



## Town of Philipstown Planning Board

238 Main Street  
P.O. Box 155  
Cold Spring, New York 10516

January 18, 2017

Mark Galezo, Chairman  
Town of Philipstown Conservation Board  
PO Box 155  
Philipstown, NY 10516

RE: Horton Road LLC - Conservation Subdivision  
NYS Route 9  
SEQRA Lead Agency Notice

Dear Mr. Galezo:

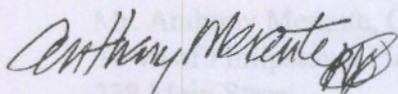
Please find enclosed a copy of the State Environmental Quality Review Act (SEQRA) "Notice of Intent to become Lead Agency", as well as a CD containing the following documents which were submitted to our Board by Horton Road LLC (hereinafter referred to as the "Applicant"):

- Conservation Analysis of overall tract
- Full Environmental Assessment Form (EAF)
- Schematic Master Plan of intended development layout

For a description of the Applicant's proposal, please refer to the attached materials.

It would be helpful to our Board if you would provide any comments on the project, and/or identify other issues which warrant evaluation during the environmental review process, within the next thirty (30) days.

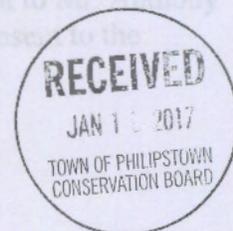
Very truly yours,



**Anthony Merante**  
Chairman

AM:  
Enclosures

cc: Linda Valentino, Planning Board Secretary  
Ronald J. Gainer, PE, PLLC





## TOWN OF PHILIPSTOWN PLANNING BOARD

### Horton Road LLC Conservation Subdivision

#### PROJECT DESCRIPTION

The Town of Philipstown Planning Board has received an Application for Subdivision Approval from Horton Road LLC, concerning the following parcels totaling 205.6 acres and designated on the official tax maps of the Town of Philipstown:

Section 17, Block 1, Lot 77.2	27.71 acres
Section 17, Block 1, Lot 76.112	86.88 acres
Section 17, Block 1, Lot 39	19.99 acres
Section 17, Block 1, Lot 76.21	20.82 acres
Section 17, Block 1, Lot 76.111	50.03 acres

The properties which are the subject of this application are situated in "M" & "RR" (Industrial/ Manufacturing & Rural Residential) Zoning Districts, and encompass Soil Mining (SMO), Open Space Conservation (OSO), Scenic Protection (SPO) & Clove Creek Aquifer (CCA) Overlay Districts.

Most of the site is currently un-developed, and situated along the east side of NYS Route 9 between E. Mountain Road North and Horton Road. Portions of the tract contain a NYS-designated wetland (WP-17) generally in the vicinity of Clove Creek, which lies along a portion of the southwesterly property boundary.

This application represents a 29-lot residential subdivision over these 5 separate tax parcels. The 29 lots would be developed as detached single family homes, while an equestrian center is proposed within the proposed community (HOA) lands within the property. All lots will be served by individual wells, while up to three (3) separate community subsurface sanitary disposal systems are proposed to service the wastewater requirements of the entire development. The applicant is proposing to preserve approximately 165 acres of the overall tract.

A proposed roadway extending from NYS Route 9 is proposed for access to the individual lots, extending from NYS Route 9 into the tract. All internal roads are intended to be private, not to be dedicated to the Town, and proposed to be constructed to alternate road standards.

The application is being prosecuted under the Town's "Conservation Subdivision" regulations, which are encouraged by the Town's Zoning Ordinance, in Article V ("Open Space Development"), and must comply with the standards established in §175-20 of the Ordinance. The purpose of such open space development is to:

- preserve large tracts of open space land in order to maintain the rural appearance and environmental resources of the Town,
- avoid the uniform pattern of more conventional subdivisions,
- preserve contiguous open space and important environmental resources, while allowing compact development, more walkable neighborhoods, and more flexibility than conventional subdivisions.

The Town of Philipstown Planning Board has previously adopted a "Conservation Findings" in accordance with the requirements of §175-20 of the Ordinance, based upon their review of detailed constraints mapping which identified the natural & environmental features of the overall tract.

The applicant has now provided a proposed "Master Plan" to identify the layout of the development planned, which is intended to protect those areas of the tract deemed worthy of protection/conservation.

The predominant soils found on this site consist of Chatfield (49% of the overall site), Charlton (22%), and Riverhead (13%) soils. Water covers approximately 2.9% of the tract. An approximate breakdown of slopes is:

- 0-10% - 20%
- 10-15% - 12%
- over 15% - 68%

PLANNING BOARD  
TOWN OF PHILIPSTOWN; PUTNAM COUNTY

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In the matter of the application of

Horton Road LLC Conservation Subdivision  
NYS Route 9

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RESPONSE TO REQUEST THAT TOWN OF PHILIPSTOWN PLANNING BOARD SERVE  
AS LEAD AGENCY

On behalf of the Town of Philipstown Conservation Board,

I acknowledge receipt of the Lead Agency notice in this matter, which was mailed on  
January 18, 2017.

The above-named involved agency hereby

(Please check one)

- [ ] CONSENTS that the Town of Philipstown Planning Board serve as Lead Agency in this application and requests that the undersigned continue to be notified on filings and hearings in this matter.
  
- [ ] DOES NOT CONSENT to the Town of Philipstown Planning Board serving as Lead Agency in this application and wishes that the Town of Philipstown Conservation Board serve as Lead Agency. To contest Lead Agency designation, the undersigned intends to follow the procedures outlined in 6 NYCRR 617.6 (b)(5).

DATED: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TOWN OF PHILIPSTOWN  
PUTNAM COUNTY, NEW YORK

238 Main Street  
Cold Spring, NY, 10516  
(845) 265-5202

**APPLICATION FOR WETLANDS PERMIT**

**Note to Applicant:**

Submit the completed application to the appropriate permitting authority. The application for Wetlands Permit should be submitted simultaneously with any related application (e.g., subdivision approval, site plan approval, Special Use Permit, etc.), being made to the permitting authority.

(Office Use Only)

Application # 16-281

Permitting Authority

Received by: Marganne Londolfi

Date 12-2-16

Conservation Board

Fee 1000.00 escrow  
500.00 app

Wetlands Inspector

Pursuant to Chapter 93 of the Code of the Town of Philipstown, entitled "Freshwater Wetlands and Watercourse Law of the Town of Philipstown" (Wetlands Law), the undersigned hereby applies for a Wetlands Permit to conduct a regulated activity in a controlled area.

1. Owner: Name: Douglas H. Banker

Address: 15 Kings Dock Rd Garrison NY

Telephone: 845 424 3008

If Corporation, give names of officers:

Mailing Address: \_\_\_\_\_

2. Name of Agent

(Applicant must be owner of the land. The Application may be managed an authorized agent of such person.)

