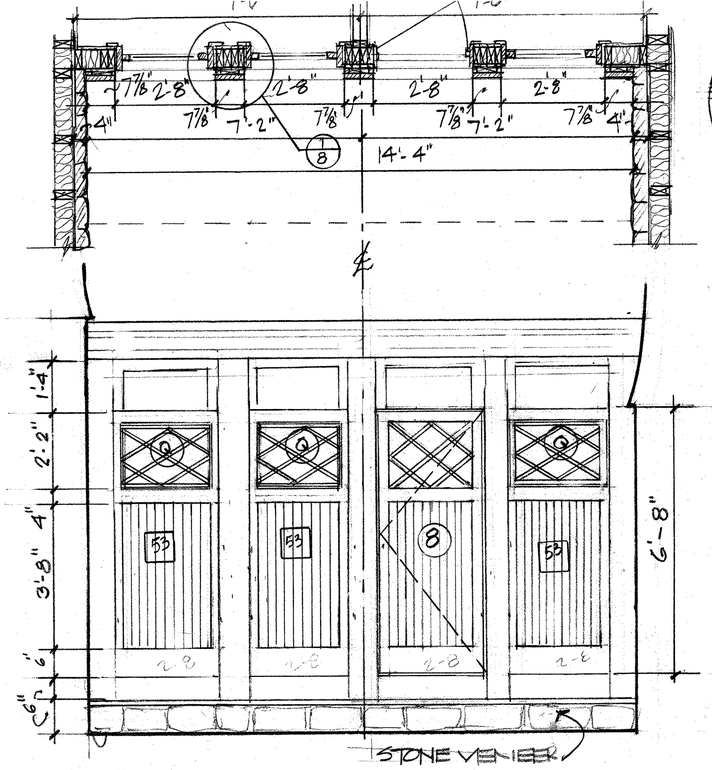
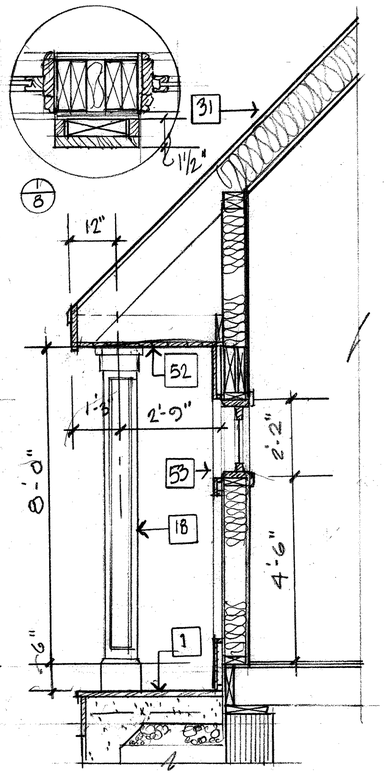
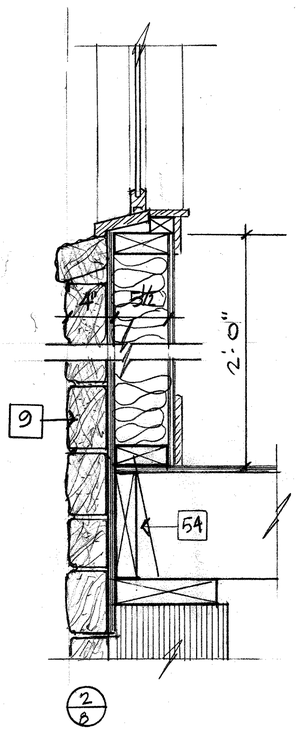
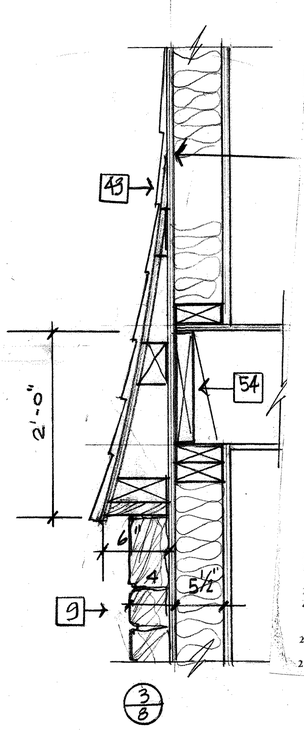
SECTION A
MARCH 23 2020









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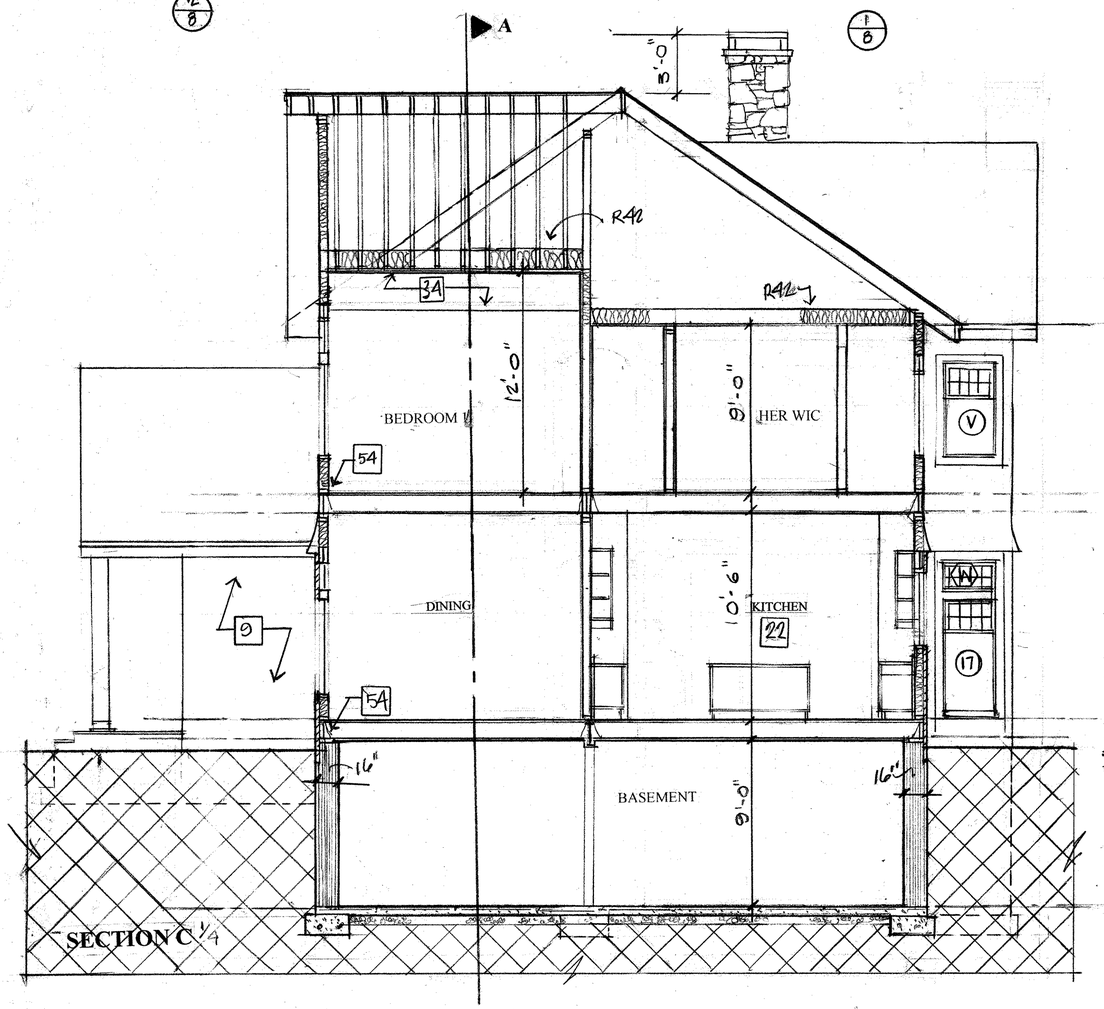

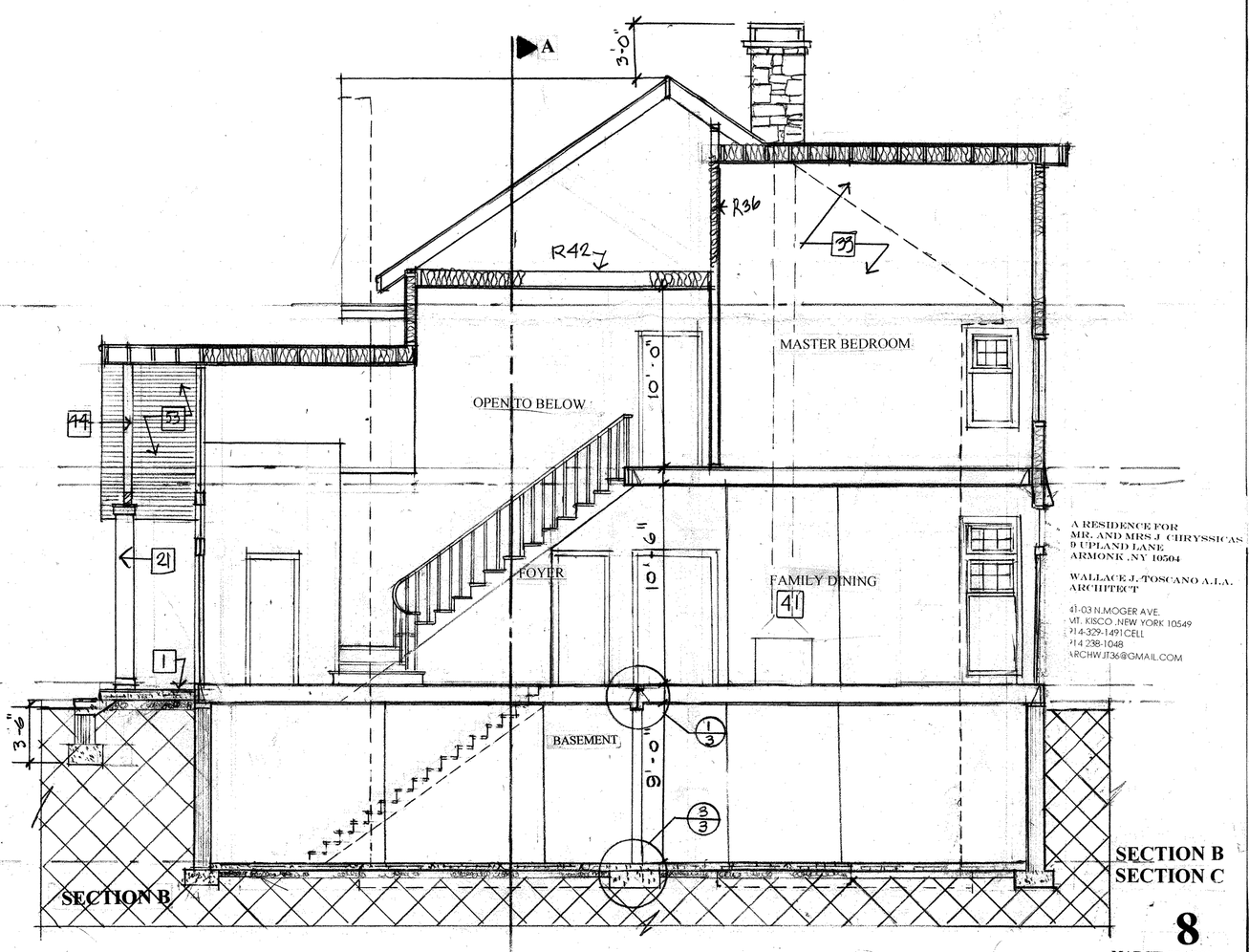

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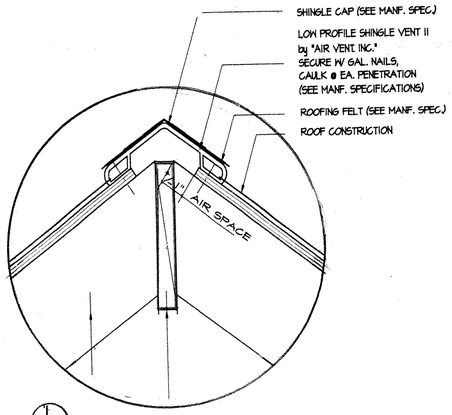
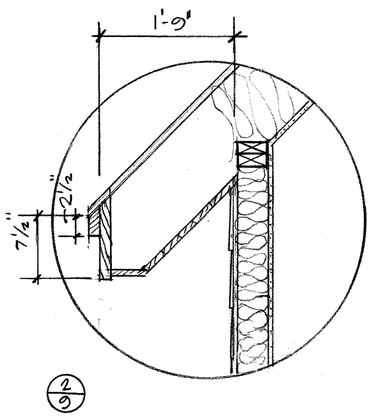
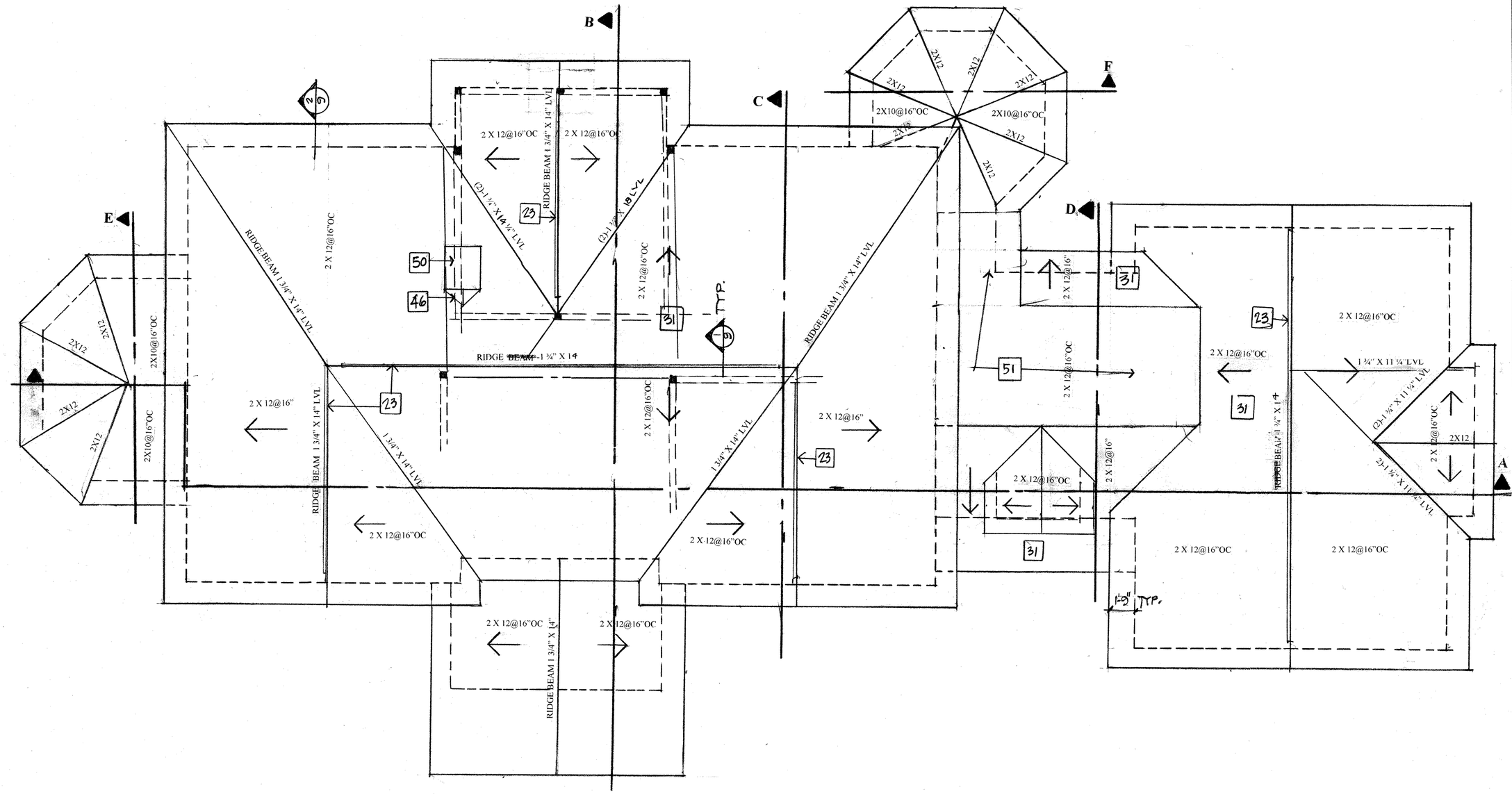
SECTION B
SECTION C







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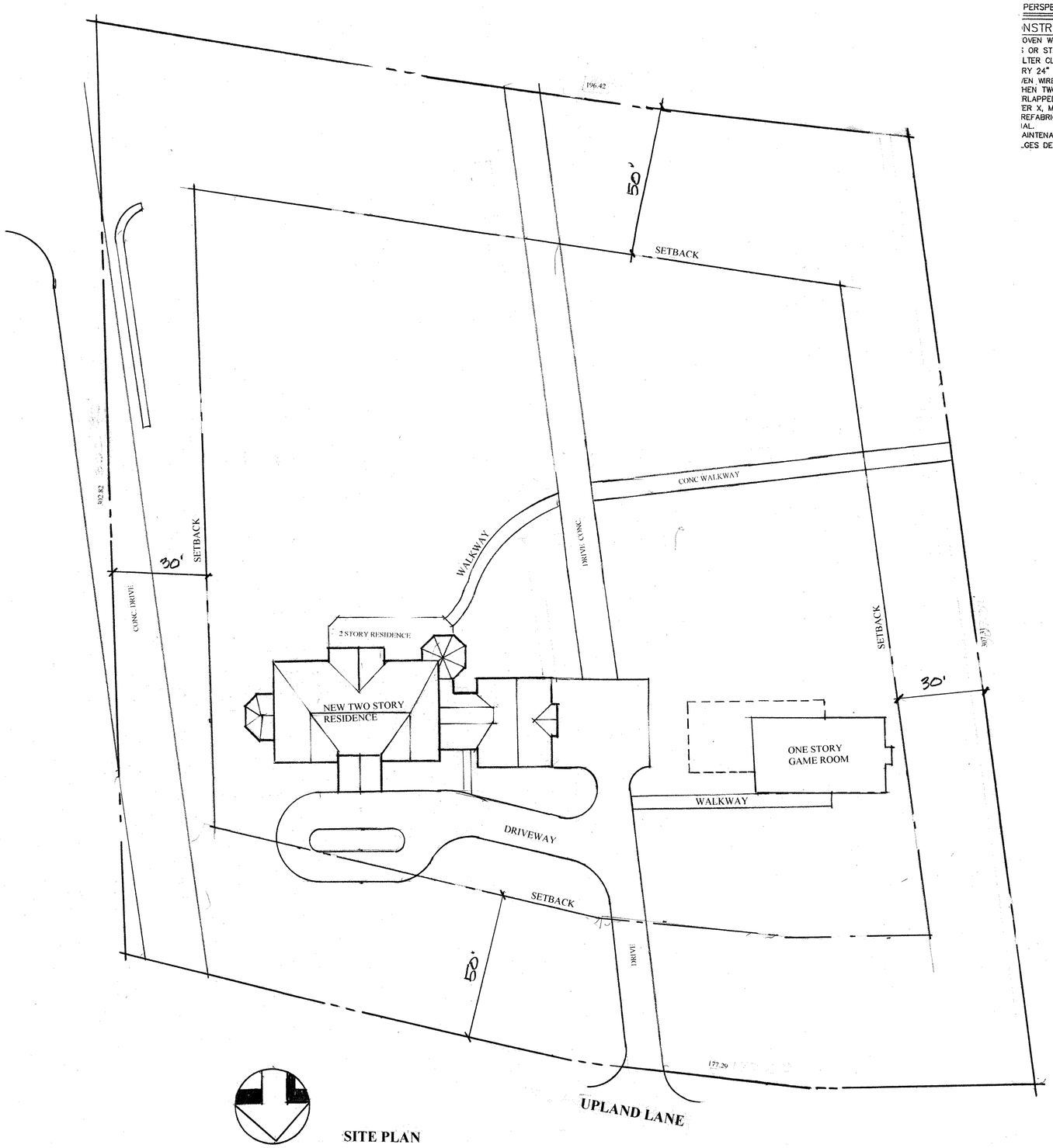
ROOF PLAN 1/4