James Hartford

Mailing Address: River Architects 8 maxion Ave suite 3 Cold Spring, NY

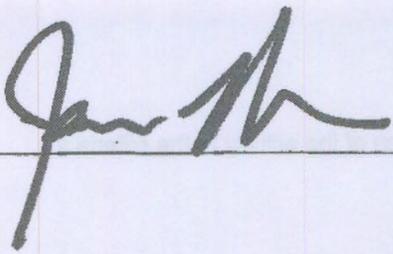
RECEIVED

JAN 18 2017

TOWN OF PHILIPSTOWN  
CONSERVATION BOARD

RECEIVED

TOWN OF PHILIPSTOWN  
CONSERVATION BOARD



### Check List for a Complete Wetlands Permit Application

**\*\*\*\*All supporting materials must be submitted to the Conservation Board/Wetland Inspector two weeks prior to the scheduled meeting date to allow for distribution to members before the meeting.**

Ten (10) sets of all material as follows:

#### Application Form

Environmental Assessment Form (short form), unless other agencies have requested the long form in which case that should be presented.

A plan of your site drawn by a design professional, such as an engineer, architect or land surveyor. All plans must show: wetlands delineation boundaries, 100' buffer zones from wetlands and watercourses, location of access route for construction activities, the location of any well or sewage or wastewater disposal system and, in most cases, the topography of the site. Site plans must include all proposed work within the 100' foot buffer zone and be full sized for easy reading by CB members

Copies of correspondence from all other agencies including, but not limited to; DEC, DOT, EPA, PCBOH, ACOE or other Town of Phillipstown agencies; Town Board, Planning Board, ZBA, Building Dept.

A written outline of the proposed activity, along with a construction scenario that should include specific items such as the estimated quantities of material excavated or the amount of fill required and the total square footage of soil to be disturbed.

Names and addresses of all owners of record of properties abutting and directly across from the proposed activity as shown on the latest tax record as well as the names of claimants of water rights in the wetland or watercourse of whom the applicant has record notice.

## 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.

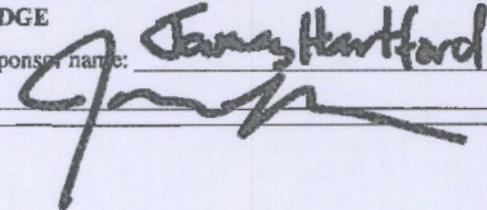
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: <b>Banker Residence main House</b>			
Project Location (describe, and attach a location map): <b>15 Kings Dock Rd Garrison, NY</b>			
Brief Description of Proposed Action:  <b>To demolish the existing 2 story w/ basement and replace it with a new 2 story house w/ basement that is under 3,000 sf.</b>			
Name of Applicant or Sponsor: <b>Douglas H. Banker</b>		Telephone: <b>845 424 3008</b>	
Address: <b>15 Kings Dock Rd</b>		E-Mail: <b>douglashbanker@gmail.com</b>	
City/PO: <b>Garrison</b>		State: <b>NY</b>	Zip Code: <b>10624</b>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<b>1.62</b> acres	
b. Total acreage to be physically disturbed?		<b>0.092</b> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<b>7.69</b> acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

<p>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)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>

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

Applicant/sponsor name: James Hartford Date: 12/2/2016

Signature: 

## **Project Narrative- Banker Main House New Construction**

15 Kings Dock Road  
Garrison, NY 10524

As prepared for the Town of Philipstown Conservation Board

January 17, 2017

The proposed work includes the replacement of an existing residential structure with a new residential structure adjacent to a stream, the reuse of an existing septic system, burying electrical service to the new house, and the removal of an existing shed. This activity is within the regulated buffer zone of the watercourse.

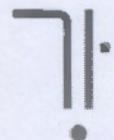
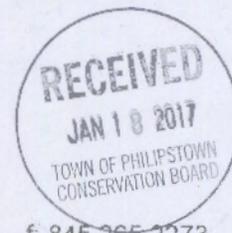
The demolition process and stream protection measures have been detailed by Steve Marino of Tim Miller Associates, and can be found on the sheet "Existing House Demolition, New Foundation Construction and Stream Protection Plan" dated January 4, 2017. This Project Narrative we are providing is intended to expand on the new construction process, and is intended to supplement Mr. Marino's summary regarding project sequencing in regard to stream protection, demolition, and stabilization.

### **Retaining Walls**

The existing retaining wall supporting the rear terrace is unsound, we propose to reconstruct it per Detail 5 found on our sheet, CB-02. We intend to limit the use of poured concrete so to minimize the risk of formwork blowout. Poured concrete would be limited to footings and structural tie-backs (aka: "deadmen"). The retaining walls themselves would be built of concrete masonry units and native stone from the site but outside of buffer areas for stone facing.

### **Foundation and Basement Walls**

The footings for the new foundations and basement would be poured concrete. Foundation walls would be built using concrete masonry units. These foundation walls will be insulated with expanded polystyrene foam (EPS) boards and finished with a reinforced stucco coating. The use of concrete block for the preponderance of the foundation work is intended to minimize the risk of formwork blowout.



## **Framing**

Above-grade framing will be conventional platform framed construction, consisting of floor and roof diaphragms supported on foundation walls or framed walls, with structural sheathing for shear strength. Walls will be insulated with cavity insulation and exterior EPS insulation, with vertical battens and painted cedar siding. Siding will be pre-primed, and will be brush applied. Spray application of paint will not occur.

## **Roof Framing and Drainage**

The roof will be nominally pitched, diverting rainwater to the north-west corner of the proposed new house. This water will be conveyed to the ground via a scupper and leader, and discharged into a series of premanufactured drywells as shown on Detail 2 of CB-01. The cutsheet for these drywells are included in this submission. Steve Marino had calculated the rainwater load from the roof, and has determined that 8 drywells would meet the anticipated load with surplus capacity.

We intend to minimize storm runoff by situating the drywells to the west of the structure and furthest from the stream. Additionally, we chose to locate the drywells uphill, where the soil depth seems adequate and the risk of storm surge infiltration is minimized. Care will be taken to avoid impact on the septic system laterals from the rainwater discharge into the drywells.

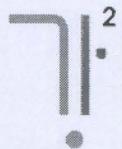
## **Site Maintenance During Construction**

The General Contractor and all sub-contractors have all worked on the property, and are familiar with the expectations for maintaining the site protections put in place and the need to prevent degradation to the wetlands, stream, and buffer areas.

We will review the site protection details and requirements with the construction team, and will periodically review protections for effectiveness and necessary repairs. We will instruct contractors to immediately rectify any damage to site protection measures they may encounter. They will be informed that all equipment washout is strictly forbidden within wetlands, stream, and related buffer areas.

## **Septic Repair**

The existing septic has been evaluated by a licensed septic system installer and has been determined to be in satisfactory working order- the report and as-built drawing provided by Eastern States Septic LLC is included in this submission. No additional work is planned to expand the septic system.



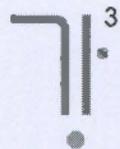
The limits of the laterals will be delineated with snow fencing to avoid machine traffic during demolition and construction.

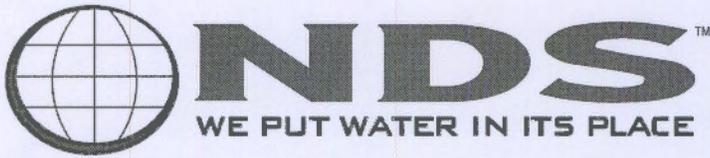
### **Driveway and Hardscaping**

The existing gravel driveway to the house will remain, and the approach to the main entryway will utilize the existing driveway bed. Site improvements around the driveway and the entryway, such as low retaining walls and landscape steps will be minimal, and will not increase stormwater runoff.

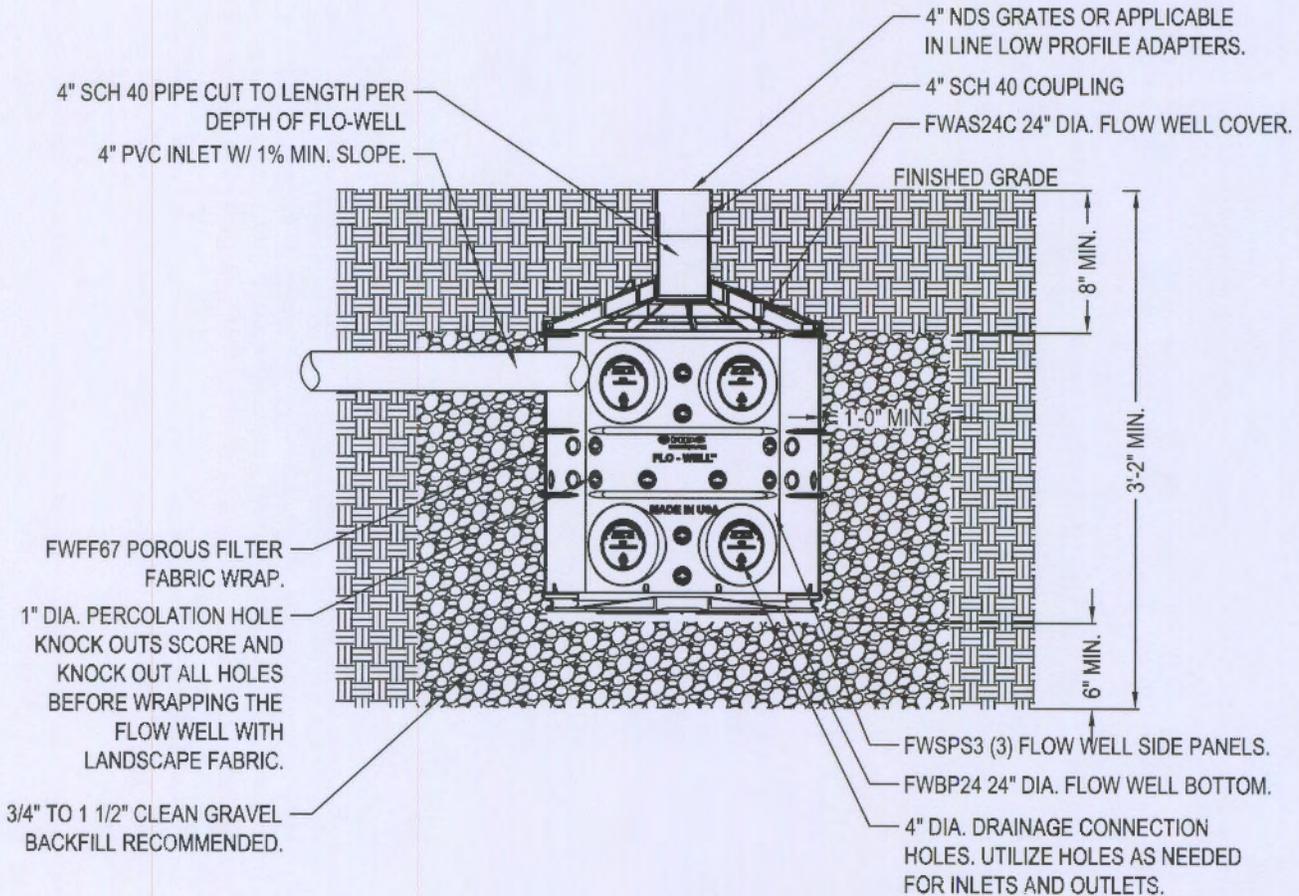
The proposed terrace at the north of the proposed house will include the original terrace there, and a portion of the existing basement that falls outside of the new basement. The terrace will provide rainwater infiltration through open sand joints and underlying sand and gravel beds. More information on the terrace construction can be found on Detail 5 of CB-02.

**End of Narrative**



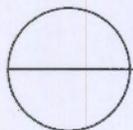


NDS, INC.  
 851 NORTH HARVARD AVE.  
 LINDSAY, CA 93247  
 TOLL FREE: 1-800-726-1994  
 PHONE: (559) 562-9888  
 FAX: (559) 562-4488  
 www.ndspro.com



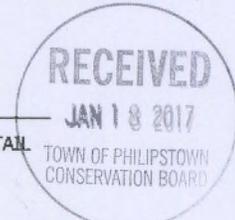
**NOTES:**

1. MUST BE INSTALLED 10' AWAY FROM STRUCTURE OR FOUNDATION.
2. FWAS24 KIT DOES NOT COME WITH FWBP24 BTM.
3. REFERENCE FLO-WELL CALCULATOR ON NDSPRO.COM
4. INSTALLATION TO BE COMPLETED IN ACCORDANCE WITH MANUFACTURER'S SPECIFICATIONS.
5. DO NOT SCALE DRAWING.
6. THIS DRAWING IS INTENDED FOR USE BY ARCHITECTS, ENGINEERS, CONTRACTORS, CONSULTANTS AND DESIGN PROFESSIONALS FOR PLANNING PURPOSES ONLY.
7. ALL INFORMATION CONTAINED HEREIN WAS CURRENT AT THE TIME OF DEVELOPMENT BUT MUST BE REVIEWED AND APPROVED BY THE PRODUCT MANUFACTURER TO BE CONSIDERED ACCURATE.



**FLO-WELL DRY WELL SYSTEM**

FLO-WELL INSTALLATION DETAIL - LOAD CLASS "A" & "B" - GRAVEL INSTALLATION DETAIL



**INDIVIDUAL SEWAGE SYSTEM**  
*Septic Inspection*

*Property Location: 15 Kingsdock Road, Garrison, NY 10524*

This statement presents the findings of a visual inspection of the accessible surface areas at the time of inspection. The inspection was made primarily for the detection of septic failure.