MARCH 23 2020

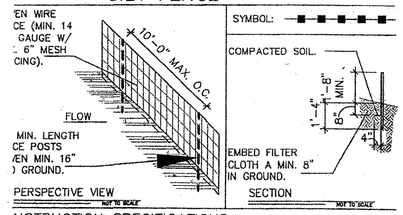
13

SITE



SITE PLAN

SILT FENCE



NSTRUCTION SPECIFICATIONS:

OVEN WIRE FENCE TO BE FASTENED SECURELY TO FENCE POST W/ WIRE
; OR STAPLES. POST SHALL BE EITHER "T" OR "U" TYPE STL. OR HARDWD.
LTER CLOTH TO BE FASTENED SECURELY TO WOVEN WIRE FENCE W/ TIES
RY 24" O.C. AT TOP & MID SECTION. FENCE S L BE 14 1/2 GAUGE
EN WIRE. 6" MAX. MESH OPENING.
HEN TWO SECTIONS OF FILTER CLOTH ADJ THER THEY SHALL BE
RLAPPED BY SIX INCHES & FOLDED. FILTE ALL BE EITHER
ER X, MIRAFI 100X, STABILINKA T140N, OR APPROVED EQUAL.
REFABRICATED UNITS SHALL BE GEOFAB, ENVIROFENCE, OR APPROVED
IAL.
AINTENANCE SHALL BEPERFORMED AS NEEDED & MATERIAL REMOVED WHEN
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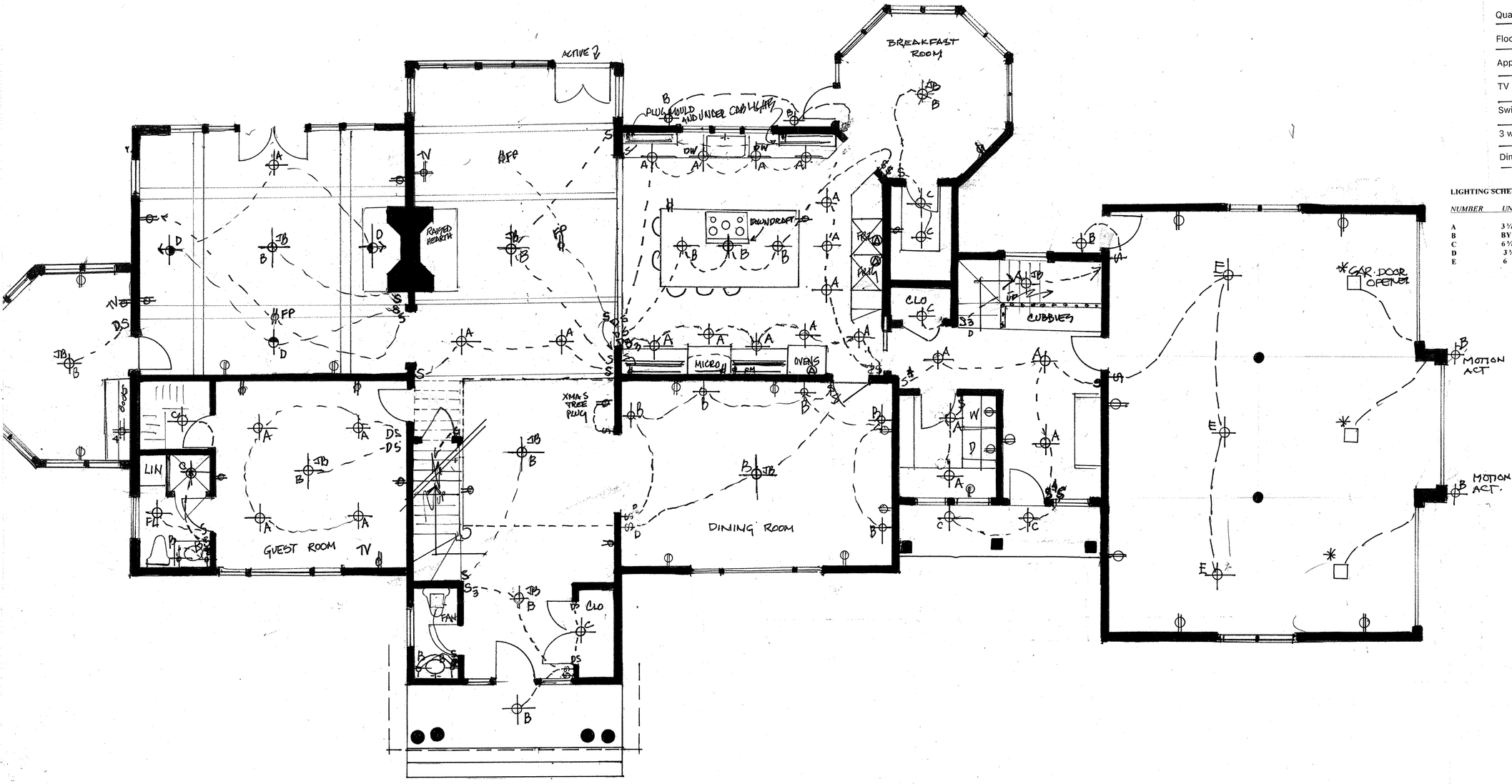
SITE PLAN 1"=20'

MARCH 23 2020

10



Electrical Symbols

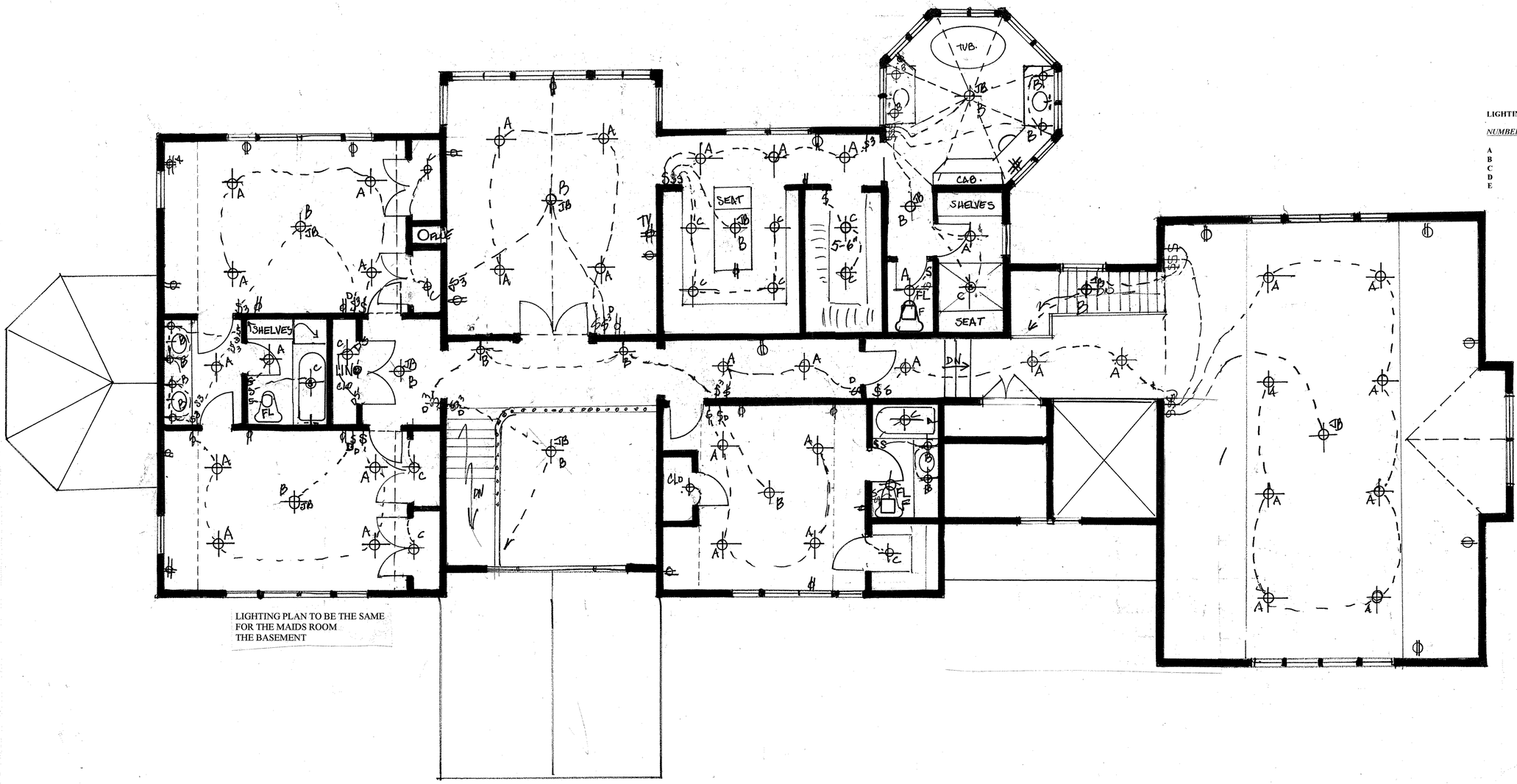
Recessed Hi Hats	○
Wall Washer Hi Hat	◐
Sealed Fixture	Ⓢ
Junction Box for Surface Mounted Fixture	JB
Fan Light	FL
Fan	F
Sconce light	
Undercabinet lights	
Plug Mould	
Duplex outlet	
Quad outlet	
Floor Plug	FP
Appliance plug	Ⓐ
TV Connection for Cable	TV
Switch	S
3 way Switch	S3
Dimmer Switch	DS

LIGHTING SCHEDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
A	3 ½	2005 –MR 16	LOIGHTOLIER
B	BY OWNER	SBO-IBC	"
C	6 ½"	1126 WHITE DIFF.	"
D	3 ½"	2022LV MR16	"
E	6	1076WH	

BEVERLY ELLSLEY Design
4 Partrick Lane , Westport CT 06880
203 227 1157 phone ellslev@aol.com
www.beverlyelsley.com website

First Floor Electrical
For Design Intent Only
SAM AND JASON CHRYSSICAS
ARMONK, NY
MARCH 23 2020



LIGHTING PLAN TO BE THE SAME
FOR THE MAIDS ROOM
THE BASEMENT

Electrical Symbols

Recessed Hi Hats	○
Wall Washer Hi Hat	◐
Sealed Fixture	Ⓢ
Junction Box for Surface Mounted Fixture	JB
Fan Light	FL
Fan	F
Sconce light	
Undercabinet lights	
Plug Mould	
Duplex outlet	
Quad outlet	
Floor Plug	FP
Appliance plug	
TV Connection for Cable	TV
Switch	S
3 way Switch	S3
Dimmer Switch	DS

LIGHTING SCHEDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
A	3 ¼	2005 –MR 16	LOIGHTOLIER
B	BY OWNER	SBO-IBC	"
C	6 ½"	1126 WHITE DIFF.	"
D	3 ½"	2022LV MR16	"
E	6	1076WH	"

BEVERLY ELLSLEY Design
4 Partrick Lane , Westport CT 06880
203 227 1157 phone ellsley@aol.com
www.beverlyelsley.com website

Second Floor Electrical
For Design Intent Only

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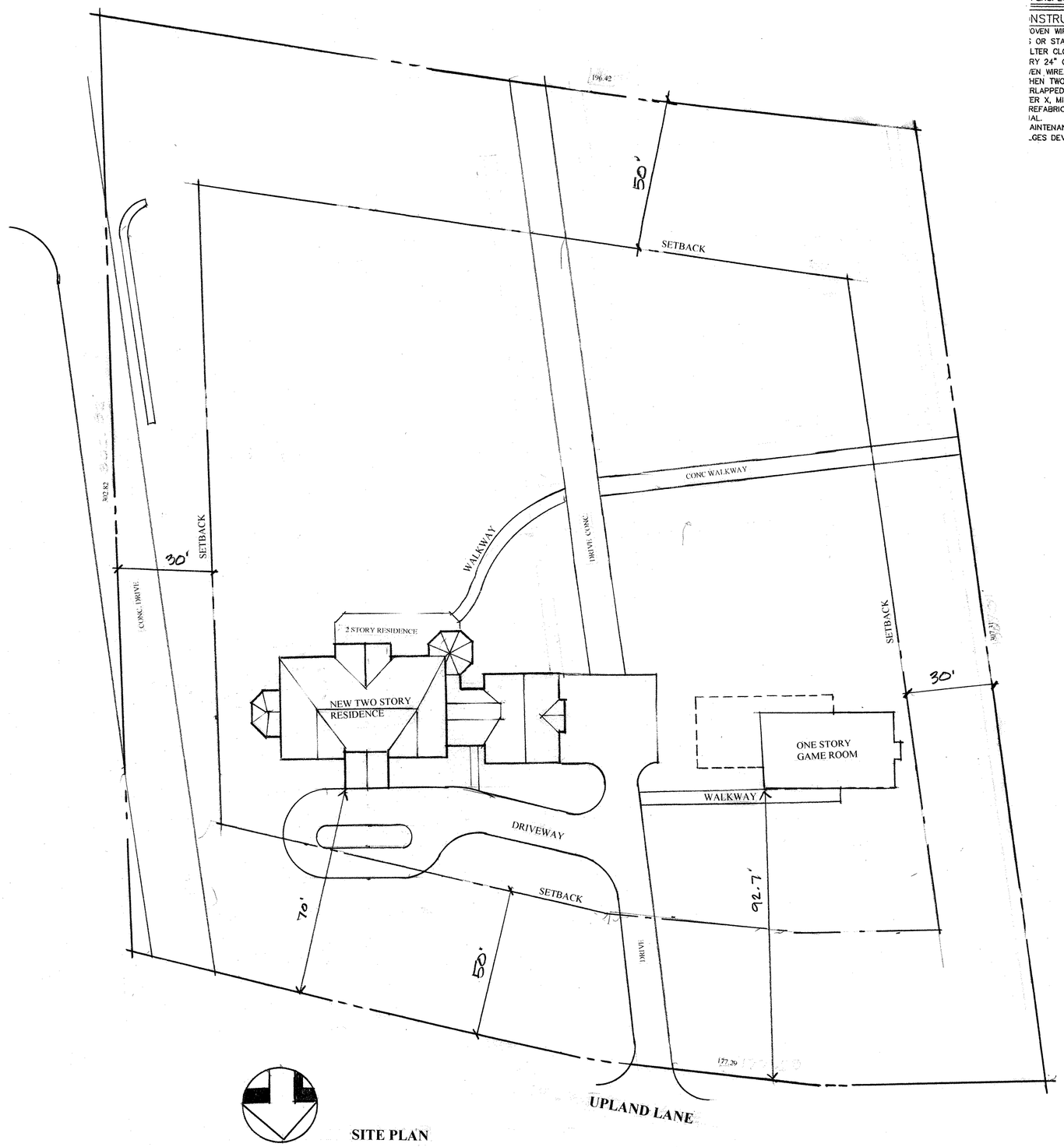
ARMONK NY

MARCH 23 2020

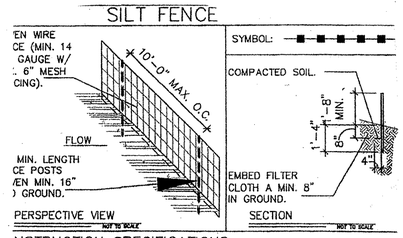
13

SITE



SITE PLAN

SILT FENCE



NSTRUCTION SPECIFICATIONS:

OVEN WIRE FENCE TO BE FASTENED SECURELY TO FENCE POST W/ WIRE
; OR STAPLES. POST SHALL BE EITHER "T" OR "U" TYPE STL. OR HARDWD.
LTER CLOTH TO BE FASTENED SECURELY TO WOVEN WIRE FENCE W/ TIES
RY 24" O.C. AT TOP & MID SECTION. FENCE S[illegible] L BE 14 1/2 GAUGE
/EN WIRE. 6" MAX. MESH OPENING.
HEN TWO SECTIONS OF FILTER CLOTH ADJ[illegible] THER THEY SHALL BE
RLAPPED BY SIX INCHES & FOLDED. FILTE[illegible] ALL BE EITHER
ER X, MIRAFI 100X, STABILINKA T140N, OR APPROVED EQUAL.
REFABRICATED UNITS SHALL BE GEOFAB, ENVIROFENCE, OR APPROVED
IAL.
AINTENANCE SHALL BEPERFORMED AS NEEDED & MATERIAL REMOVED WHEN
GES DEVELOP IN THE SILT FENCE.

A RESIDENCE FOR
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SITE PLAN 1"=20'

MARCH 23 2020

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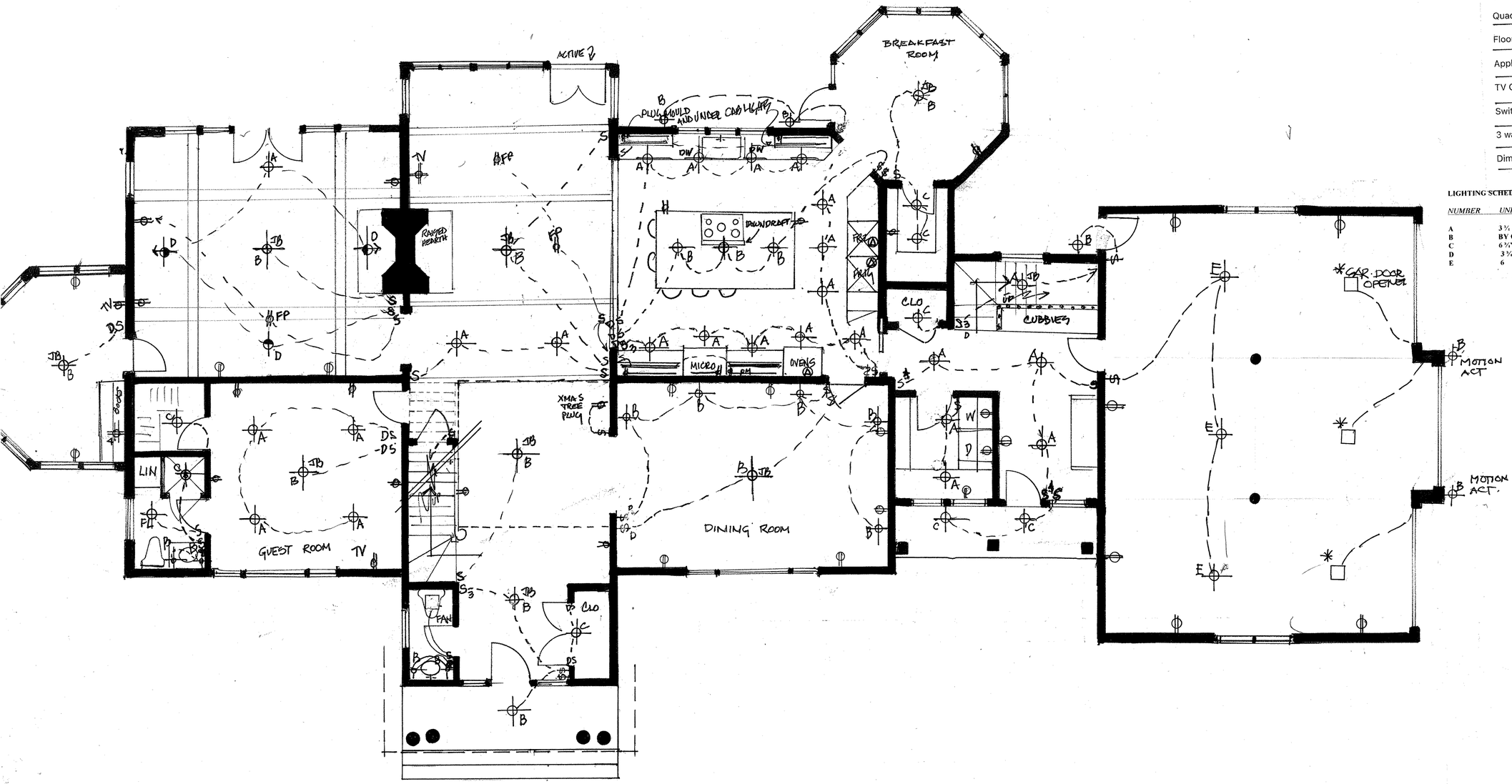

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First Floor Electrical
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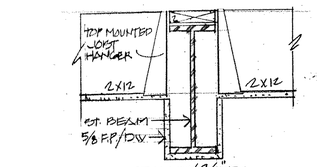
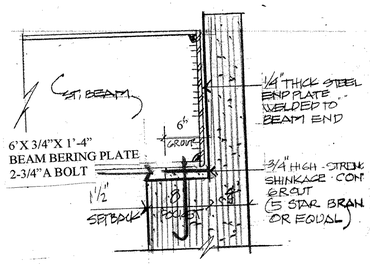
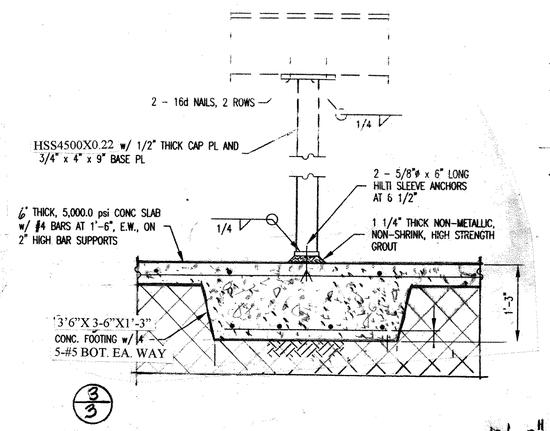


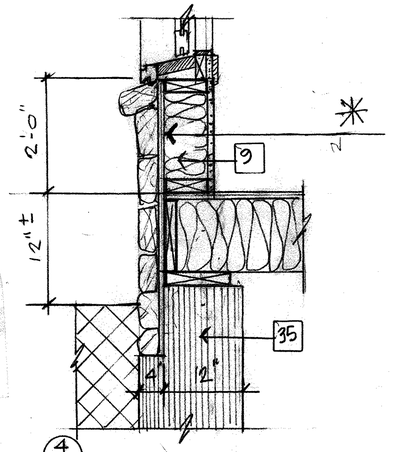
1/3 BEAM SECTION



2/3 BEAM POCKET DETAIL
POCKET IS 12" LONG



3/3



4/3

1. BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2. SHELF AND CLOTH POLE
3. EXHAUST FAN PANOSONIC FV08VQ2
4. LINE OF CEILING ABOVE
5. STAIRS UP 18R@ 7 ½' 17 T @ 10 ½" PER NYS-IBC SECTION311
6. EDGE OF BALCONY ABOVE
7. 6 X 6 POST
8. SEE WOOD HEADER SCHEDULE SHEET 1
9. EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHING , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
10. ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND POWDER ROOM WALL-SOUND INSULATE
11. GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
12. (3) 2X 12 BEAMS
13. 6" STEEL COL SEE DETAIL 3/3
14. PANTRY SHELF BY OWNER
15. SHELVING BY OWNER
16. WOOD STAIRS 16R @7 ½" 15 T @ 10"
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18. 6 X6 WOOD COLUMNS PT CLAD IN TRIM DETAIL 3/5
19. CLOTH POLE AND SHELF
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21. 12" DORIC COLUMNS
22. KITCHEN DEAISN BY OWNER -ALLCABINETS FURNISHED AND INSTALLED BY OWNER
23. COR VENT
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25. OPEN TO BELOW
26. CHIMENY FLUE SHALL COMPLY WITH NYS IBC SECTIONS R1003 THRU R1004 , R1005., R1006
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31. "OWENS CORNING" LAM. ARCH. ROOF SHINGLES BROWNWOOD
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45. 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46. CRICKRET/COOPER FLASHING
47. TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48. 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49. 2 X12-16'OC- ¾" PLYWOOID SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
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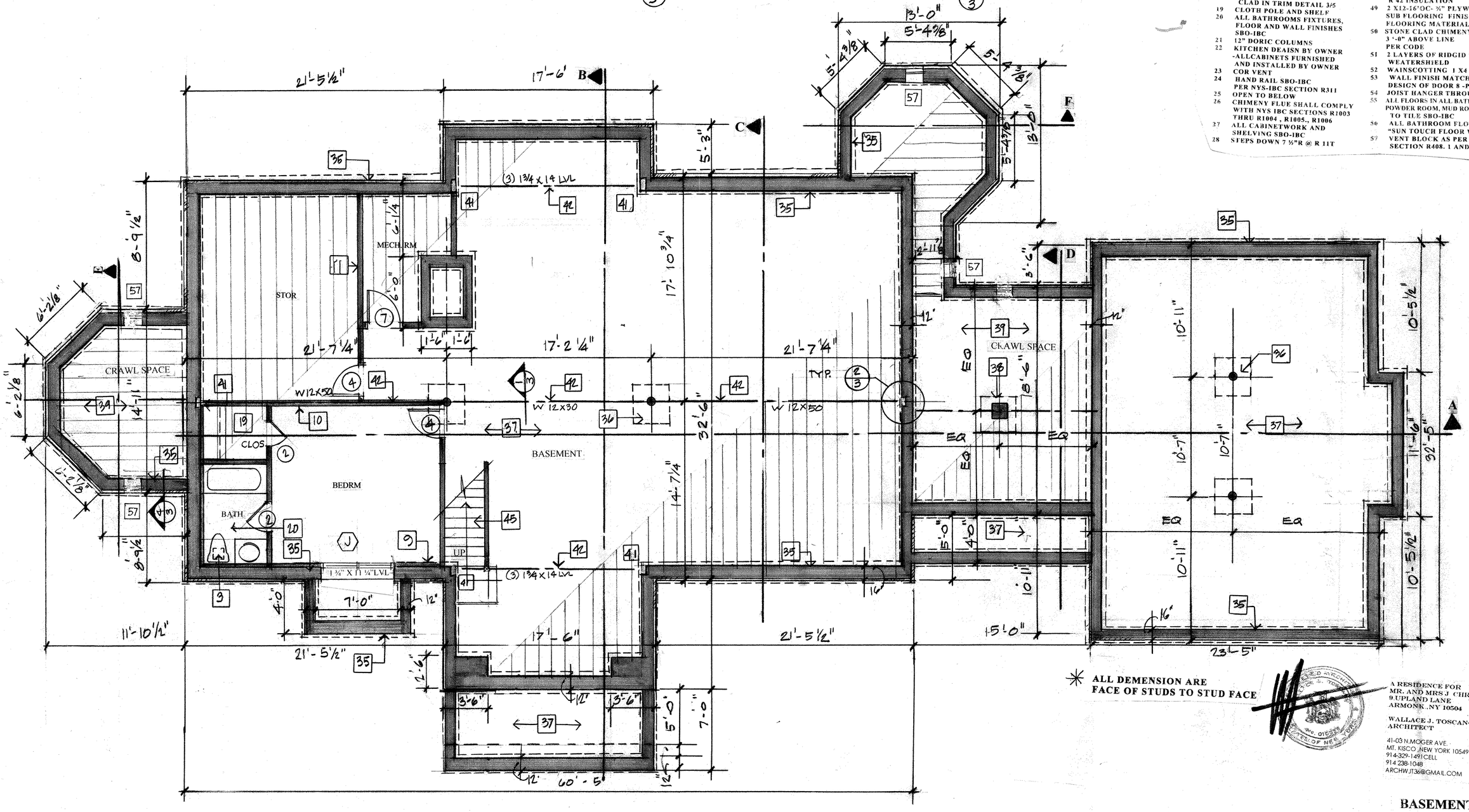

✳ ALL DEMENSION ARE FACE OF STUDS TO STUD FACE

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BASEMENT

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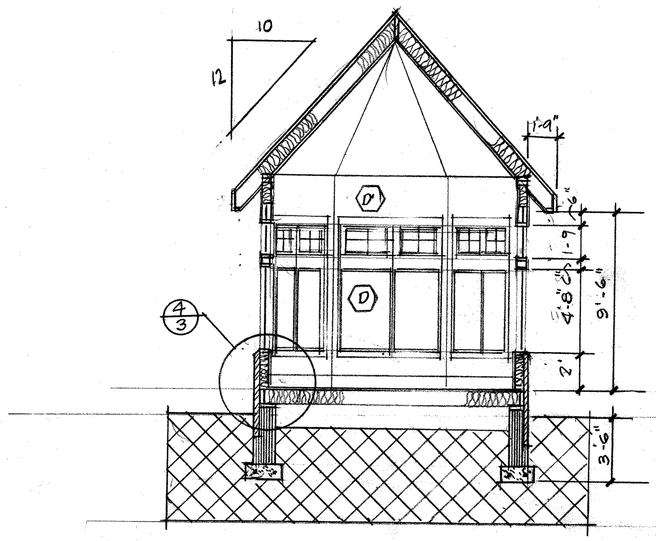
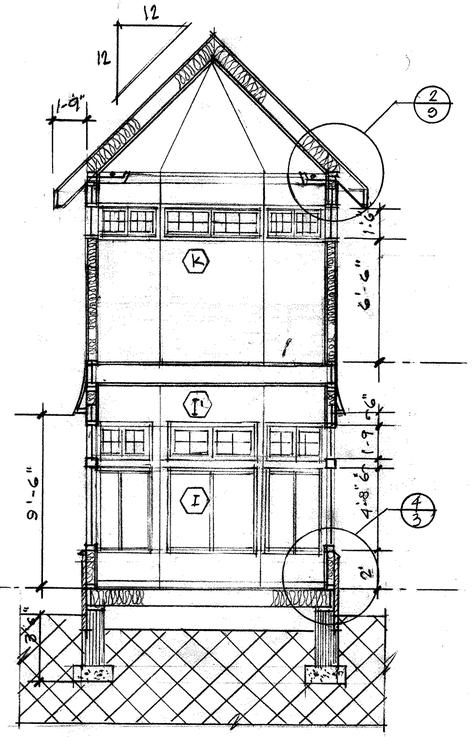
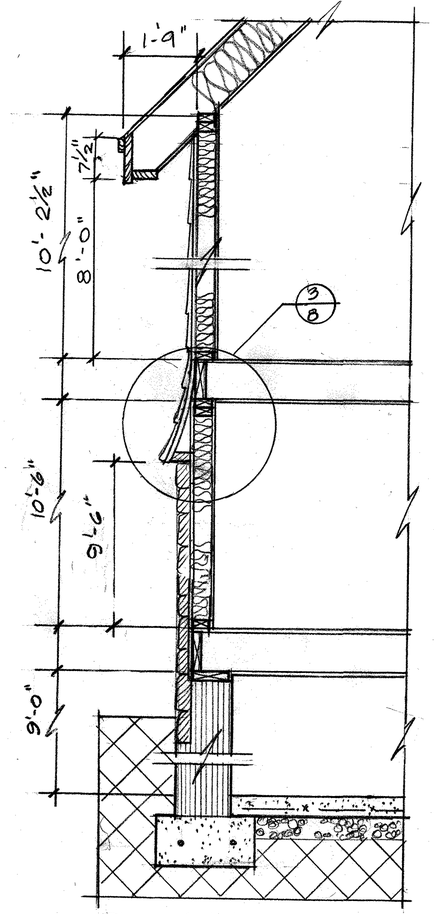


SECTION E



SECTION F



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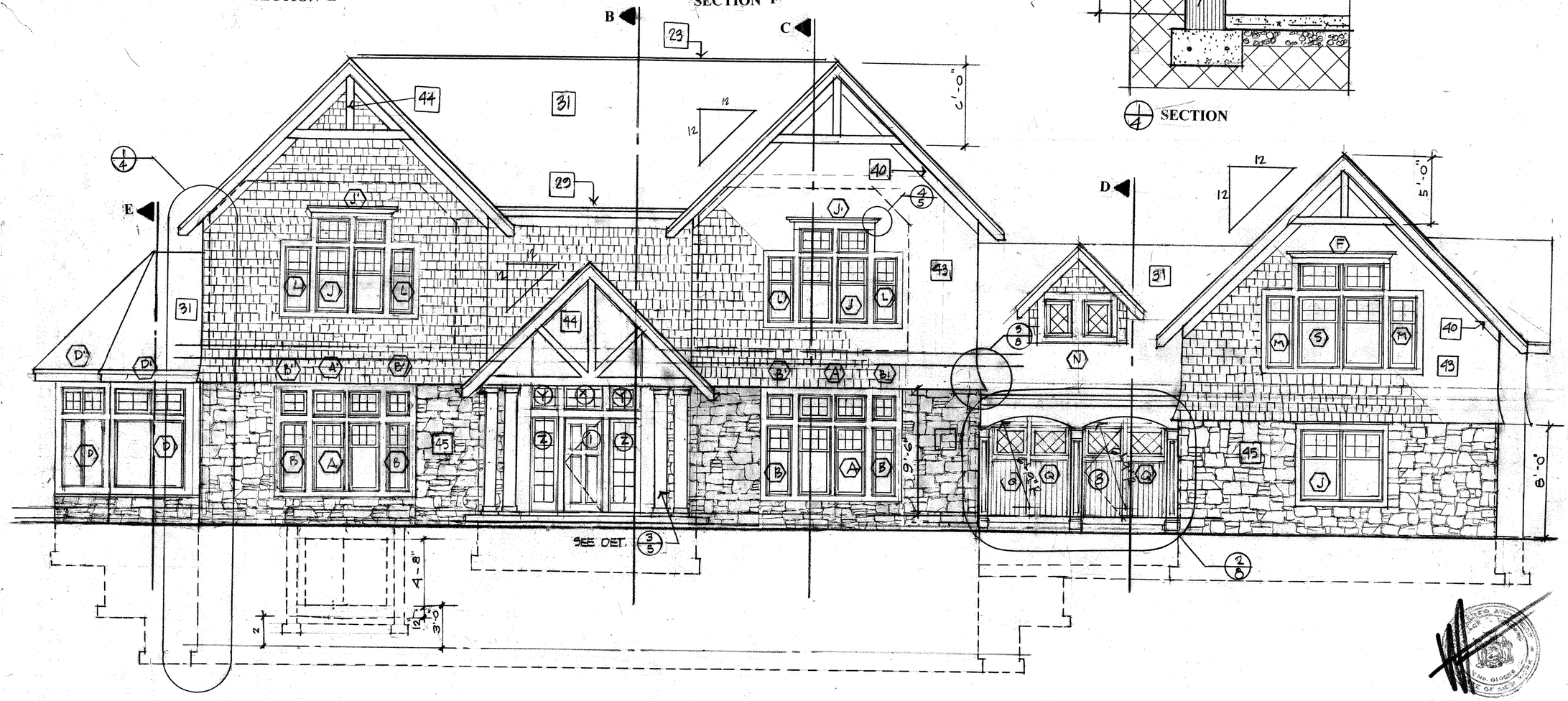

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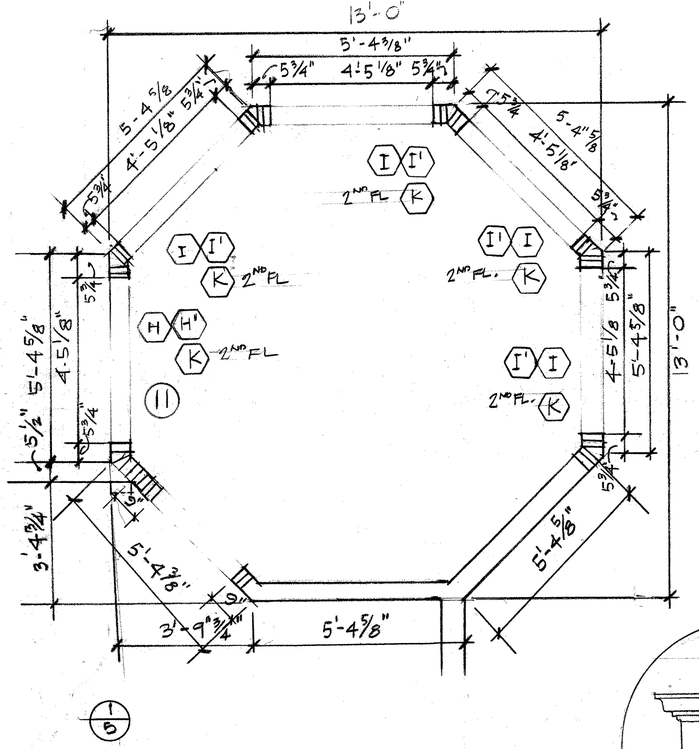
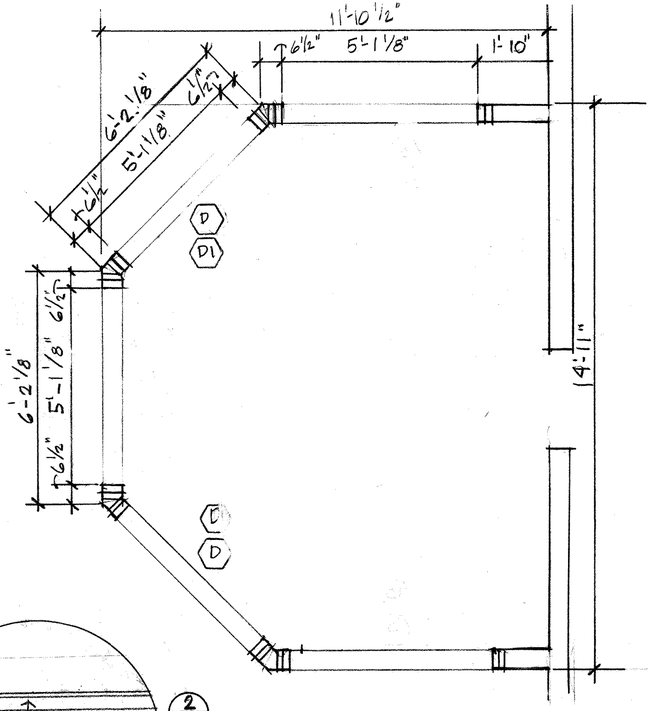
FRONT VIEW 1/4