*Eastern States Septic LLC.*, makes no representation, guarantee or warranty, expressed or implied, concerning this inspection and assumes no liability.

*The following areas were inspected:*

1. *Surface area over septic tank*
2. *Septic Tank, Physical Condition*
3. *Inlet/Outlet Baffles*
4. *Lid to tank*

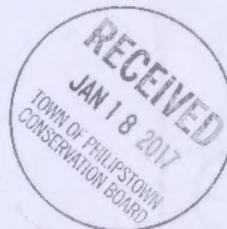
*As a result of our inspection, the following was noted:*

*We inspected a 1000 Pre-Cast Gallon Concrete septic tank. The tank is located in the driveway of the property. The main lid to the tank is a round 20" concrete lid. Both baffles are intact and functioning at this time (Baffles are needed to keep the solid matter in the tank and prevent it from clogging the fields). The overhaul condition of the Septic tank is good. There was no water coming back from the fields. We walked the grounds around the fields and didn't notice any leaching. The tank as it stands can support up to a 3 bedroom home, if any additional bedrooms were to be added to the house, the system would need to be upgraded.*

*This septic tank has PASSED our Inspection at this time.*

*Inspected by: Neil L Date 7-27-16*

*W/C Lic#79  
PC#7188*



**INDIVIDUAL SEWAGE SYSTEM**  
**Septic Inspection**

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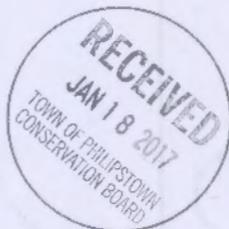
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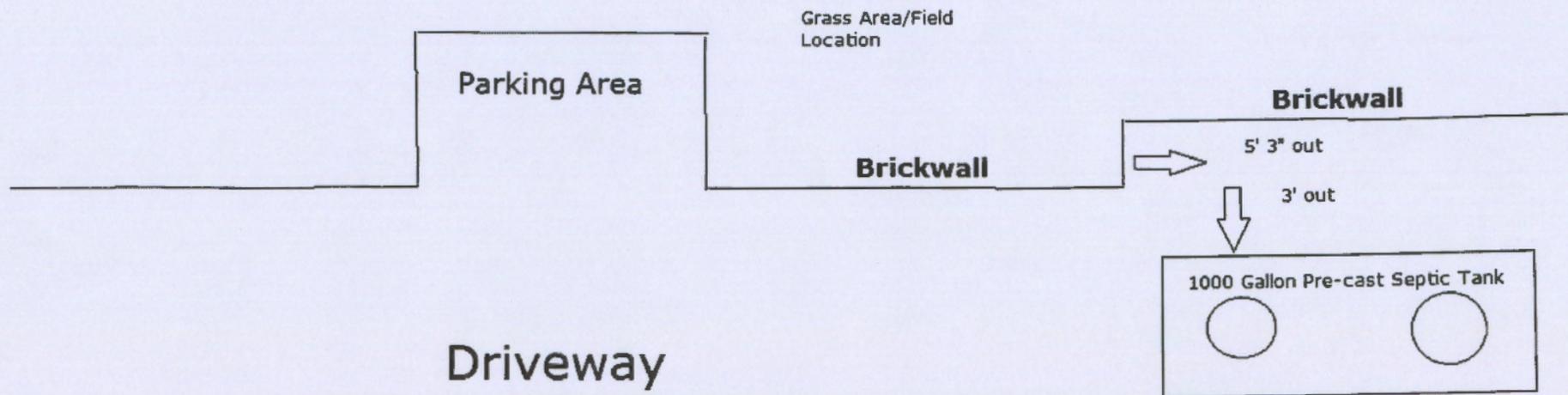
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*Inspected by: Rail L Date 7-27-16*

*W/C Lic#79  
PC#7188*





15 Kingsdock Road  
Garrison, NY 10524

Michael J. Nesheiwat, M.D.  
Interim Commissioner of Health



MaryEllen Odell  
County Executive

Robert Morris, P.E., M.P.H.  
Director of Environmental Health

Department of Health  
1 Geneva Road, Brewster, New York 10509  
(845) 808-1390

December 20, 2016

Douglas H. Banker  
15 Kings Dock Road  
Garrison, NY 10524

Re: Addition – A-178-16  
No Increase in Number of Bedrooms  
15 Kings Dock Road  
(T) Philipstown, T.M. 81.-1-27

Dear Mr. Banker:

This Department has received and reviewed the plans for the proposed addition to the above mentioned residence. The proposal for the addition has been approved as per plans bearing the approval stamp from this Department dated December 20, 2016. The addition is approved with the following conditions:

1. The total number of bedrooms must remain at **three** without prior approval by this Department.
2. The area of the existing sewage disposal system and its expansion area must be maintained.
3. All plumbing fixtures must be updated with water saving devices, i.e., new low flush toilets, restrictors for shower heads and faucets, etc . . .
4. The approval is for the modifications only and does not validate any construction shown as existing that has not obtained proper approvals from other agencies having jurisdiction.
5. This approval is valid for two (2) years and expires on December 20, 2018.

Any permits or variances required under the jurisdiction of the Town of Philipstown are the responsibility of the applicant.

If you have any questions, please contact me at (845) 808-1390 ext. 43261.