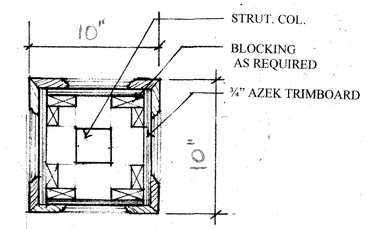
MARCH 23 2020

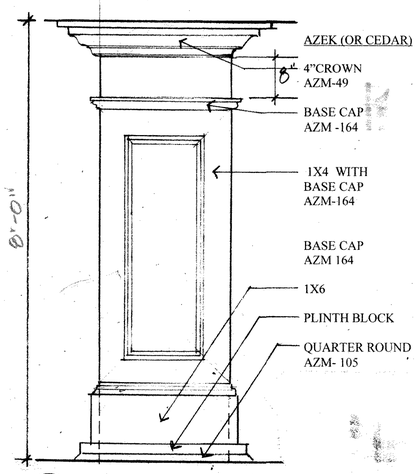
4



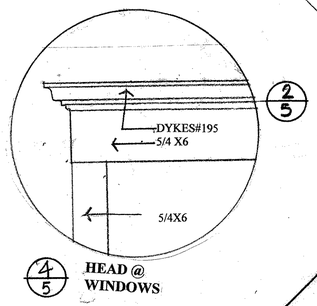
1/5



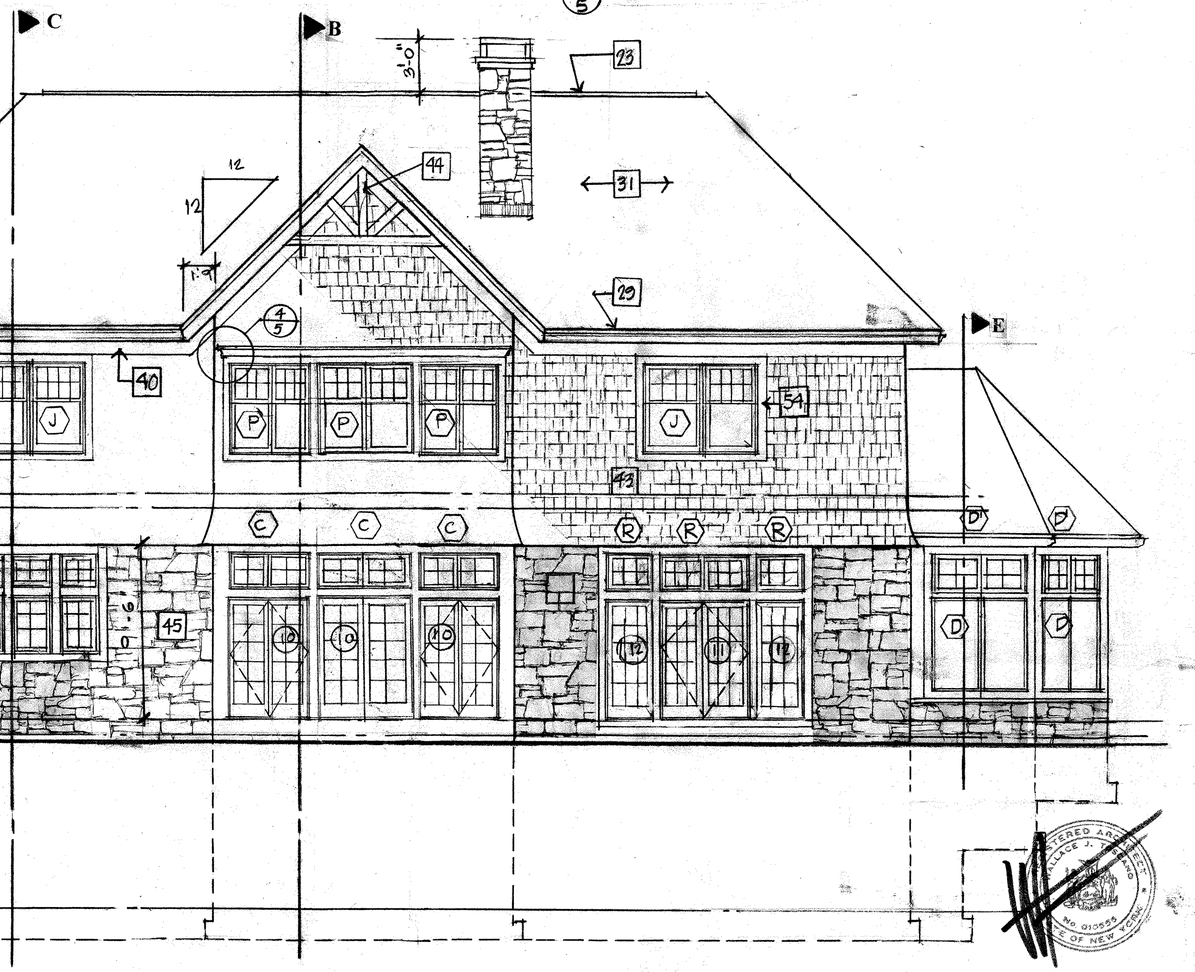




3/5 **PORCH COLUMN 1¼"**



4/5 **HEAD @ WINDOWS**



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REAR SIDE 1/4

MARCH 23 2020

5

GENERAL NOTES:

THE ARCHITECT SHALL INSTRUCT THE OWNER THAT PRIOR TO AWARD OF THE CONTRACT AND DURING SITE VISIT, HE IS NOT TO GIVE ANY INSTRUCTIONS, ATTEMPT TO CLARIFY THE PROJECT, CHANGE ANY PART OF THE PROJECT, OR IN ANY WAY MAKE ANY INTERPRETATION OF THE PROJECT.

THE CONTRACTOR IS HELD RESPONSIBLE FOR ENSURING THAT ANY QUESTIONS THAT ARISE BY HIM OR ANY SUBCONTRACTORS SHALL BE DIRECTED TO THE ARCHITECT AND NO ONE ELSE.

WHEN QUESTIONS ARISE, HE IS TO ADVISE THE CONTRACTOR OR HIS SUBCONTRACTOR TO DIRECT THEIR QUESTIONS TO THE ARCHITECT.

TABLE R301.2(1)
CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND DESIGN				SEISMIC DESIGN CATEGORY[f]	SUBJECT TO DAMAGE FROM			WINTER DESIGN TEMP[e]	ICE BARRIER UNDERLAYMENT REQUIRED[h]	FLOOD HAZARDS[g]	AIR FREEZING INDEX	MEAN ANNUAL TEMP
	Speed[d] (mph)	Topographic effects[k]	Special wind region[l]	Wind-borne debris zone[m]		Weathering[a]	Frost line depth[b]	Termite[c]					
30	115	YES	YES	YES	B	SEVERE	42	MOD/SEV	5	YES	5/5/12	1500	48

For SI: 1 pound per square foot = 0.0479 kPa, 1 mile per hour = 0.447 m/s.

a. Weathering may require a higher strength concrete or *grade* of masonry than necessary to satisfy the structural requirements of this code. The weathering column shall be filled in with the weathering index, "negligible," "moderate" or "severe" for concrete as determined from Figure R301.2(3). The *grade* of masonry units shall be determined from ASTM C 34, C 55, C 62, C 73, C 90, C 129, C 145, C 216 or C 652.

b. The frost line depth may require deeper footings than indicated in Figure R403.1(1). The *jurisdiction* shall fill in the frost line depth column with the minimum depth of footing below finish *grade*.

c. The *jurisdiction* shall fill in this part of the table to indicate the need for protection depending on whether there has been a history of local subterranean termite damage.

d. The *jurisdiction* shall fill in this part of the table with the wind speed from the basic wind speed map (Figure R301.2(4)A). Wind exposure category shall be determined on a site-specific basis in accordance with Sect..in R301.2.1.4.

e. The outdoor design dry-bulb temperature shall be selected from the columns of 97½-percent values for winter from Appendix D of the *International Plumbing Code*. Deviations from the Appendix D temperatures shall be permitted to reflect local climates or local weather experience as determined by the *building official*.

f. The *jurisdiction* shall fill in this part of the table with the seismic design category determined from Section R301.2.2.1.

g. The *jurisdiction* shall fill in this part of the table with (a) the date of the *jurisdiction's* entry into the National Flood Insurance Program (date of adoption of the first code or ordinance for management of flood hazard areas), (b) the date(s) of the Flood Insurance Study and (c) the panel numbers and dates of the currently effective FIRM's and FBFM's or other flood hazard map adopted by the authority having *jurisdiction*, as amended.

h. In accordance with Sections R905.1.2, R905.4.3.1, R905.5.3.1, R905.6.3.1, R905.7.3.1 and R905.8.3.1, where there has been a history of local damage from the effects of ice damming, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall fill in this part of the table with "NO."

i. The *jurisdiction* shall fill in this part of the table with the 100-year return period air freezing index (BF-days) from Figure R403.3(2) or from the 100-year (99 percent) value on the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

j. The *jurisdiction* shall fill in this part of the table with the mean annual temperature from the National Climatic Data Center data table "Air Freezing Index-USA Method (Base 32°F)."

k. In accordance with Section R301.2.1.5, where there is local historical data documenting structural damage to buildings due to topographic wind speed-up effects, the *jurisdiction* shall fill in this part of the table with "YES." Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

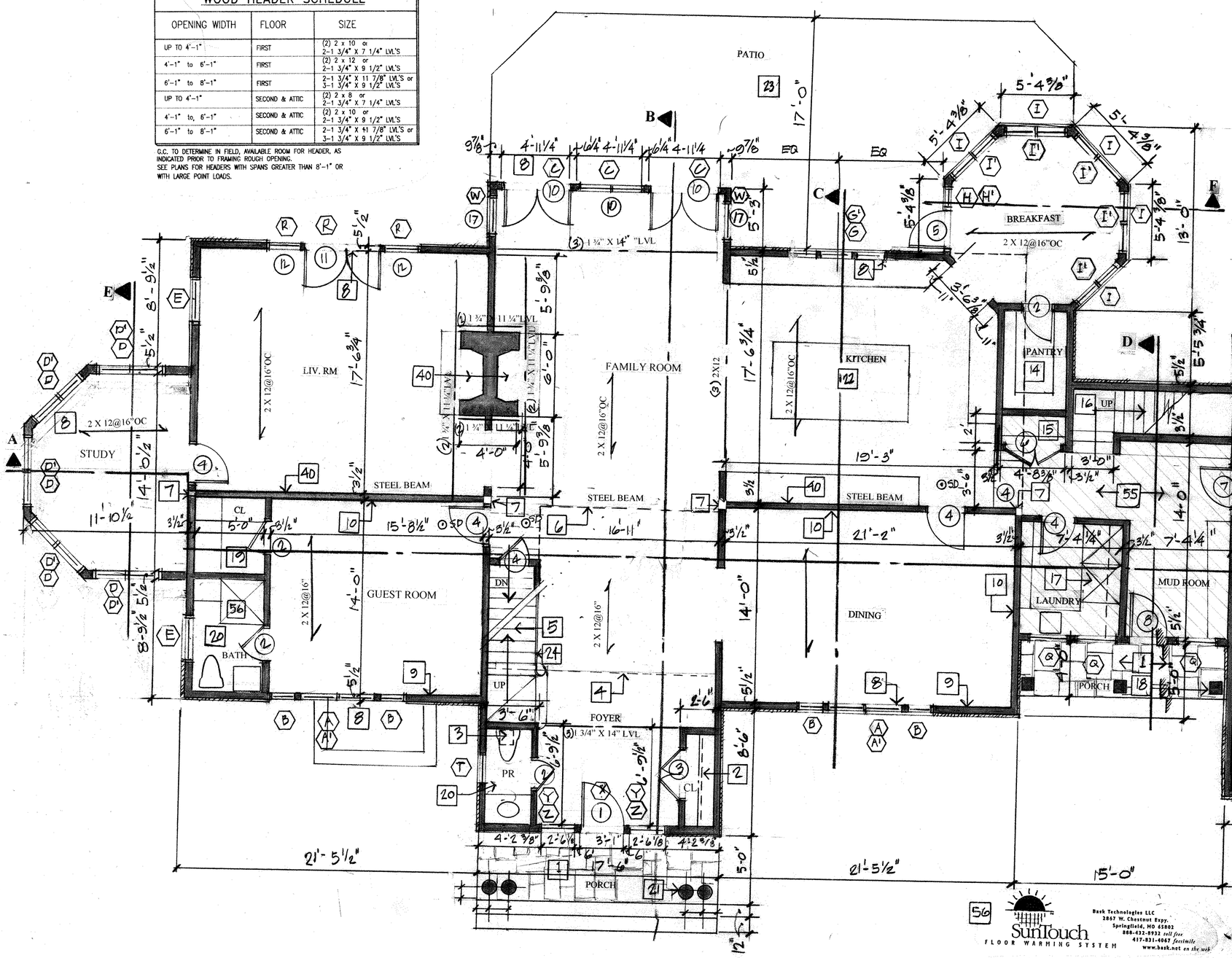
l. In accordance with Figure R301.2(4)A, where there is local historical data documenting unusual wind conditions, the *jurisdiction* shall fill in this part of the table with "YES" and identify any specific requirements. Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

m. In accordance with Section R301.2.1.2.1, the *jurisdiction* shall indicate the wind-borne debris wind zone(s). Otherwise, the *jurisdiction* shall indicate "NO" in this part of the table.

WOOD HEADER SCHEDULE

OPENING WIDTH	FLOOR	SIZE
UP TO 4'-1"	FIRST	(2) 2 x 10 or 2-1 3/4" X 7 1/4" LVL'S
4'-1" to 6'-1"	FIRST	(2) 2 x 12 or 2-1 3/4" X 9 1/2" LVL'S
6'-1" to 8'-1"	FIRST	2-1 3/4" X 11 7/8" LVL'S or 3-1 3/4" X 9 1/2" LVL'S
UP TO 4'-1"	SECOND & ATTIC	(2) 2 x 8 or 2-1 3/4" X 7 1/4" LVL'S
4'-1" to, 6'-1"	SECOND & ATTIC	(2) 2 x 10 or 2-1 3/4" X 9 1/2" LVL'S
6'-1" to 8'-1"	SECOND & ATTIC	2-1 3/4" X 91 7/8" LVL'S or 3-1 3/4" X 9 1/2" LVL'S

G.C. TO DETERMINE IN FIELD, AVAILABLE ROOM FOR HEADER, AS INDICATED PRIOR TO FRAMING ROUGH OPENING.
SEE PLANS FOR HEADERS WITH SPANS GREATER THAN 8'-1" OR WITH LARGE POINT LOADS.



1 BLUESTONE ON CONC SLAB RANDOM PATTERN GROUT TO MATCH
2 SHELF AND CLOTH POLE
3 EXHAUST FAN PANOSONIC FV08VQ2
4 LINE OF CEILING ABOVE
5 STAIRS UP 18R@ 7 ¾' 17 T @ 10 ½" PER NYS-IBC SECTION311
6 EDGE OF BALCONY ABOVE
7 6 X 6 POST
8 SEE WOOD HEADER SCHEDULE SHEET 1
9 EXTERIOR WALL ON FIRST FLOOR 2 X6 16 " OC R36 , ½ DW SHEATHING , 4" STONE VENEER STYLE TO BE SELECTED BY ARCHITECT
10 ALL INTERIOR WALLS TO BE 2 X4 16" OC ½" DRY WALL BOTH USE WATER PROOF DW ON ALL BATHROOM AND POWDER ROOM WALL- SOUND INSULATE
11 GARAGE WALL -2x 6 16" OC 5/8" FIRE PROOF DW BOTH SIDE R36 INSULATION
12 (3) 2X 12 BEAMS
13 6" STEEL COL SEE DETAIL 3/3
14 PANTRY SHELF BY OWNER
15 SHELVING BY OWNER
16 WOOD STAIRS 16R @7 ½" 15 T @ 10"
17 WASHER DRYER INSTALL "FLOOD SAVER"
18 6 X6 WOOD COLUMNS PT CLAD IN TRIM DETAIL 3/5
19 CLOTH POLE AND SHELF
20 ALL BATHROOMS FIXTURES, FLOOR AND WALL FINISHES SBO-IBC
21 12" DORIC COLUMNS
22 KITCHEN DEAISN BY OWNER -ALLCABINETS FURNISHED AND INSTALLED BY OWNER
23 COR VENT
24 HAND RAIL SBO-IBC PER NYS-IBC SECTION R311
25 OPEN TO BELOW
26 CHIMENY FLUE SHALL COMPLY WITH NYS IBC SECTIONS R1003 THRU R1004 , R1005., R1006
27 ALL CABINETWORK AND SHELVING SBO-IBC
28 STEPS DOWN 7 ½"R @ R 11T
29 1x8 FASICA –SEE DETAIL
30 FLOOR MATERIAL SBO-IBC
31 "OWENS CORNING" LAM. ARCH. ROOF SHINGLES BROWNWOOD
33 CATHEDRAL CEILING
34 TRAY CEILING
35 16"CONC BLOCK FOUND.WALL ON 12X 36 FOOTING W/(4) ST. REBARS BOTHWAYS CARRIED BELOW FROST LINE
36 6 "STEEL COL.ON 1-3 X 3-0 CONC FOOTING SEEDET.3/3 ON SHT 3
37 6" CONC.SLAB WITH 4 X 4 WWF ON 6" COMPACTED FILL SLOP FLOOR TO FRONT
38 12 X12 CONC FOOTING ON 36 X 36 CONC FOUNDATION W/(4) #5 ST. BARS BOTH WAYS– SEE DET.2/3 SHT3
39 CRAWL SPACE PER NYS IBC
40 LOAD BEARINGWALL
41 FIRE PLACE FINISHES SBO-IBC
42 STUCT. BEAM
43 2 X6 -16"OC ,R36 INSULATION – EXT SEATHING -1/2' DRY WALL SECOND FLOOR SIDING TO BE - CEDAR SHAKES BY"CEDAR VALLEY"
44 4 X4 CEDAR DECORATIVE BEAMS PAINTED
45 4' STONE VENEER –STYLE TO BE SELECTED BYARCHITECT
46 CRICKRET/COOPER FLASHING
47 TIE BEAM/TRAYCEILING 2 X10-16"OC-R42 INSUL.
48 2 X12 -16"OC RADIANT HEATING BT " THERMSOFT" R 42 INSULATION
49 2 X12-16'OC- ¾" PLYWOOID SUB FLOORING FINISHED FLOORING MATERIAL SBO-IBC
50 STONE CLAD CHIMENY 36 X 36 3 '-0" ABOVE LINE PER CODE
51 2 LAYERS OF RIDGID " ICE AND WEATERSHIELD
52 WAINSCOTTING 1 X4
53 WALL FINISH MATCH FINISH AND DESIGN OF DOOR 8 -PAINT
54 JOIST HANGER THROUGHTOUT
55 ALL FLOORS IN ALL BATHROOMS, POWDER ROOM, MUD ROOM ,LAUNDRY TO TILE SBO-IBC
56 ALL BATHROOM FLOORS TO "SUN TOUCH FLOOR WARMING" VENT BLOCK AS PER NYCIBC SECTION R408. 1 AND R408.3

ALL DEMENSION ARE FACE OF STUDS TO STUD FACE

SunTouch FLOOR WARMING SYSTEM
Bask Technologies LLC
2867 W. Chestnut Expy.
Springfield, MO 65802
888-432-8932 *toll free*
417-831-4067 *fax/tmlk*
www.bask.net *on the web*

SMOKE DETECTOR AND CARBON MONOXIDE DETECTORS ARE TO BE INSTALLEDAND MUST COMPLY THROUGHOUT BUILDING WITH SECTION R 313 OF THE NYSBC

A RESIDENCE FOR
MR. AND MRS J CHRYSSICAS
9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491 CELL
914 238-1048
ARCHWJT36@GMAIL.COM

FIRST FLOOR 1

MARCH 23 2020

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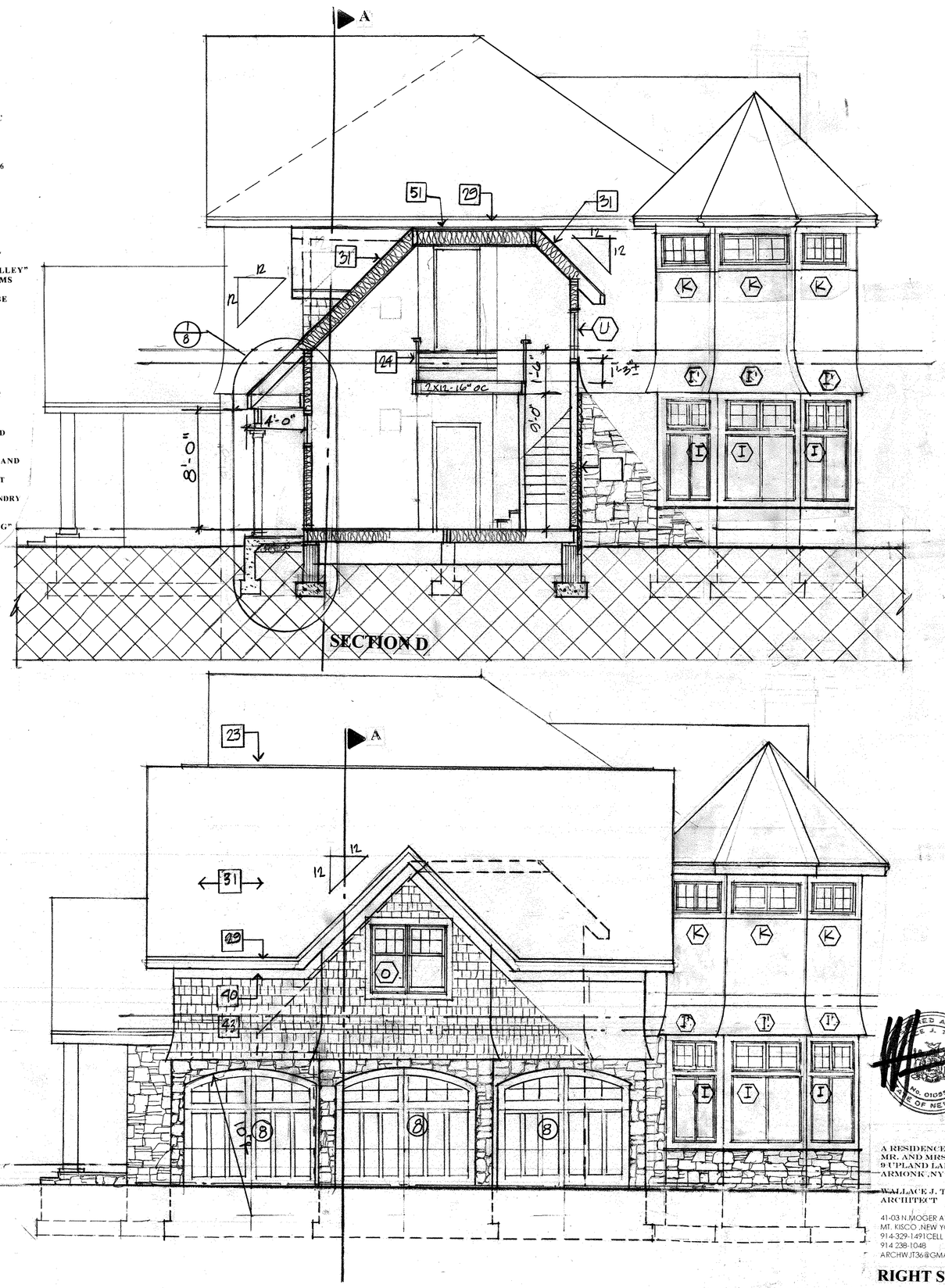
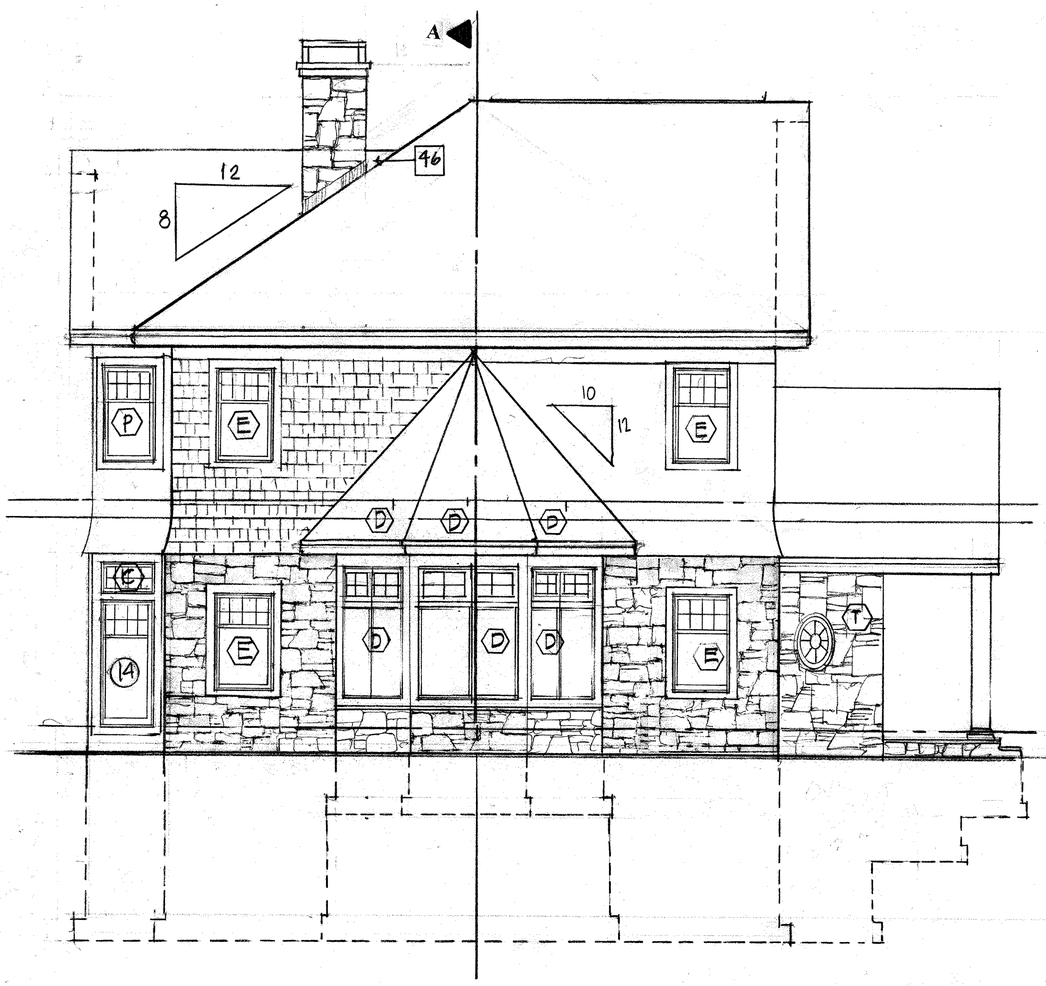


SECTION D



A RESIDENCE FOR
MR. AND MRS J. CHRYSSICAS
9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT
41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

RIGHT SIDE 1/4
LEFT SIDE 1/4

MARCH 23 2020

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41 N. MOGER AVE.
MT . KISCO , NEW YORK ,10549
914 329 1491 CELL
914 238 1048

May 27,2020

RE: 9 Upland Lane
Armonk

Mr Adam Kaufdman ,AICP
Director of Planning
Town of North Castle ,NY

Dear Adam
First off ,thank you very much for help with this project.

Enclosed are the Application form, and drawings required for a Special Use Permit for this project .

The project consists of the construction of a new residence on a parcel of land on Upland Lane. There is an existing 2 story residence which the client would like to demolish parts of the first floor and all of the second floor so as to have 1350 sf remain and be remodeled into a one room family games. There will be no bedrooms and only Pulman kitchen and bathroom.

As part of our submission we have included the LOT COVERAGE calculations and the FAR calculations ,both of which comply with town codes. Beyond that the project ,I believe ,is "as of right"and requires no additional variances

I look forward to our June 8th online presentation to the planning board .It will be a new experience of me as we entire into the world of new realities.

Thank you once again

Wallace J Toscano AIA

TOWN OF NORTH CASTLE
WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING DEPARTMENT
Adam R. Kaufman, AICP
Director of Planning

Telephone: (914) 273-3542
Fax: (914) 273-3554
www.northcastleny.com

Application for Special Use Permit Approval

Application Name

CHRYSSICAS RESIDENCE

TOWN OF NORTH CASTLE
WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING DEPARTMENT
Adam R. Kaufman, AICP
Director of Planning

Telephone: (914) 273-3542
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PLANNING BOARD SCHEDULE OF ESCROW ACCOUNT DEPOSITS

Type of Application Deposit*	Amount of Initial Escrow Account
Concept Study	$500.00
Site Plan Waiver for Change of Use	$500.00
Site Development Plan for:	
Multifamily Developments	$3,000.00 plus $100.00 per proposed dwelling unit
Commercial Developments	$3,000.00 plus $50.00 for each required parking space
1 or 2 Family Projects	$2,000.00
Special Use Permit	$2,000.00 plus $50.00 for each required parking space
Subdivision:	
Lot Line Change resulting in no new lots	$1,500.00
All Others	$3,000.00 plus $200.00 per proposed new lot in excess of two (2)
Preparation or Review of Environmental Impact Statement	$15,000.00

* If a proposed action involves multiple approvals, a single escrow account will be established. The total amount of the initial deposit shall be the sum of the individual amounts indicated. When the balance in such escrow account is reduced to one-third (1/3) of its initial amount, the applicant shall deposit additional funds into such account to restore its balance to the amount of the initial deposit.

Wallace — 5.27.20

Applicant Signature — Date:

Short Environmental Assessment Form
Part 1 - Project Information

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:
CHRTSSICAS RESPENCE

Project Location (describe, and attach a location map):
9 UPLAND LANE

Brief Description of Proposed Action:
NEW 2 STORT RESPENCE

Name of Applicant or Sponsor:	Telephone: 914 3291491
VILLAGE J. TOSCANO AIA	E-Mail: ARCHWJT36@GMDK.COM

Address:
41-03 MOGER AVE, #A

City/PO:	State:	Zip Code:
MT. KISCO	NY	10549

	NO	YES
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.	☒	☐
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:	☒	☐

3.a. Total acreage of the site of the proposed action? 2.316 acres
b. Total acreage to be physically disturbed? .278 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.
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☒ Residential (suburban)
☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other (specify): _____
☐ 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?	☐	☐	☐
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?	NO	YES	
	☒	☐	
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?	☒	☐	
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?	NO	YES	
If No, describe method for providing potable water: _____	☒	☐	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____	☒	☐	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	☒	☐	
b. Is the proposed action located in an archeological sensitive area?	☒	☐	
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?	NO	YES	
	☒	☐	
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: _____	☒	☐	
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: ☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional ☐ Wetland ☐ Urban ☒ 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,	NO	YES	
a. Will storm water discharges flow to adjacent properties? ☒ NO ☐ YES	☒	☐	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: ☐ NO ☒ YES			

	NO	YES
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: _____	☒	☐
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: _____	☒	☐
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: _____	☒	☐

I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Applicant/sponsor name: WALLACE J. TOSCANO Date: 5.29.20

Signature: _____

PRINT FORM

I. IDENTIFICATION OF PROPERTY OWNER, APPLICANT AND PROFESSIONAL REPRESENTATIVES

Name of Property Owner: MR&MRS J. CHRTSSICAS

Mailing Address: 18 MAPLE WAT

Telephone: 914 273 4322 Fax: _____ e-mail JCHRTSSICAS@GMAIL.COM

Name of Applicant (if different): W. TOSCANO

Address of Applicant: 41 N. MOGER AVE, MT. KISCO NY

Telephone: 914 329-1491 Fax: _____ e-mail ARCHWST36@GMAIL.COM

Interest of Applicant, if other than Property Owner: ARCHITECT

Is the Applicant (if different from the property owner) a Contract Vendee?

Yes ☐ No ☑

If yes, please submit affidavit sating such. If no, application cannot be reviewed by Planning Board

Name of Professional Preparing Site Plan: _____

Address: W. TOSCANO

Telephone: 914. 329. 1491 Fax: _____ e-mail ARCHWST36@GMAIL.COM

Name of Other Professional: —

Address: _____

Telephone: _____ Fax: _____ e-mail _____

Name of Attorney (if any): /

Address: _____

Telephone: _____ Fax: _____ e-mail _____

Applicant Acknowledgement

By making this application, the undersigned Applicant agrees to permit Town officials and their designated representatives to conduct on-site inspections in connection with the review of this application.

The Applicant also agrees to pay all expenses of publication and the giving of public notice as required, and further acknowledges that he/she shall be responsible for reimbursing the Town for the cost of professional review services required for this application.

It is further acknowledged by the Applicant that all bills for the expenses of publication and the giving of public notice as well as professional consultant review services shall be mailed to the Applicant, unless the Town is notified in writing by the Applicant at the time of initial submission of the application that such mailings should be sent to a designated representative instead.

Signature of Applicant: _____ Date: 5.28.20

Signature of Property Owner: _____ Date: 5.28.20

MUST HAVE BOTH SIGNATURES

II. IDENTIFICATION OF SUBJECT PROPERTY

Street Address: 9 UPLAND LANE

Location (in relation to nearest intersecting street):

200 feet (north, south, east or west) of MAPLE ROAD

Abutting Street(s): _____

Tax Map Designation (NEW): Section 101.4 Block 2 Lot 4

Tax Map Designation (OLD): Section _____ Block _____ Lot _____

Zoning District: R2 Total Land Area 100,884

Land Area in North Castle Only (if different) -

Fire District(s) - School District(s) -

Is any portion of subject property abutting or located within five hundred (500) feet of the following:

The boundary of any city, town or village?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____
If yes, please identify name(s): _____

The boundary of any existing or proposed County or State park or any other recreation area?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The right-of-way of any existing or proposed County or State parkway, thruway, expressway, road or highway?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The existing or proposed right-of-way of any stream or drainage channel owned by the County or for which the County has established channel lines?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The existing or proposed boundary of any county or State owned land on which a public building or institution is situated?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

The boundary of a farm operation located in an agricultural district?
No ✓ Yes (adjacent) _____ Yes (within 500 feet) _____

Does the Property Owner or Applicant have an interest in any abutting property?
No ✓ Yes _____

If yes, please identify the tax map designation of that property:

_____

III. DESCRIPTION OF PROPOSED DEVELOPMENT

Type of Special Use Permit:

Accessory Apartment _____

Accessory Structure over 800 square feet ✓

Gross Floor Area: Existing _____S.F. Proposed _____S.F.

Number of Parking Spaces: Existing _____ Proposed _____

Earthwork Balance: Cut _____ C.Y. Fill _____ C.Y. _____

Will Development on the subject property involve any of the following:

Areas of special flood hazard? No ✓ Yes _____
(If yes, application for a Development Permit pursuant to Chapter 177 of the North Castle Town Code may also be required)

Trees with a diameter at breast height (DBH) of 8" or greater?
No ✓ Yes _____
(If yes, application for a Tree Removal Permit pursuant to Chapter 308 of the North Castle Town Code may also be required.)

Town-regulated wetlands? No ✓ Yes _____
(If yes, application for a Town Wetlands Permit pursuant to Chapter 340 of the North Castle Town Code may also be required.)

State-regulated wetlands? No ✓ Yes _____
(If yes, application for a State Wetlands Permit may also be required.)

V. INFORMATION TO BE INCLUDED ON SPECIAL USE PERMIT SITE PLAN

The following checklist is provided to enable the Applicant to determine if he/she has provided enough information on the special use permit plan for the Planning Board to review his/her proposal. Applicants are advised to review Chapter 355 Article VII of the North Castle Town Code for a complete enumeration of pertinent requirements and standards prior to making application for special use permit approval.

The application for special use permit approval will not be accepted for Planning Board review unless all items identified below are supplied and **so indicated with a check mark in the blank line provided.** If a particular item is not relevant to the subject property or the development proposal, **the letters "NA" should be entered instead**.

The information to be included on a site development plan shall include:

Legal Data:

_✓_ Name of the application or other identifying title.

_✓_ Name and address of the Property Owner and the Applicant, (if different).

_✓_ Name, address and telephone number of the architect, engineer or other legally qualified professional who prepared the plan.

_____ Names and locations of all owners of record of properties abutting and directly across any and all adjoining streets from the subject property, including the tax map designation of the subject property and abutting and adjoining properties, as shown on the latest tax records.

_✓_ Existing zoning, fire, school, special district and municipal boundaries.

_✓_ Size of the property to be developed, as well as property boundaries showing dimensions and bearings as determined by a current survey; dimensions of yards along all property lines; name and width of existing streets; and lines of existing lots, reservations, easements and areas dedicated to public use.

_____ Reference to the location and conditions of any covenants, easements or deed restrictions that cover all or any part of the property, as well as identification of the document where such covenants, easements or deed restrictions are legally established.

_✓_ Schedule of minimum zoning requirements, as well as the plan's proposed compliance with those requirements, including lot area, frontage, lot width, lot depth, lot coverage, yards, off-street parking, off-street loading and other pertinent requirements.

_✓_ Locator map, at a convenient scale, showing the Applicant's entire property in relation to surrounding properties, streets, etc., within five hundred (500) feet of the site.

_✓_ North arrow, written and graphic scales, and the date of the original plan and all revisions, with notation identifying the revisions.

_____ A signature block for Planning Board endorsement of approval.

Existing Conditions Data:

✓ Location use and design of existing buildings, identifying first floor elevation, and other structures.

_____ Location of existing facilities for water supply, sanitary sewage disposal, storm water drainage, and gas and electric service, with pipe sizes, grades, rim and inverts, direction of flow, etc. indicated.

✓ Location of all other existing site improvements, including pavement, walks, curbing, retaining walls and fences.

_____ Location, type, direction, power and time of use of existing outdoor lighting.

_____ Existing topographical contours with a vertical interval of two (2) feet or less.

_____ Location of existing floodplains, wetlands, slopes of 15% or greater, wooded areas, landscaped areas, single trees with a DBH of 8" or greater, rock outcrops, stone walls and any other significant existing natural or cultural features.

Proposed Development Data:

_____ Proposed location of lots, streets, and public areas, and property to be affected by proposed easements, deed restrictions and covenants.

✓ Proposed location, use and architectural design of all buildings, including proposed floor plans and elevations.

✓ Proposed means of vehicular and pedestrian access to and egress from the site onto adjacent streets.

_____ Proposed sight distance at all points of vehicular access.

_____ Proposed streets, with profiles indicating grading and cross-sections showing the width of the roadway; the location and width of sidewalks; and the location and size of utility lines.

_____ Proposed location and design of any pedestrian circulation on the site and off-street parking and loading areas, including handicapped parking and ramps, and including details of construction, surface materials, pavement markings and directional signage.

_____ Proposed location and design of facilities for water supply, sanitary sewage disposal, storm water drainage, and gas and electric service, with pipe sizes, grades, rim and inverts, direction of flow, etc. indicated.

_____ Proposed location of all structures and other uses of land, such as walks, retaining walls, fences, designated open space and/or recreation areas and including details of design and construction.

_____ Location, type, direction, power and time of use of proposed outdoor lighting.

_____ Location of proposed landscaping and buffer screening areas, including the type (scientific and common names), size and amount of plantings.

_____ The proposed location, size, design and use of all temporary structures and storage areas to be used during the course of construction.

_____ Proposed grade elevations, clearly indicating how such grades will meet existing grades of adjacent properties or the street.

_____ Proposed soil erosion and sedimentation control measures.

_____ For all proposed plans containing land within an area of special flood hazard, the data required to ensure compliance with Chapter 177 of the North Castle Town Code.

_____ For all proposed plans involving clearing or removal of trees with a DBH of 8" or greater, the data required to ensure compliance with Chapter 308 of the North Castle Town Code.

_____ For all proposed plans involving disturbance to Town-regulated wetlands, the data required to ensure compliance with Chapter 340 of the North Castle Town Code.

The special use permit application package shall also include a narrative document that demonstrates compliance with the following:

✓ The location and size of the use, the nature and intensity of the operations involved in it or conducted in connection with it, the size of the site in relation to it and the location of the site with respect to streets giving access to it are such that it will be in harmony with the appropriate and orderly development of the district in which it is located and that it complies with all special requirements for such use.