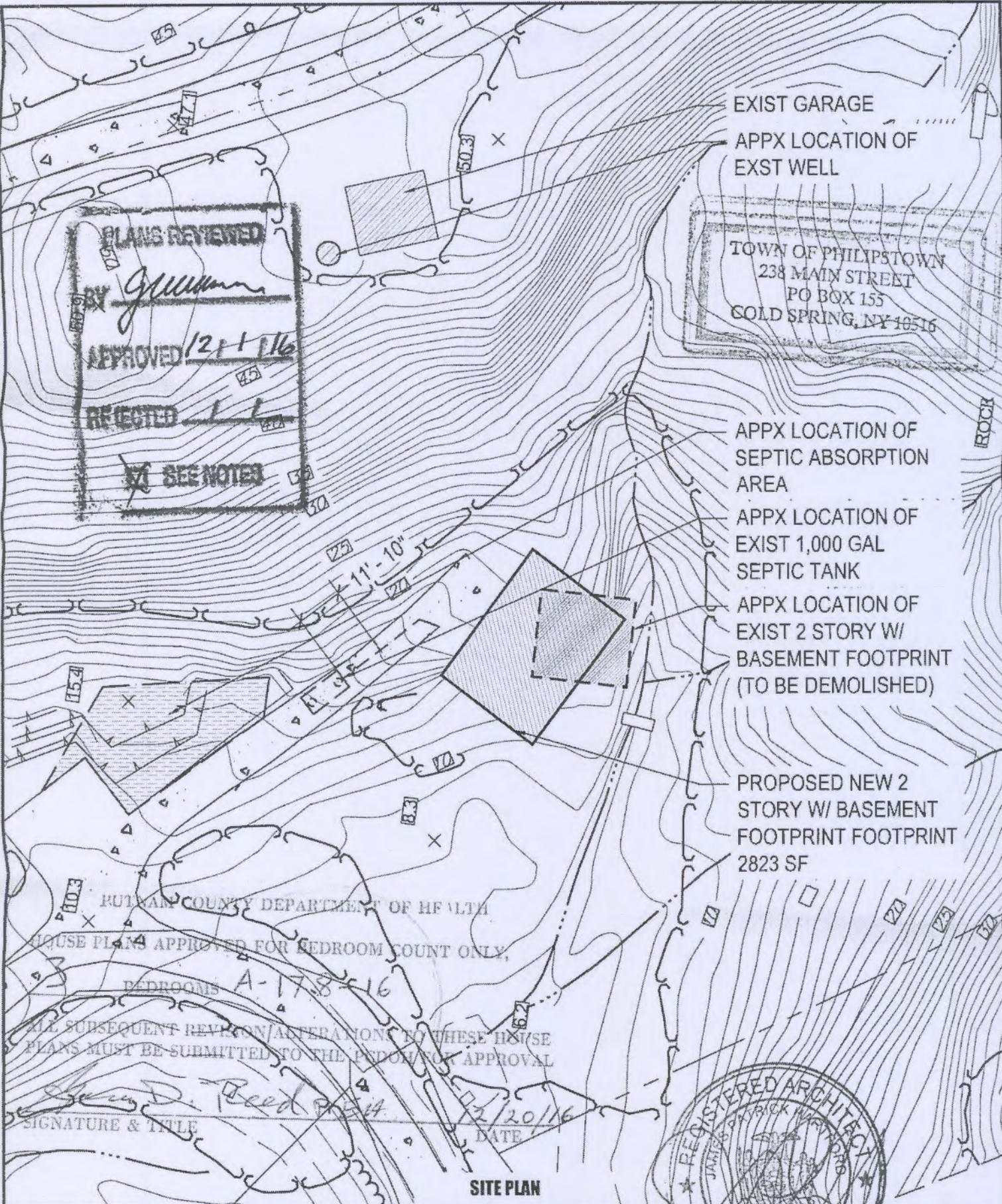
Respectfully,

Gene D. Reed  
Principal Engineering Aide

GDR:cml

cc: BI (T) Philipstown





EXIST GARAGE  
 APPX LOCATION OF  
 EXST WELL

TOWN OF PHILIPSTOWN  
 238 MAIN STREET  
 PO BOX 155  
 COLD SPRING, NY 10516

APPX LOCATION OF  
 SEPTIC ABSORPTION  
 AREA  
 APPX LOCATION OF  
 EXIST 1,000 GAL  
 SEPTIC TANK  
 APPX LOCATION OF  
 EXIST 2 STORY W/  
 BASEMENT FOOTPRINT  
 (TO BE DEMOLISHED)

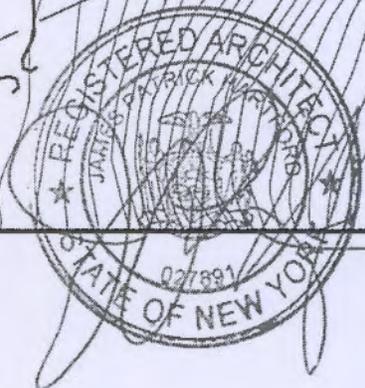
PROPOSED NEW 2  
 STORY W/ BASEMENT  
 FOOTPRINT FOOTPRINT  
 2823 SF

PLANS REVIEWED  
 BY *Gillum*  
 APPROVED 12/1/16  
 REJECTED 1/1/17  
 SEE NOTED

RUTLAND COUNTY DEPARTMENT OF HEALTH  
 HOUSE PLANS APPROVED FOR BEDROOM COUNT ONLY,  
 BEDROOMS A-173-16  
 ALL SUBSEQUENT REVISION/ALTERATIONS TO THESE HOUSE  
 PLANS MUST BE SUBMITTED TO THE PERMITS APPROVAL