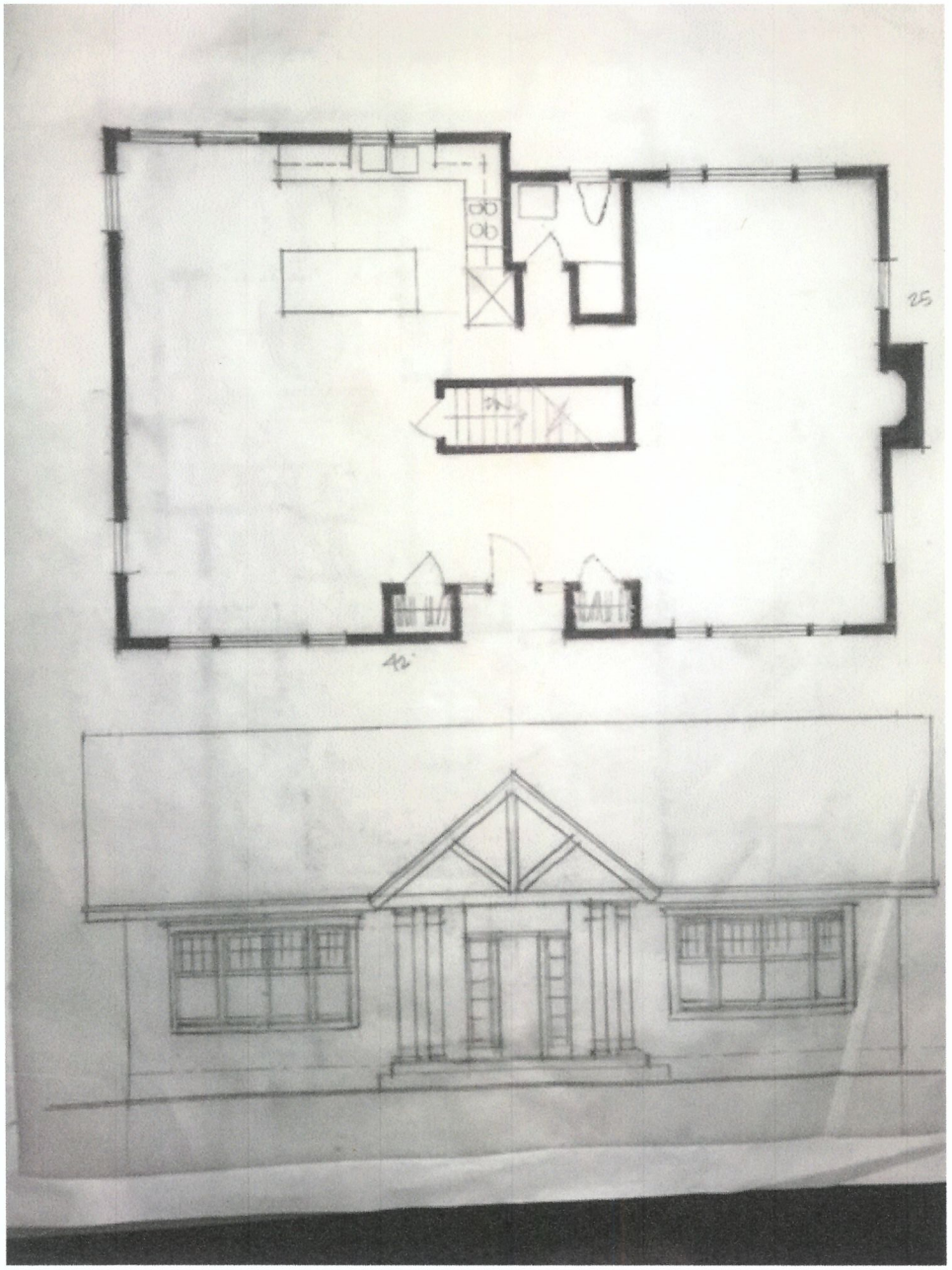
✓ The location, nature and height of buildings, walls, fences and the nature and extent of existing or proposed plantings on the site are such that the use will not hinder or discourage the appropriate development and use of adjacent land and buildings.

✓ Operations in connection with any special use will not be more objectionable to nearby properties by reason of noise, fumes, vibration or other characteristics than would be the operations of any permitted uses not requiring a special permit.

✓ Parking areas will be of adequate size for the particular use, properly located and suitably screened from adjoining residential uses, and the entrance and exit drives shall be laid out so as to achieve maximum convenience and safety.

✓ Where required, The provisions of the Town Flood Hazard Ordinance shall be met.

✓ The proposed special permit use will not have a significant adverse effect on the environment.



PROPOSED ALTERATION TO THE
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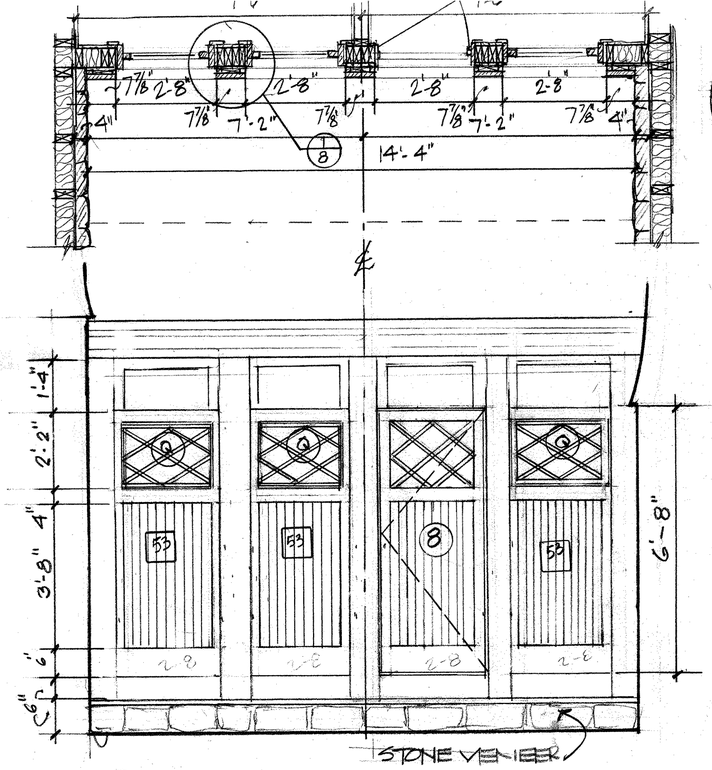

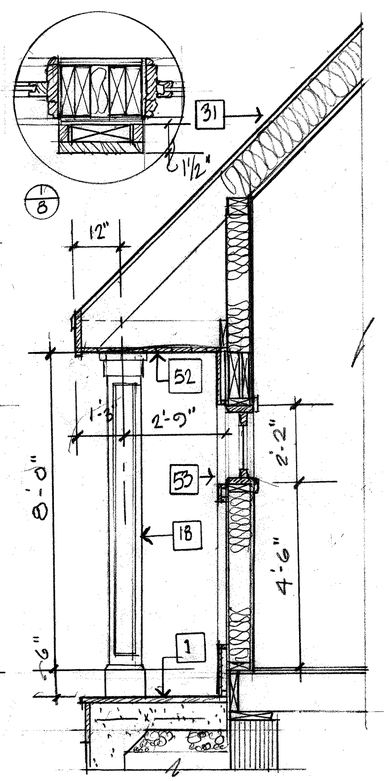

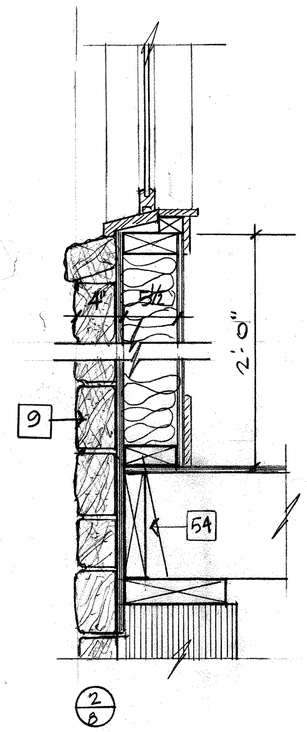

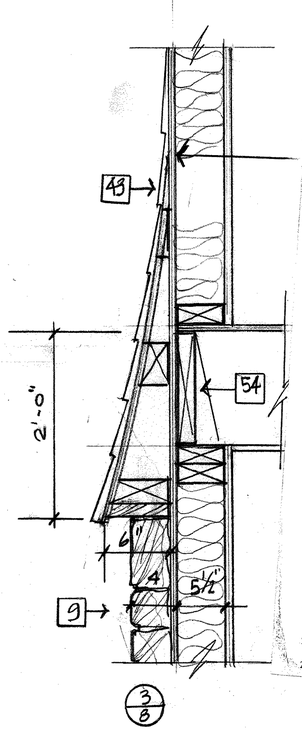

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7. 6 X 6 POST
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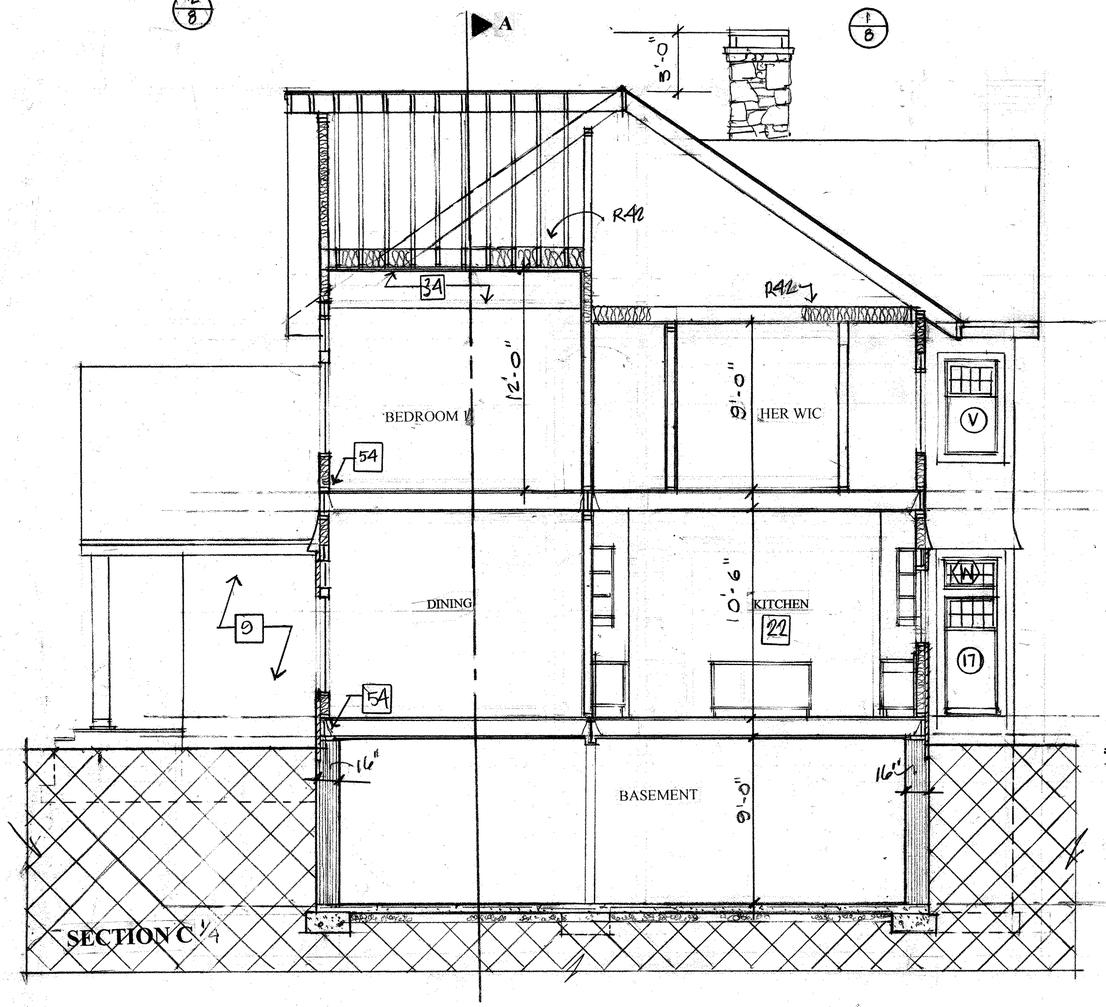

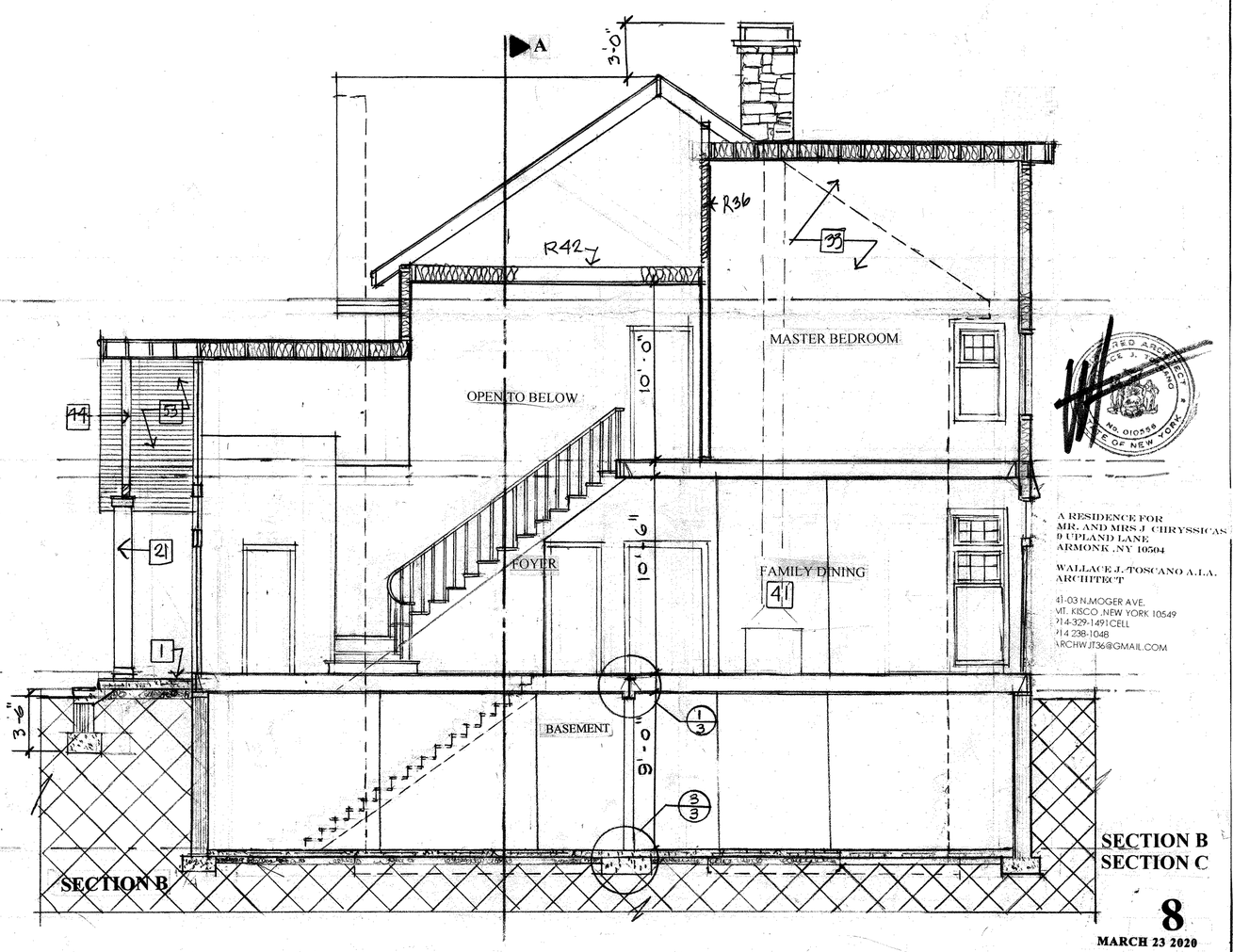

A RESIDENCE FOR
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9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491 CELL
914 238-1048
ARCHWJT36@GMAIL.COM

SECTION B
SECTION C

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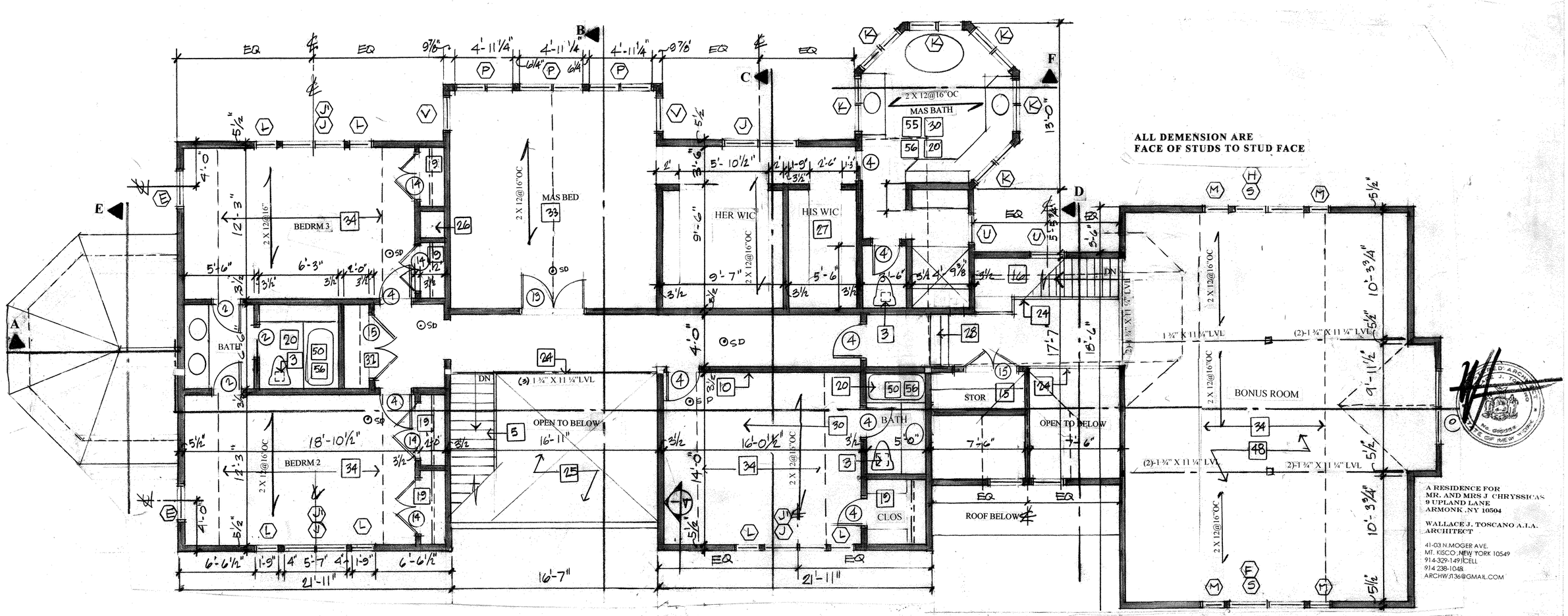

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SECOND FLOOR 2
MARCH 23 2020

CHRYSSICAS RESIDENCE
ZONING CHART

LOT 101.4 SECTIONB 2C LOT 4,Zoning district R2

	REQUIRED	*EXISTING HOUSE*	*PROPOSED*
LOT AREA	20,000 SF	100,884 SF	NO CHANGE
WIDTH MIM.	**150**	**'**	**72'**
MIM. SETBACK			
FRONT	**50'**		**72'**
REAR	**50'**		**192'**
SIDE	**30'**		**45'**
MAX. LOT GROSS LAND COVERAGE	**14,302SF**		**10.744**
COVERAGE MAX BUILD COVERAGE	**8%**		**4.6%**
MIM DWELLING UNIT SIZE	**1400 SF**		**6378 SF**
FLOOR AREA RATIO	**10677SF**		**9.860 SF**
MAX. BUILD. HGT.	**--- 30' (2 ½)**		**28'**

WINDOW SCHUDULE

NUMBER	*UNIT SIZE* W x H	*MODEL*	*MANUFACTURE*
A	2-11 x 4-8	TW21046	ANDERSON
AI	2-11'X 1-9	TWT210017	"
B	1-9 X 4-8	TW1846	"
C	2-5 X 1-9 MULL PAIR	TWT1821	"
D	5-0 X 4-8 MULL PAIR	CUSTOM PAIR	"
DI	5-0 X 1-9 MULLPAIR	CUSTOM PAIR	"
E	2-11 X 4-8	TWT21046	"
G	2-0 X 2-11	CW123	"
GI	2-1 X 2-0	TWT2017	"
F	1-9 X 3-1	TWT3017	"
H	1-9 X 4-8	TW1846	"
HI	1-9 X 1-9	TW1817	"
I	4-4 X 4-8 MUL PAIR	CUSTOM	"
II	4-4 X 1-9 MUL PAIR	CUSTOM	"
J	3-1 X 4-8 EGRESS	TW 3046	"
JI	3-1 X 1-9	TW3017	"
K	4-4 x 1-6 MUL PAIR	CUSTOM	"
L	2-1 x 4-8	TW2046	"
M	2-1 X 5-4	TW 2052	"
N	2-11 X 2-11	CXW13	"
O	2-5 X 4-8	TW2446	"
P	2-1 x 4 8	TW2046	"
Q	2-2 X 2-2	WTR 201111	"
R	1-9 X 2-5	TWT 2417	"
S	3-1 X 5-4	TW 3052	"
T	2-0 X 2-11	OVL2030	"
U	2-7 x 2-5	TWT2623	"
V	3-1 X 4-8 EGRESS	TW3046	"
W	2-11 X 1-9	TWT21017	"
X	2-5 X 2-5	TWT2423	"
Y	2-5 x 3-1	TWT3023	"
Z	2-6 1/8"X6-8 SIDE LIGHT	FWH2768AR	"