*David D. Reed*  
 SIGNATURE & TITLE  
 DATE 12/20/16

SITE PLAN



**River**  
 ARCHITECTS  
 8 Marion Avenue Suite 3, Cold Spring, NY  
 www.riverarchitects.com / 845.265.2254

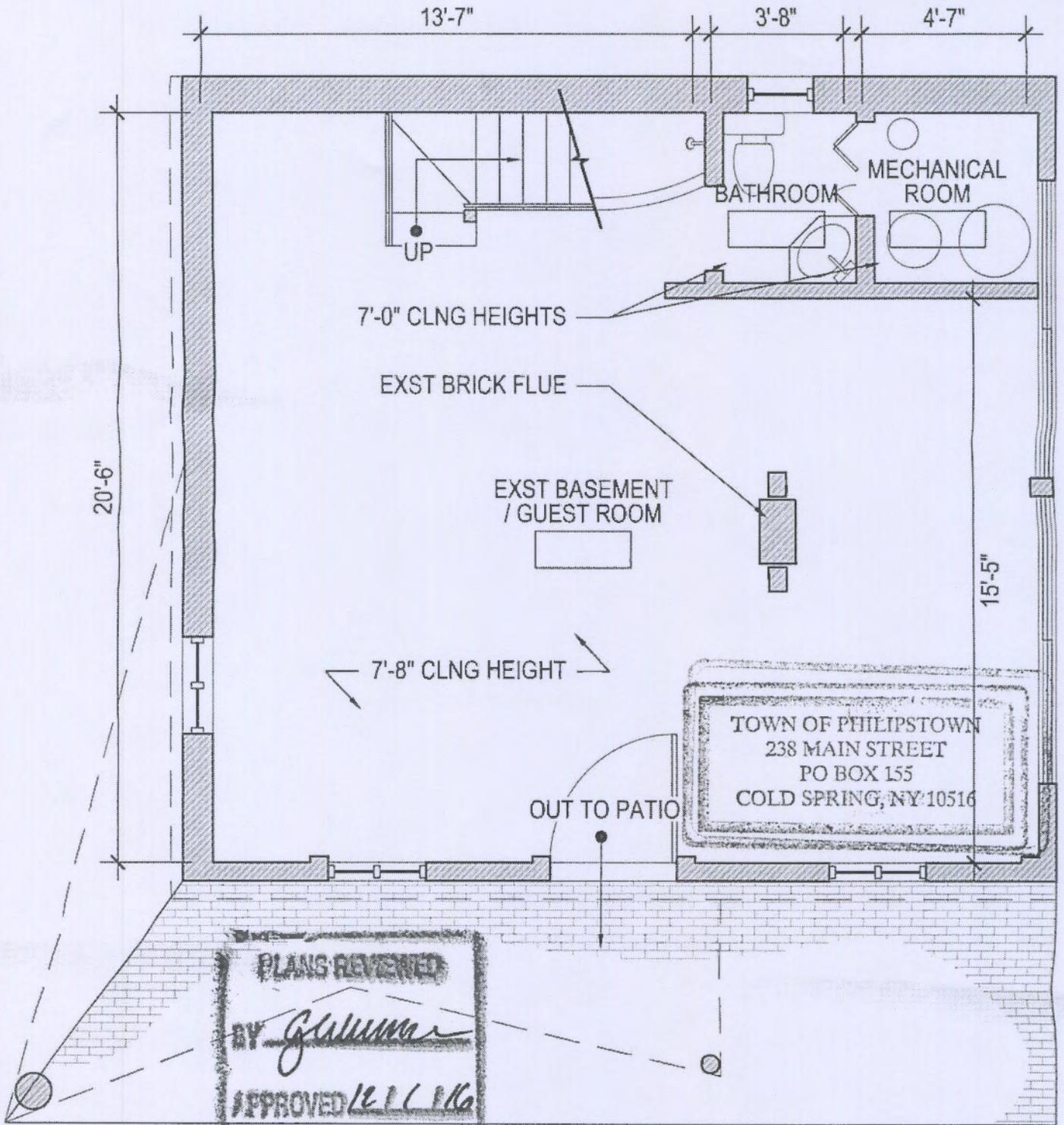
**BANKER RESIDENCE**

15 KINGS DOCK RD  
 GARRISON NY 10524  
 TAX MAP #:81-1-27

**HD-00**

1/32" = 1'-0"  
 12/01/16

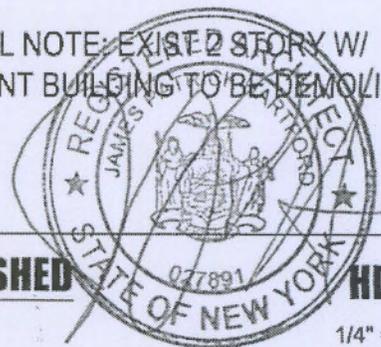
NOT FOR CONSTRUCTION



PLANS REVIEWED  
 BY *G. Luma*  
 APPROVED 12/1/16  
 REJECTED 1/1  
 SEE NOTES

EXISTING BASEMENT

GENERAL NOTE: EXISTED STORY W/  
 BASEMENT BUILDING TO BE DEMOLISHED



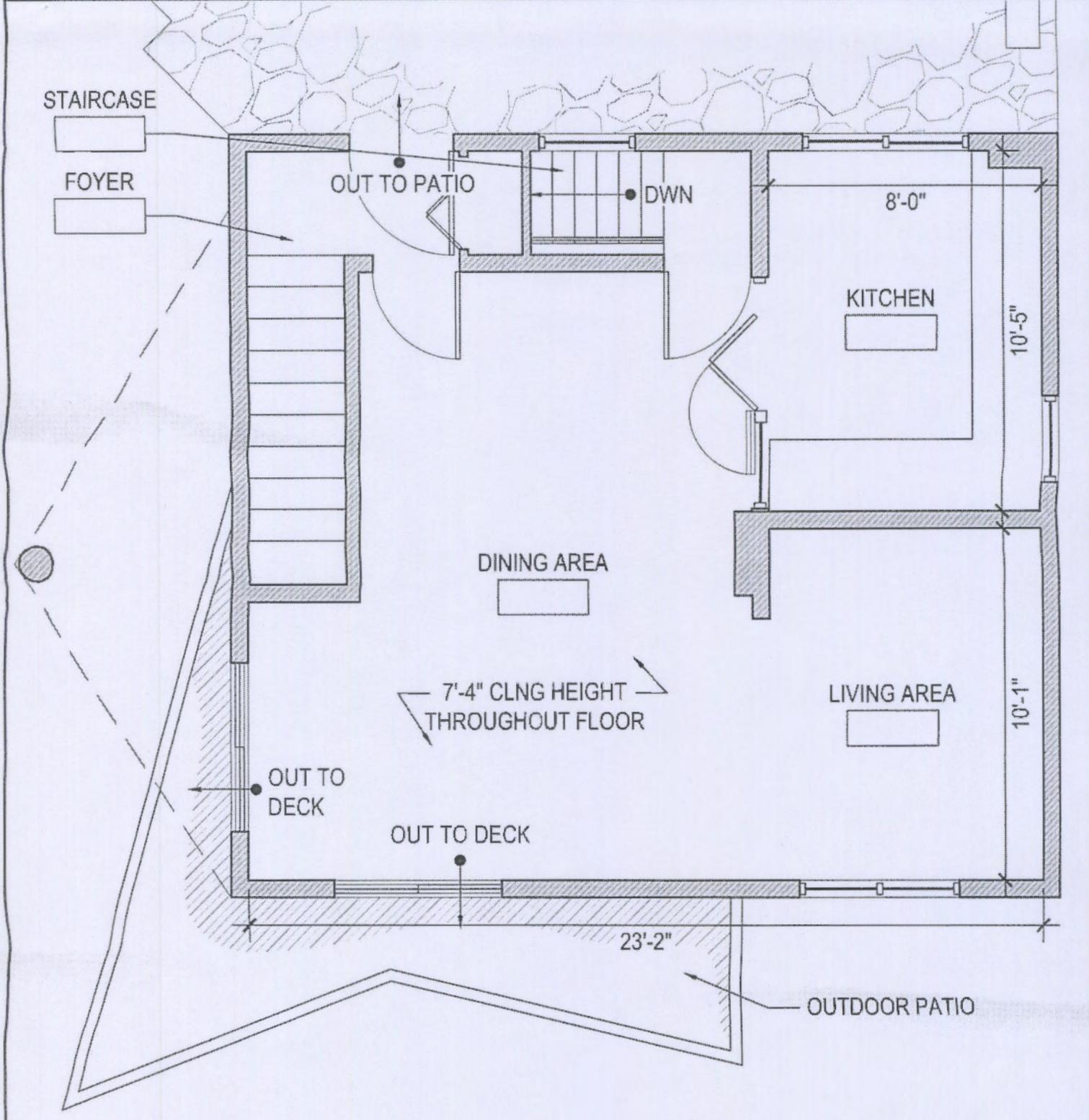
**BANKER EXIST HOUSE - TO BE DEMOLISHED**

15 KINGS DOCK RD  
 GARRISON NY 10524  
 TAX MAP #:81-1-27

**HD-01**

1/4" = 1'-0"

REVISED:08/31/16

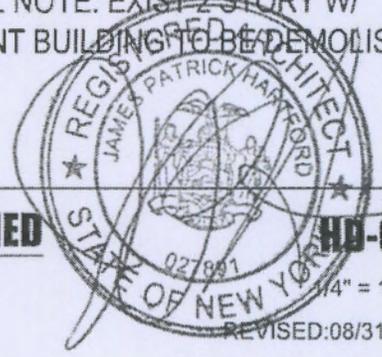


GENERAL NOTE: EXIST 2 STORY W/  
BASEMENT BUILDING TO BE DEMOLISHED

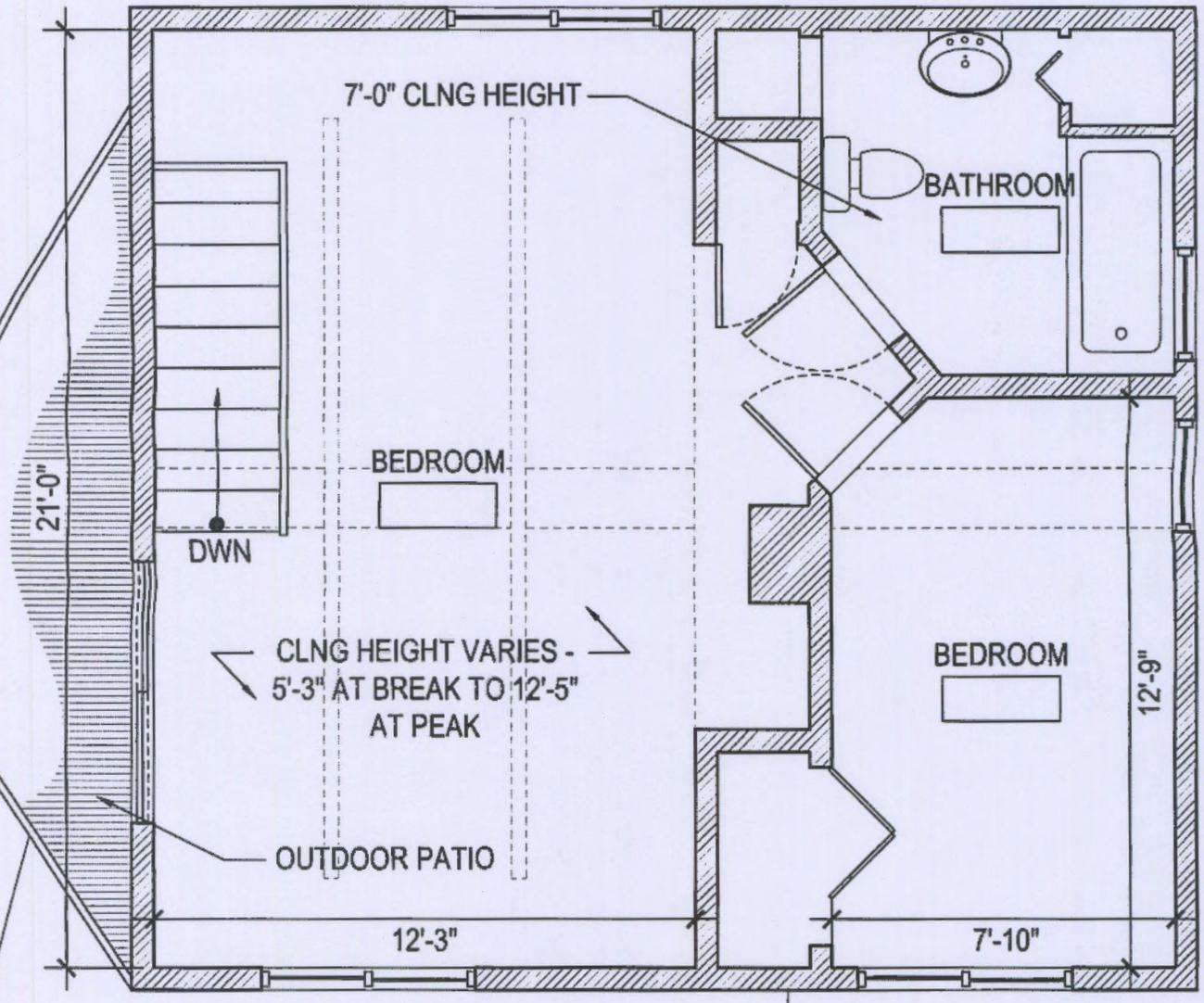
**EXISTING FIRST FLOOR**

**BANKER EXIST HOUSE - TO BE DEMOLISHED**

15 KINGS DOCK RD  
GARRISON NY 10524  
TAX MAP #:81-1-27



**River**  
ARCHITECTS  
8 Marion Avenue Suite 3, Cold Spring, NY  
www.riverarchitects.com / 845.265.2254



GENERAL NOTE: EXIST. 2 STORY W/  
BASEMENT BUILDING TO BE DEMOLISHED

**EXISTING SECOND FLOOR**



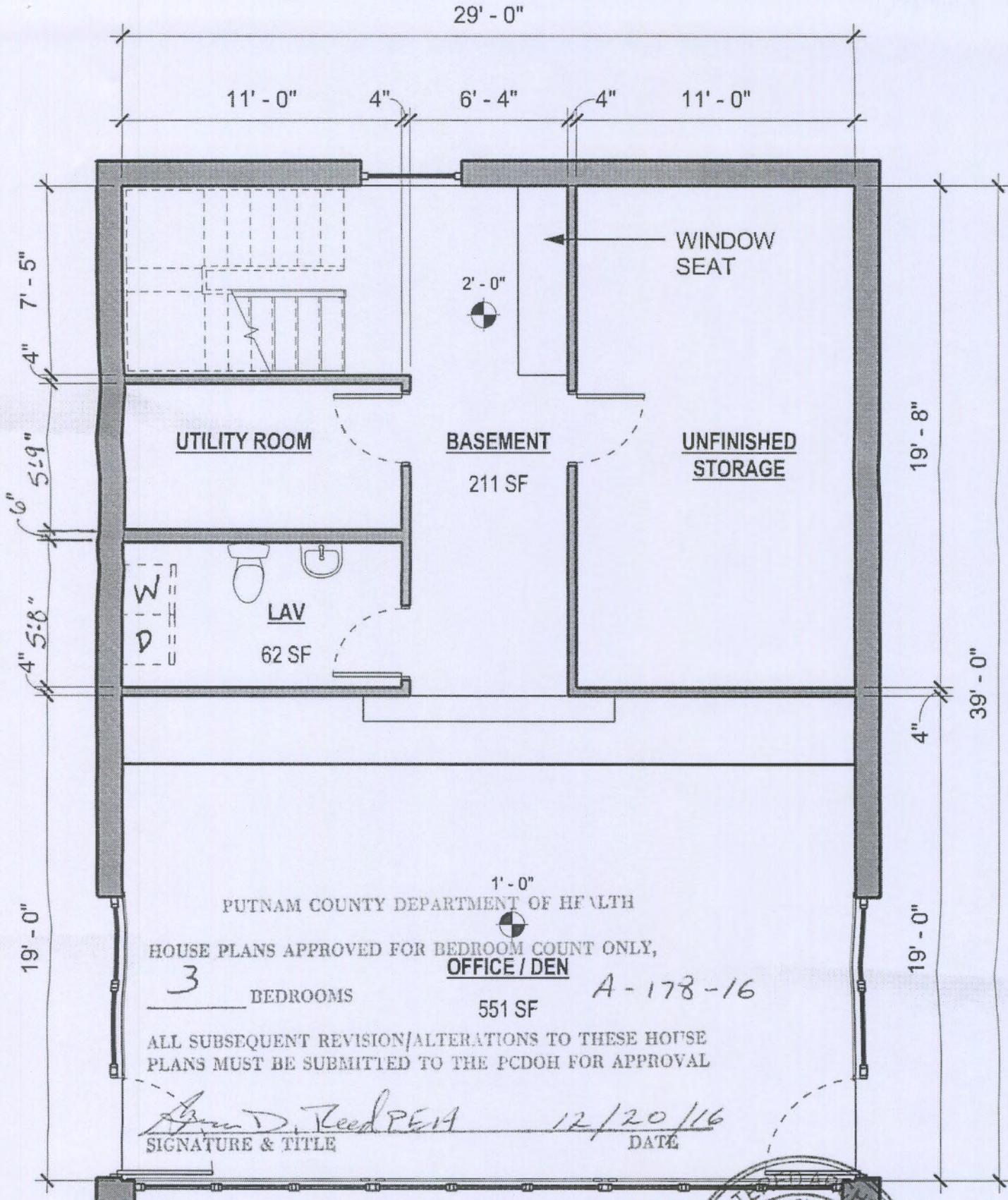
**BANKER EXIST HOUSE - TO BE DEMOLISHED**