DOOR SCHUDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
1	*3-0 X 6-8*		
2	*2-4 X 7-0*	*F44*	
3	*4-0X 7-0 PAIR*	"	*SIMPSON*
4	*2-6 X 7-0*	"	"
5	*2-6 X 6-8*	"	"
6	*2-6 X 7-0 PAIR*	"	"
7	*3-0 X 7-0 FIRE DOOR"*	*510*	
8	*2-8X 6-8*	*F7228U*	*THERMA TRU*
9	*7-0 X 9-0 GARAGE*	*AS SHOWN*	*SIMPSON*
10	*4-0 X 6-8*	*FWH4168APLR*	*OVERHEAD DOORS*
11	*3-0 X 6-8*	*FWH5068APLR*	*ANDERSON*
12	*2-6 X6-8*	*FWH2768AR*	"
13	*5-0 X 6-8 PAIR*	*F44*	"
14	*4-0x 6-8 PAIR*	"	*SIMPSON*
15	5-0 X6-8 PAIR	"	"

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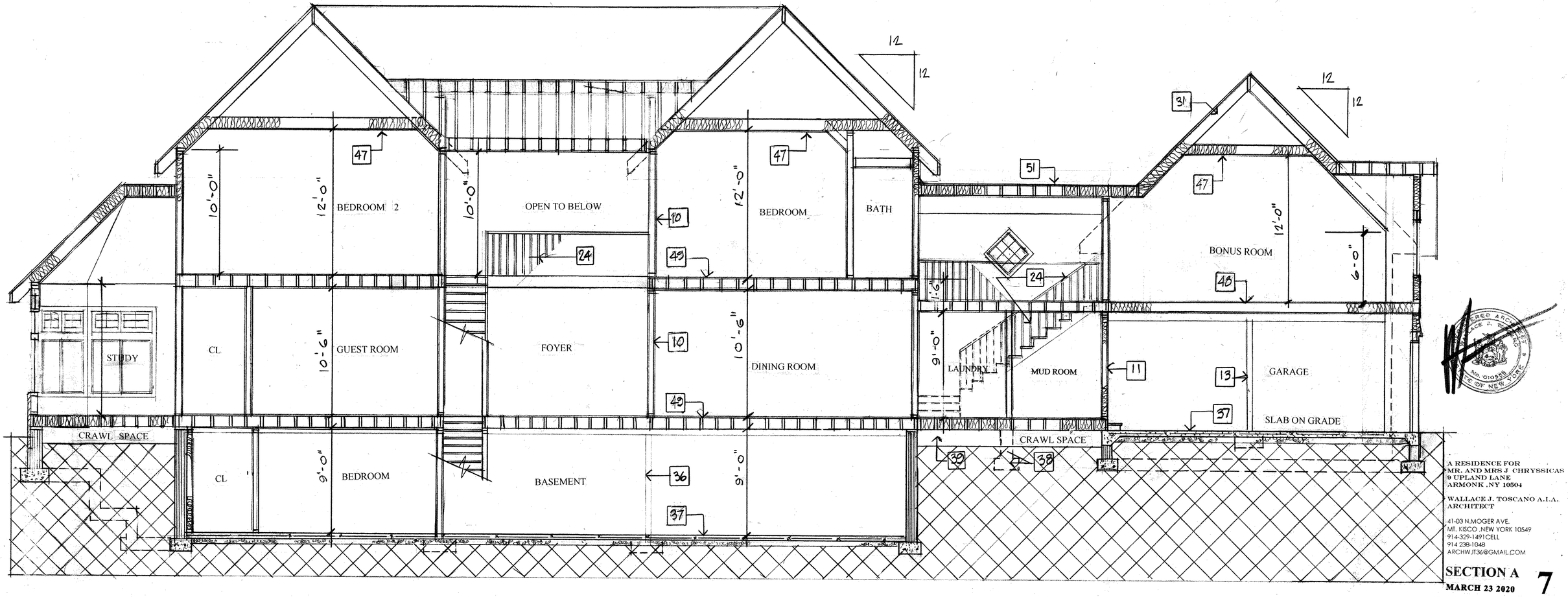

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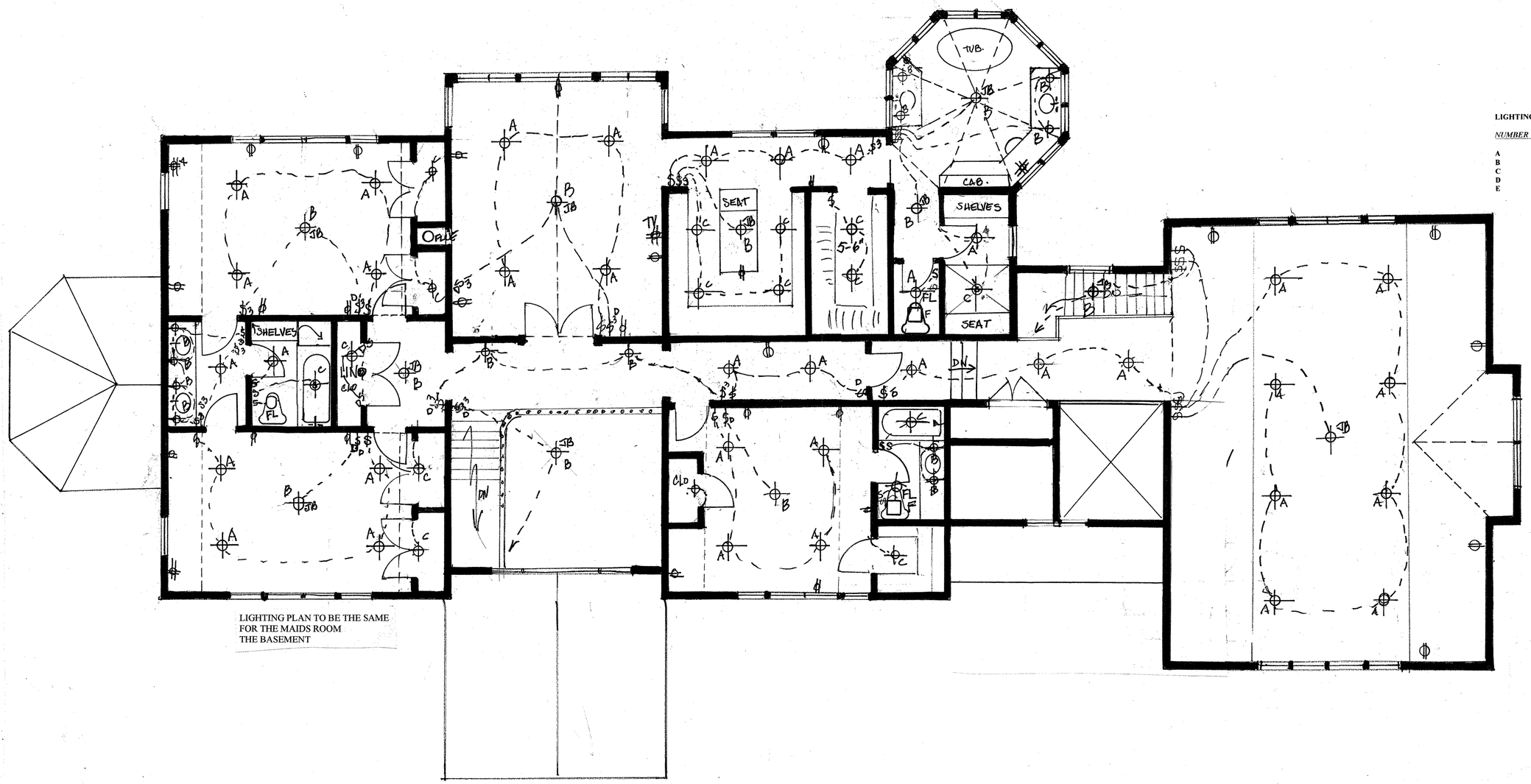
MR. AND MRS J CHRYSSICAS
9 UPLAND LANE
ARMONK ,NY 10504

WALLACE J. TOSCANO A.I.A.
ARCHITECT

41-03 N.MOGER AVE.
MT. KISCO ,NEW YORK 10549
914-329-1491CELL
914 238-1048
ARCHWJT36@GMAIL.COM

SECTION A
MARCH 23 2020



LIGHTING PLAN TO BE THE SAME
FOR THE MAIDS ROOM
THE BASEMENT

Electrical Symbols

Recessed Hi Hats	○
Wall Washer Hi Hat	◐
Sealed Fixture	Ⓢ
Junction Box for Surface Mounted Fixture	JB
Fan Light	FL
Fan	F
Sconce light	
Undercabinet lights	
Plug Mould	
Duplex outlet	
Quad outlet	
Floor Plug	FP
Appliance plug	Ⓐ
TV Connection for Cable	TV
Switch	S
3 way Switch	S3
Dimmer Switch	DS

LIGHTING SCHEDULE

NUMBER	*UNIT SIZE*	*MODEL*	*MANUFACTURE*
A	3 ¼	2005 –MR 16	LOIGHTOLIER
B	BY OWNER	SBO-IBC	"
C	6 ½"	1126 WHITE DIFF.	"
D	3 ½"	2022LV MR16	"
E	6	1076WH	"

BEVERLY ELLSLEY Design
4 Partrick Lane , Westport CT 06880
203 227 1157 phone ellsley@aol.com
www.beverlyellsley.com website

Second Floor Electrical
For Design Intent Only

SAM AND JASON CHRYSSICAS
ARMONK NY

MARCH 23 2020

196.42

CONC WALKWAY

1200

2000

DRIVE. CONC.

200

420

2 STORY RESIDENCE

3412

900

1350

200

600

450

CONC. DRIVE

420

100

1000

DRIVE

307.31

177.29

UPLAND LANE

SITE PLAN

EXISTING

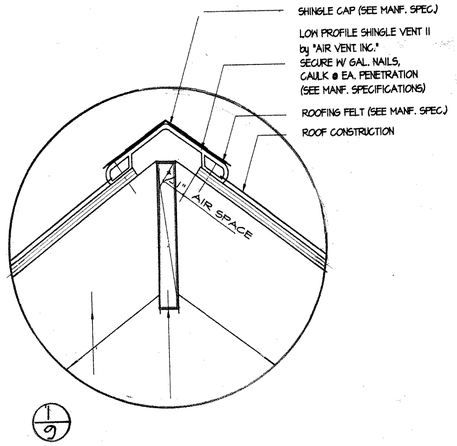
2000
600
200
420
100

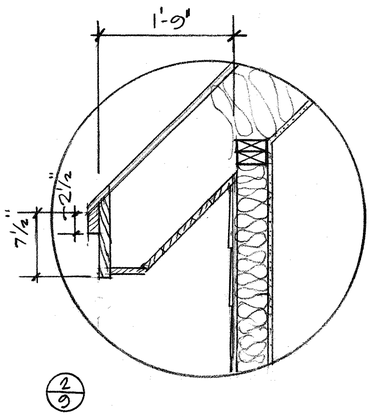
3320

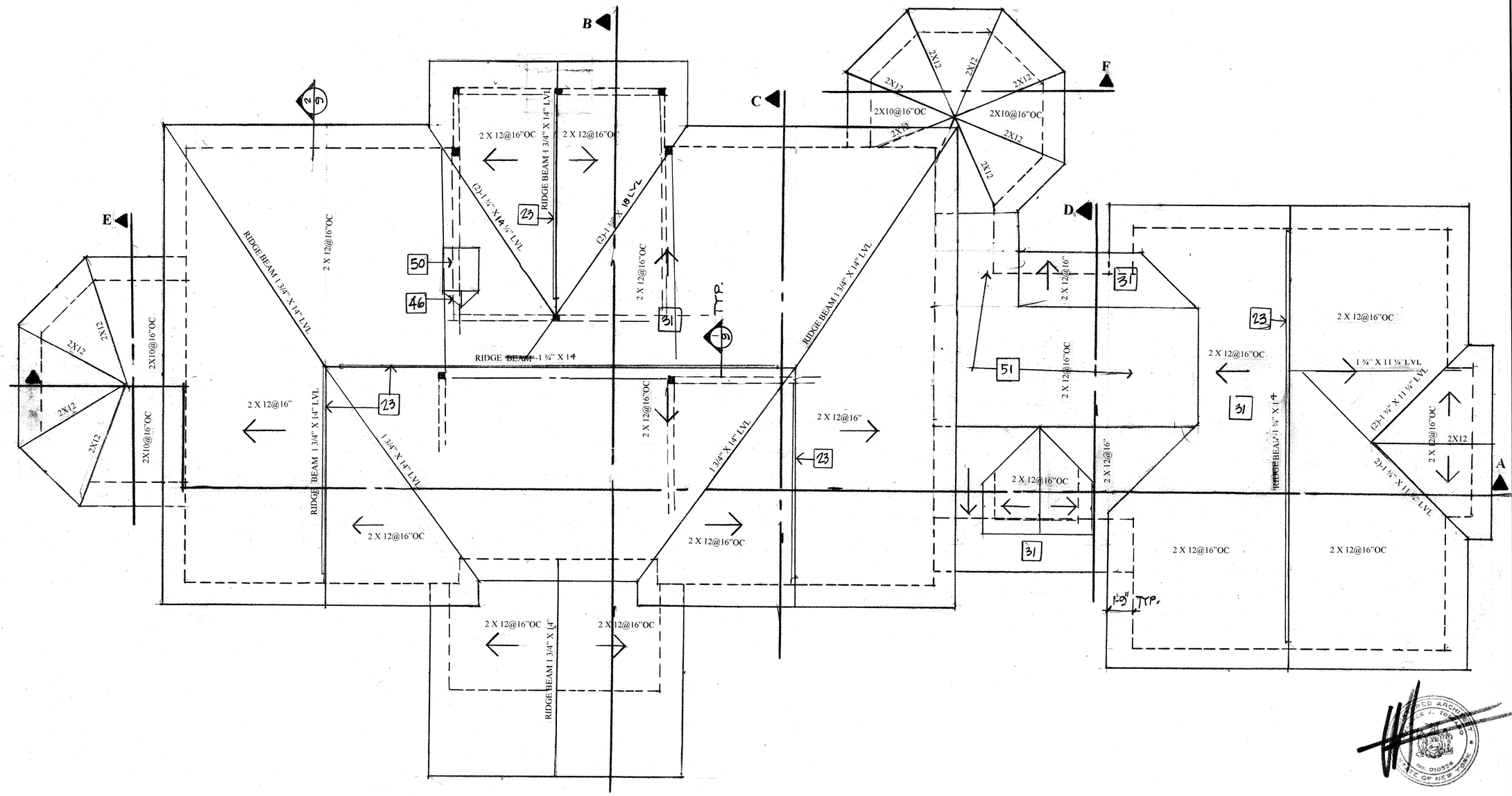
NEW

900
1000
450
600
120
480
50

3570






A
B
C
D
E
F
2 X 12@16"OC
(2)1 ¾" X 14" LVL
RIDGE BEAM 1 3/4" X 14" LVL
RIDGE BEAM 1 ¾" X 14" LVL
2X12
2X10@16"OC
2X10@16"OC
2 X 12@16"
2 X 12@16"OC
RIDGE BEAM -1 ¾" X 14
(2)1 ¾" X 18 LVL
(2)1 ¾" X 14" LVL
1 3/4" X 14" LVL
RIDGE BEAM 1 3/4" X 14" LVL
2 X 12@16"OC
2 X 12@16"OC
2 X 12@16"OC

Town of North Castle Building Department

17 Bedford Road

Armonk, New York 10504-1898

Telephone: (914) 273-3000 ext. 44 Fax: (914) 273-3554

www.northcastleny.com

Residential Building Permit Application

NOTE: TWO (2) SETS OF ALL REQUIRED DOCUMENTS MUST BE SUBMITTED WITH THIS APPLICATION

Section I- PROJECT ADDRESS: 9 UPLAND LANE DATE: 5.13.20

Section II- CONTACT INFORMATION: (Please print clearly. All information must be current)

APPLICANT: WALLACE J. TOSCANO A.I.A. ARCHITECT

ADDRESS: 41-03 MOGER AVE. MT. KISCO, NEW YORK, 10549

PHONE: 914-238-1048 MOBILE: ~~914-329-1491 CELL~~ EMAIL: ARCHWJT36@GMAIL.COM

PROPERTY OWNER: MR & MRS S FRASER

ADDRESS: 18 MAPLE WAT, ARMONK. NY 10504

PHONE: (914) 273-4322 MOBILE: - EMAIL: AUKSTER@MSN.COM

Section III- DESCRIPTION OF WORK: (Any work conducted outside of the house requires approval from the RPRC unless the proposed action is minor in nature and complies with 355-26 C (3) of the Town of North Castle code.)

NEW 2 STORY RESIDENCE

Section IV- USE AND OCCUPANCY:

EXISTING/ CURRENT USE:

PROPOSED RESIDENTIAL:

[ ] One Family Dwelling [ ] Two Family Dwelling [ ] Townhouse [ ] Detached Accessory Structure

Section V- PERMIT FEES: ($20 app fee for the first $15,000 and $30 app fee, over $15,001 and $12 per $1000, cost of construction.)

ESTIMATED COST OF CONSTRUCTION (Based on fair market value labor & material) $ 1,200,000

AFFIDAVIT OF CONSTRUCTION COST: This affidavit must be completed by the Design Professional if the estimated cost is $20,000 or more.

APPLICATION FOR BUILDING PERMIT
TOWN OF NORTH CASTLE BUILDING DEPARTMENT
17 BEDFORD ROAD ARMONK, NY 10504 PHONE # (914) 273-8625

PERMIT FEE: $ _____ ARB FEE: $ _____

C. O. FEE: $ _____ APPLICATION FEE: $ _____

TOTAL FEE: $ _____ TRACKING #: _____

PERMIT # _____ *Date Issued:* ____/ ____/ ____ APPLICATION DATE: ____/ ____/ ____

C. O. # _____ *Date Issued:* ____/ ____/ ____

PROPERTY LOCATION: _____

Section: 101.4 **Block:** 2 **Lot:** 4 Zoning District: R2

Setbacks *Shown*: Front: 78 Side: 43 Rear: 191

Setbacks *Required*: Front: 50 Side: 30 Rear: 50

CODE # 753 Dig Safely. New York www.digsafelynewyork.com
Call: 1-800-962-7962

Owner: MR&MRS. S. FRASER Address: 18 MAPLE WAY Phone: (914) 273-4322

Email: AUKSTER@MSN.COM

Architect: ~~WALLACE J. TOSCANO A.I.A. ARCHITECT 41-03 MOGER AVE. MT. KISCO, NEW YORK, 10549 914-238-1048 914-329-1491 CELL ARCHWJT36@GMAIL.COM~~ Address: _____ Phone: (____)____-_____

Email: _____

Builder: NA Address: _____ Phone: (____)____-_____

Email: _____

Plumber: NA Address: _____ Phone: (____)____-_____

Email: _____

Electrician: NA Address: _____ Phone: (____)____-_____

Email: _____

Lessee: — Address: _____ Phone: (____)____-_____

Email: _____

Do you have any intention of tearing down a house to build a new house within the next SIX (6) months?
☒ Yes ☐ No

Do you have any intention to expand a house over 1500 square feet within the next SIX (6) months?
☐ Yes ☒ No

If the Planning Board has granted you approval previously, on what dates were you approved? (List Below)

ESTIMATED CONSTRUCTION VALUE: $ 1,300,000

APPLICATION FOR:

X New Residence	____ Residential	____ Industrial	
____ New Commercial	____ Commercial	____ Other	
____ 1-Family	____ Addition/Alteration	____ Excavation	____ Pool
____ 2-Family	____ Accessory Building	____ Fence – (Lin. Ft. ____)	____ Roof
____ Multi-Family	____ Accessory Apartment	____ Finished Basement	____ Retaining Wall
____ Addition	____ Deck	____ Legalization	____ Shed
____ Alteration (Int./Ext.) Circle Choice	____ Demolition	____ Oil Tank (Remove/Install) Circle Choice	____ Tree

DESCRIPTION OF WORK, CONSTRUCTION TYPE, AND USE AS PER NYS CODE:

NEW RESIDENCE 2 STORIES, 3 CAR GARAGE

1200 SQ. FT. NEW BASEMENT/CELLAR

3428 SQ. FT. NEW FIRST (1ST) FLOOR

2950 SQ. FT. NEW SECOND (2ND) FLOOR

— SQ. FT. NEW THIRD (3RD) FLOOR

7578 TOTAL SQ. FT. OF ALL *NEW* CONSTRUCTION

5670 SQ. FT. OF LIVING SPACE AS PER NYS CODE

5 NUMBER OF ***BEDROOMS*** TO BE CONSTRUCTED, ADDED, RENOVATED OR ALTERED

4 NUMBER OF ***BATHROOMS*** TO BE CONSTRUCTED, ADDED, RENOVATED OR ALTERED

✓ ELECTRICAL WORK IS INVOLVED IN THIS PROJECT

✓ PLUMBING WORK IS INVOLVED IN THIS PROJECT

✓ HVAC WORK IS INVOLVED IN THIS PROJECT

YOU MUST SHOW ON THIS APPLICATION THE NUMBER OF BOARD OF HEALTH APPROVED BEDROOMS FOR THIS LOCATION: _____

IT IS UNDERSTOOD AND AGREED THAT ANY PERMIT ISSUED PURSUANT HEREIN IS ON THE EXPRESS CONDITION THAT ALL PROVISIONS OF THE NEW YORK STATE FIRE PREVENTION AND BUILDING CODES AND ALL ZONING ORDINANCES OF THE TOWN OF NORTH CASTLE AND ANY AND ALL AMENDMENTS THERETO SHALL APPLY AND BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. NO CHANGES TO PLANS OR CONSTRUCTION SHALL BE MADE WITHOUT PRIOR APPROVAL OF THE BUILDING INSPECTOR AND LISCENSED PROFESSIONALS.

PRINT OWNER / APPLICANT NAME: WALLACE J. TOSCANO

OWNER / APPLICANT SIGNATURE: _____

Town of North Castle Building Department

Section V- (Continued)

I W. TOSCANO do hereby affirm and certify as follows: (i) I am the architect/engineer (circle one) licensed by the State of New York; (ii) I have reviewed the plans, drawings and specifications for this application and am fully familiar with the proposed construction; (iii) based on my experience, I estimate the total cost of construction including all labor, all materials, all professional fees and all associated costs to be approximately $ 4,200,000, and (iv) pursuant to Penal Law 210.45, I acknowledge that a false statement made knowingly is a Class A misdemeanor.

Signature: _____ Date: 5.13.20

Sign and Affix Seal Here

Section VI- CONTACT INFORMATION: (Please print clearly. All information must be current)

ARCHITECT/ ENG: ~~WALLACE J. TOSCANO A.I.A.~~ **ARCHITECT**

ADDRESS: ~~41-03 MOGER AVE.~~ MT. KISCO, NEW YORK, 10549

PHONE: ~~914-238-1048~~ MOBILE: 914-329-1491 CELL

EMAIL: ARCHWJT36@GMAIL.COM

CONTRACTOR: N.A.

ADDRESS:

PHONE: MOBILE: EMAIL:

PLUMBER: NA

ADDRESS:

PHONE: MOBILE: EMAIL:

ELECTRICIAN: NA

ADDRESS:

PHONE: MOBILE: EMAIL:

Section VII- APPLICANT CERTIFICATION

I hereby certify that I have read the instructions & examined this application and know the same to be true & correct. All provisions of laws & ordinances covering this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or land use or the performance of construction.

Signature: _____ Date: 5.13.20

Town of North Castle
Residential Project Review Committee
17 Bedford Road Armonk, New York 10504
(914) 273-3542 (914) 273-3554 (fax)

RPRC COMPLETENESS REVIEW FORM

This form represents the standard requirements for a completeness review for all Residential Project Review Committee submissions. Failure to provide all of the information requested will result in a determination that the application is incomplete.

Project Name on Plan: _____

☑ Initial Submittal ☐ Revised Preliminary

Street Location: 9 UPLAND LANE

Zoning District: 2 Property Acreage: 2.316 Tax Map Parcel ID: 101.4/2/4

Date: 5.13.20

DEPARTMENTAL USE ONLY

Date Filed: _____ Staff Name: _____

Preliminary Plan Completeness Review Checklist
Items marked with a "☒" are complete, items left blank "☐" are incomplete and must be completed, "NA" means not applicable.

☐1. Plan prepared by a registered architect or professional engineer

☐2. Aerial photo (Google Earth) showing the applicant's entire property and adjacent properties and streets

☐3. Map showing the applicant's entire property and adjacent properties and streets

☐4. A locator map at a convenient scale

☐5. The proposed location, use and design of all buildings and structures (including floor plans and elevations)

☐6. Existing topography and proposed grade elevations

☐7. Location of drives

☐8. Location of all existing and proposed site improvements, including drains, culverts, retaining walls and fences

☐9. Description of method of water supply and sewage disposal and location of such facilities

☐10. The name and address of the applicant, property owner(s) if other than the applicant and of the planner, engineer, architect, surveyor and/or other professionals engaged to work

☐11. Submission of a Zoning Conformance Table depicting the plan's compliance with the minimum requirements of the Zoning District

☐12. If a tree removal permit is being sought, submission of a plan depicting the location and graphical removal status of all Town-regulated trees within the proposed area of disturbance. In addition, the tree plan shall be accompanied by a tree inventory includes a unique ID number, the species, size, health condition and removal status of each tree.

☐13. If a wetlands permit is being sought, identification of the wetland and the 100-foot wetland buffer.

_____ On this date, all items necessary for a technical review of the proposed site plan have been submitted and constitute a COMPLETE APPLICATION.

TOWN OF NORTH CASTLE

WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING BOARD
Peg Michelman, Chair

Telephone: (914) 273-3542
Fax: (914) 273-3554
www.northcastleny.com

FLOOR AREA CALCULATIONS WORKSHEET

Application Name or Identifying Title: CHRYSSICAS RESIDENCE Date: 5.13.20

Tax Map Designation or Proposed Lot No.: 101.4/2/4

Floor Area

1.	Total Lot Area (Net Lot Area for Lots Created After 12/13/06):	100,884 ☐
2.	**Maximum** permitted floor area (per Section 213-22.2B):	10,446
3.	Amount of floor area contained within first floor: — existing · 3428 proposed –	3428
4	Amount of floor area contained within second floor: — existing · 2950 proposed	2950
5	Amount of floor area contained within garage: _____ existing · 720 proposed	720
6.	Amount of floor area contained within porches capable of being enclosed: _____ existing · 112 proposed	112
7.	Amount of floor area contained within basement (if applicable – see definition): existing · 1200 proposed –	1200
8.	Amount of floor area contained within attic (if applicable – see definition): — existing · — proposed	—
9.	Amount of floor area contained within all accessory buildings: 400 existing · 1050 proposed	1450
10.	Proposed **floor area:** Total of Lines 3 - 9	9860 ☐ OK

If Line 10 is less than or equal to Line 2, your proposal **complies** with the Town's maximum floor area regulations and the project may proceed to the Residential Project Review Committee for review. If Line 10 is greater than Line 2 your proposal does not comply with the Town's regulations.

REGISTERED ARCHITECT
WALLACE J. TOSCANO
No. 010556
STATE OF NEW YORK

Signature and Seal of Professional Preparing Worksheet

5.13.20
Date

LOT AREA, NET – Lot area minus seventy five (75) percent of the area of any wetlands, waterbodies and, watercourses, but excluding any adjacent areas, all as defined in Chapter 209 Wetlands and Drainage, of the Town Code, and the area of any steep slopes, as defined Chapter 213, except that in the case of one-family lots, the deduction for steep slopes shall be only fifty (50) percent.

Lot Size	Maximum Permitted Gross Land Coverage for One-Family Dwelling Lots[1] (square feet)
Less than 5,000 square feet	50% of the lot area
5,000 to 9,999 square feet	2,500 plus 30% of the lot area in excess of 5,000 square feet
10,000 to 14,999 square feet	4,000 plus 24% of the lot area in excess of 10,000 square feet
15,000 square feet to 0.499 acres	5,200 plus 18% of the lot area in excess of 15,000 square feet
0.5 to 0.749 acres	6,420 plus 15% of the lot area in excess of 0.5 acres
0.75 to 0.999 acres	8,050 plus 12% of the lot area in excess of 0.75 acres
1.0 to 1.999 acres	9,350 plus 9% of the lot area in excess of 1.0 acres
2.0 acres or more	13,270 plus 7.5% of the lot area in excess of 2.0 acres

*Permitted gross land coverage limitations for two-family dwelling lots in the R-2F District shall be twenty five (25) percent greater than that permitted for one-family dwelling lots.

NOTWITHSTANDING ABOVE LIMITATIONS, AN ADDITIONAL 10 SQUARE FEET OF GROSS LAND COVERAGE SHALL BE PERMITTED FOR EACH ONE FOOT OF FRONT YARD SETBACK OF THE PRINCIPAL DWELLING IN EXCESS OF THE MINIMUM FRONT YARD SETBACK REQUIRED.

F:\PLAN6.0\Application Forms\2013 Full Set\GROSS LAND COVERAGE CALCULATIONS WORKSHEET 2013.doc

13270
1032
14302

100.887

13,270
1032
14302
250
14552

100.884
97,120
13,764
1032.3

TOWN OF NORTH CASTLE
WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

PLANNING DEPARTMENT
Adam R. Kaufman, AICP
Director of Planning

Telephone: (914) 273-3542
Fax: (914) 273-3554
www.northcastleny.com

GROSS LAND COVERAGE CALCULATIONS WORKSHEET

Application Name or Identifying Title: CHRYSSICAS RESIDENCE Date: 5·13·20

Tax Map Designation or Proposed Lot No.: 101.4/2/4

Gross Lot Coverage

1.	Total lot Area (Net Lot Area for Lots Created After 12/13/06):	100,884
2.	**Maximum** permitted gross land coverage (per Section 213-22.2C):	14,302
3.	**BONUS** maximum gross land cover (per Section 213-22.2C):	
	Distance principal home is beyond minimum front yard setback _____ x 10 =	250
4.	**TOTAL Maximum Permitted gross land coverage** = Sum of lines 2 and 3	14,552
5.	Amount of lot area covered by **principal building:** _____ existing + 3412 proposed =	3412
6.	Amount of lot area covered by **accessory buildings:** 1350 existing + _____ proposed =	1350
7.	Amount of lot area covered by **decks:** _____ existing + _____ proposed =	—
8.	Amount of lot area covered by **porches:** _____ existing + _____ proposed =	—
9.	Amount of lot area covered by **driveway, parking areas and walkways:** 3320 existing + 3570 proposed =	6890
10.	Amount of lot area covered by **terraces:** _____ existing + 480 proposed =	480
11.	Amount of lot area covered by **tennis court, pool and mechanical equip:** _____ existing + _____ proposed =	—
12.	Amount of lot area covered by **all other structures:** _____ existing + _____ proposed =	—
13.	Proposed **gross land coverage:** Total of Lines 5 – 12 =	12,132

If Line 13 is less than or equal to Line 4, your proposal **complies** with the Town's maximum gross land coverage regulations and the project may proceed to the Residential Project Review Committee for review. If Line 13 is greater than Line 4 your proposal does not comply with the Town's regulations.

Signature and Seal of Professional Preparing Worksheet

5·13·20
Date

Lot Size	Maximum Permitted Gross Floor Area for One-Family Dwellings and Accessory Buildings [1] (square feet)
Less than 5,000 square feet	1,875 or 50% of the lot area, whichever is greater
5,000 to 9,999 square feet	2,500 plus 25% of the lot area in excess of 5,000 square feet
10,000 to 14,999 square feet	3,750 plus 20% of the lot area in excess of 10,000 square feet
15,000 square feet to 0.499 acres	4,750 plus 15% of the lot area in excess of 15,000 square feet
0.5 to 0.749 acres	5,768 plus 10% of the lot area in excess of 0.5 acres
0.75 to 0.999 acres	6,856 plus 8% of the lot area in excess of 0.75 acres
1.0 to 1.499 acres	7,727 plus 6% of the lot area in excess of 1.0 acres
1.5 to 1.999 acres	9,034 plus 5% of the lot area in excess of 1.5 acres
2.0 to 3.999 acres	10,122 plus 4% of the lot area in excess of 2.0 acres
4.0 acres or more	13,607 plus 3% of the lot area in excess of 4.0 acres

*Permitted gross floor area for two-family dwellings in the R-2F District shall be one-third (1/3) greater than that permitted for one-family dwellings.

F:\PLAN6.0\Application Forms\2013 Full Set\FLOOR AREA CALCULATIONS WORKSHEET 2013.doc

10,122
+ 324
10,446

100,884
− 92,782
8101
x .04
324

810
x4

800
140
8
11

810

Wallace Toscano
building form
Feb 25, 2020 at 11:19:57 AM
Stu. Elise Fraser Stu. Elise Fraser

Hi
Can you sign the enclosed and have it notarized. send it back to me.

Town of North Castle Building Department

MARIA SCHARF
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01SC6377346
Qualified in Westchester County
Commission Expires July 2, 2022

Section VIII- AFFIDAVIT OF OWNER AUTHORIZATION:

STATE OF NEW YORK)
COUNTY OF WESTCHESTER) SS:

The applicant Wallace Toscano has proper consent from said owner to make this application as submitted and said owner agrees to all terms and conditions placed upon same.

Owner's Name (PRINT) STUART A FRASER Owner's Signature [signature]
Sworn to before me this 26 day of February, 2020 [signature]

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Zone: Section: Block: Lot:

Building Department Checklist:

Does this permit require RPRC approval? [ ] Yes [ ] No

[ ] GC License [ ] Work. Comp. [ ] Liability Ins. [ ] Disability [ ] Two sets of documents

[ ] Permit Fee Payment: [ ] Check # [ ] Cash

Name on check:

Received By: Application No.:

BUILDING INSPECTOR APPROVAL

Has all the conditions of the RPRC been met? [ ] Yes

Is a Flood Development permit required? [ ] Yes [ ] No

Reviewed By Date:

Building Inspector Approval: Date:

Conditions:

TOWN OF NORTH CASTLE ENVIRONMENTAL QUESTIONNAIRE

The purpose of this Questionnaire is to determine whether a Town Wetland Permit/Coverage under the NYSDEC SPDES General Permit for Stormwater Discharges is required. This form does not provide authorization to commence work.

Project Information

Project Address: CHRTSS/CAS RESIDENCE

Sheet: 161.4 Block: 2 Lot(s): 4

Project Description: NEW 2 STORT RESIDENCE

Note: This questionnaire must be accompanied with a Plot Plan that clearly illustrates the location and dimensions of the proposed activity. Said Plot Plan must include a line which encircles the total area of proposed land disturbance and the approximate area of disturbance must be calculated (square feet). Failure to submit these items will delay review.

Owner's Information

Owner's Name: MR & MRS. S FRASER Phone: (917) 733 5514

Owner's Address: 18 MAPLE WEST

Authorized Agent's Information (if applicable)

Agent's Name: W. TOSCANO AIA Phone: (914) 329-1491

Agent's Adress: 41 N. MOGER AVE, MT. KISCO NY

As the owner/agent (circle one), I hereby state that to the best of my knowledge, the information provided herein is accurate. In addition, I hereby grant permission to the Town's professional consultants to enter onto my property to conduct a site inspection.

Owner/Agent Name (print): W. TOSCANO

Owner/Agent Name (signature): [signature] Date: 2-24-20

FOR TOWN USE - PLEASE DO NOT WRITE BELOW THIS LINE

1. The existing/proposed use is: ☐ Residential ☐ Nonresidential
2. Is a Town Wetland Permit required? ☐ Yes ☐ No
3. Date of RPRC Review: _____
4. If Yes, what type of Wetland Permit is required? ☐ Administrative ☐ Planning Board
5. Reason why a Wetland Permit is required: _____
6. Is the project located within the NYCDEP Watershed? ☐ Yes ☐ No
7. Area of proposed disturbance: ☐ < 5,000 s.f. ☐ 5,000 s.f. - < 1 acre ☐ ≥1 acre
8. Will the project require coverage under the NYSDEC SPDES General Permit for Stormwater Discharges and the preparation of a SWPPP? ☐ Yes ☐ No ☐ TBD
9. Requested Waivers: _____

Notes: _____

Signature: _____ Date: _____

TOWN OF NORTH CASTLE ENVIRONMENTAL QUESTIONNAIRE

The purpose of this Questionnaire is to determine whether a Town Wetland Permit/Coverage under the NYSDEC SPDES General Permit for Stormwater Discharges is required. This form does not provide authorization to commence work.

Project Information

Project Address: CHRISS/CAS RESIDENCE

Sheet: 101.4 Block: 2 Lot(s): 4

Project Description: NEW 2 STORY RESIDENCE

Note: This questionnaire must be accompanied with a Plot Plan that clearly illustrates the location and dimensions of the proposed activity. Said Plot Plan must include a line which encircles the total area of proposed land disturbance and the approximate area of disturbance must be calculated (square feet). Failure to submit these items will delay review.

Owner's Information

Owner's Name: MR & MRS S FRASER Phone: (917) 733 5514

Owner's Address: 18 MAPLE WEST

Authorized Agent's Information (if applicable)

Agent's Name: W. TOSCANO RLA Phone: (914) 329-1491

Agent's Adress: 41 N. MOGER AVE, MT KISCO NY

As the owner/agent (circle one), I hereby state that to the best of my knowledge, the information provided herein is accurate. In addition, I hereby grant permission to the Town's professional consultants to enter onto my property to conduct a site inspection.

Owner/Agent Name (print): W. TOSCANO

Owner/Agent Name (signature): [signature] Date: 2-24-20

FOR TOWN USE - PLEASE DO NOT WRITE BELOW THIS LINE

1. The existing/proposed use is: ☐ Residential ☐ Nonresidential
2. Is a Town Wetland Permit required? ☐ Yes ☐ No
3. Date of RPRC Review: _____
4. If Yes, what type of Wetland Permit is required? ☐ Administrative ☐ Planning Board
5. Reason why a Wetland Permit is required: _____
6. Is the project located within the NYCDEP Watershed? ☐ Yes ☐ No
7. Area of proposed disturbance: ☐ < 5,000 s.f. ☐ 5,000 s.f. - < 1 acre ☐ ≥1 acre
8. Will the project require coverage under the NYSDEC SPDES General Permit for Stormwater Discharges and the preparation of a SWPPP? ☐ Yes ☐ No ☐ TBD
9. Requested Waivers: _____

Notes: _____

Signature: _____ Date: _____

Imagery ©2020 Maxar Technologies, New York GIS, USDA Farm Service Agency, Map data ©2020 100 ft

CHRYSSICAS RESIDENCE
ZONING CHART

LOT 101.4 SECTIONB 2C LOT 4,Zoning district R2

	REQUIRED	*EXISTING HOUSE*	*PROPOSED*
LOT AREA	20,000 SF	100,884 SF	NO CHANGE
WIDTH MIM.	**150**		**72'**
MIM. SETBACK			
FRONT	**50'**		**72'**
REAR	**50'**		**192'**
SIDE	**30'**		**45'**
MAX. LOT GROSS LAND COVERAGE	**14,302SF**		**10.744**
COVERAGE MAX BUILD COVERAGE	**8%**		**4.6%**
MIM DWELLING UNIT SIZE	**1400 SF**		**6378 SF**
FLOOR AREA RATIO	**10677SF**		**9.860 SF**
MAX. BUILD. HGT.	**--- 30' (2 ½)**		**28'**