15 KINGS DOCK RD  
GARRISON NY 10524  
TAX MAP #:81-1-27

**HD-03**

1/4" = 1'-0"

REVISED:08/31/16



1'-0"

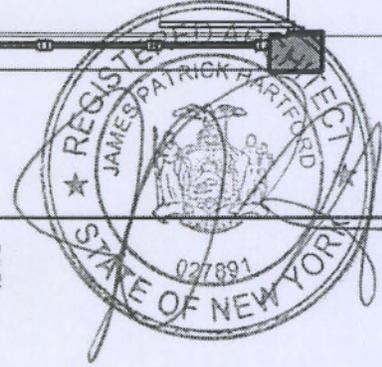
PUTNAM COUNTY DEPARTMENT OF HEALTH

HOUSE PLANS APPROVED FOR BEDROOM COUNT ONLY,  
OFFICE / DEN

3 BEDROOMS      551 SF      A-178-16

ALL SUBSEQUENT REVISION/ALTERATIONS TO THESE HOUSE  
 PLANS MUST BE SUBMITTED TO THE PCDOH FOR APPROVAL

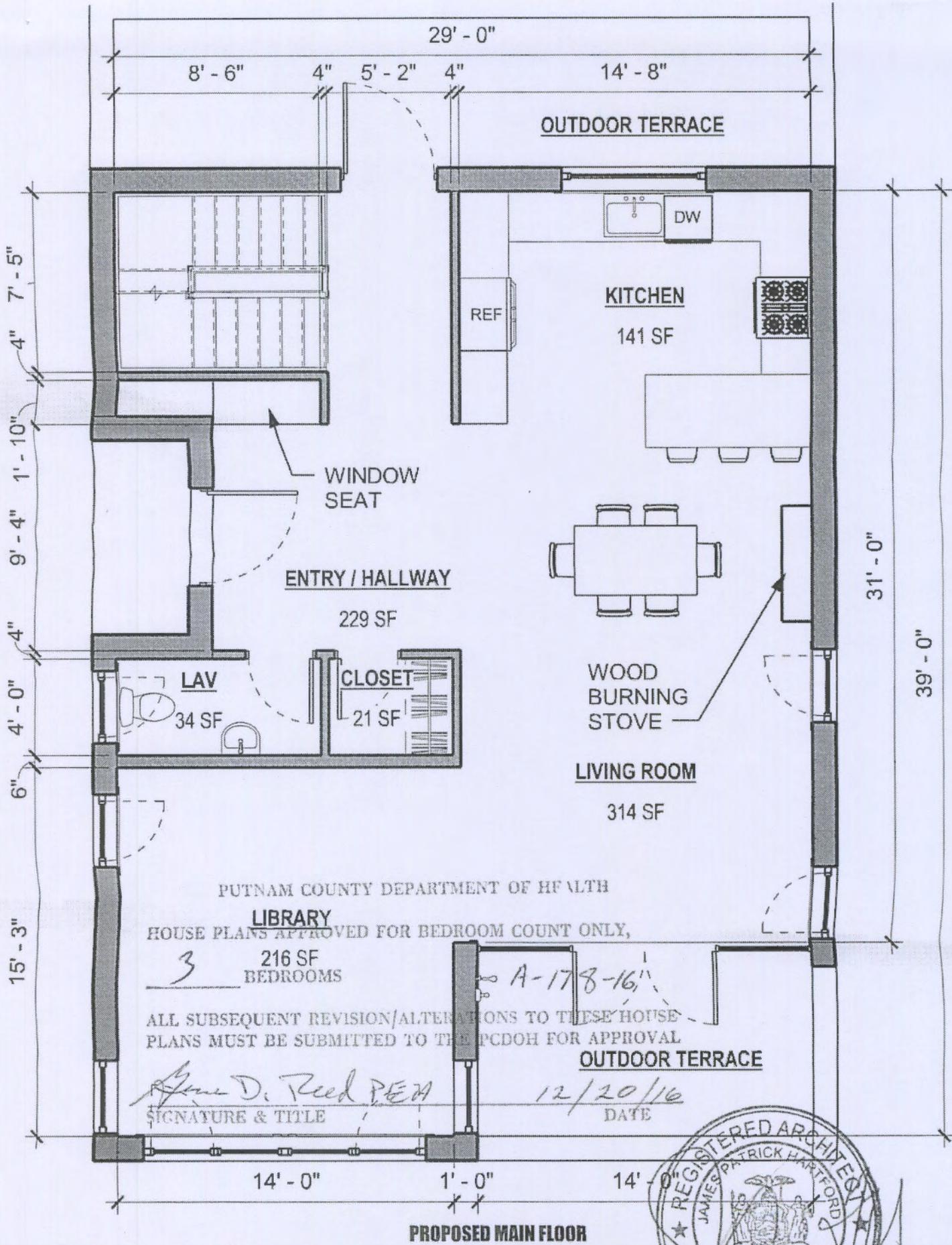
*Ann D. Reed PE19*      12/20/16  
 SIGNATURE & TITLE      DATE



**PROPOSED BASEMENT**

**BANKER MAIN HOUSE**

15 KINGS DOCK ROAD  
 GARRISON, NY 10524  
 TAX MAP #:81.-1-27



PROPOSED MAIN FLOOR

**BANKER MAIN HOUSE**

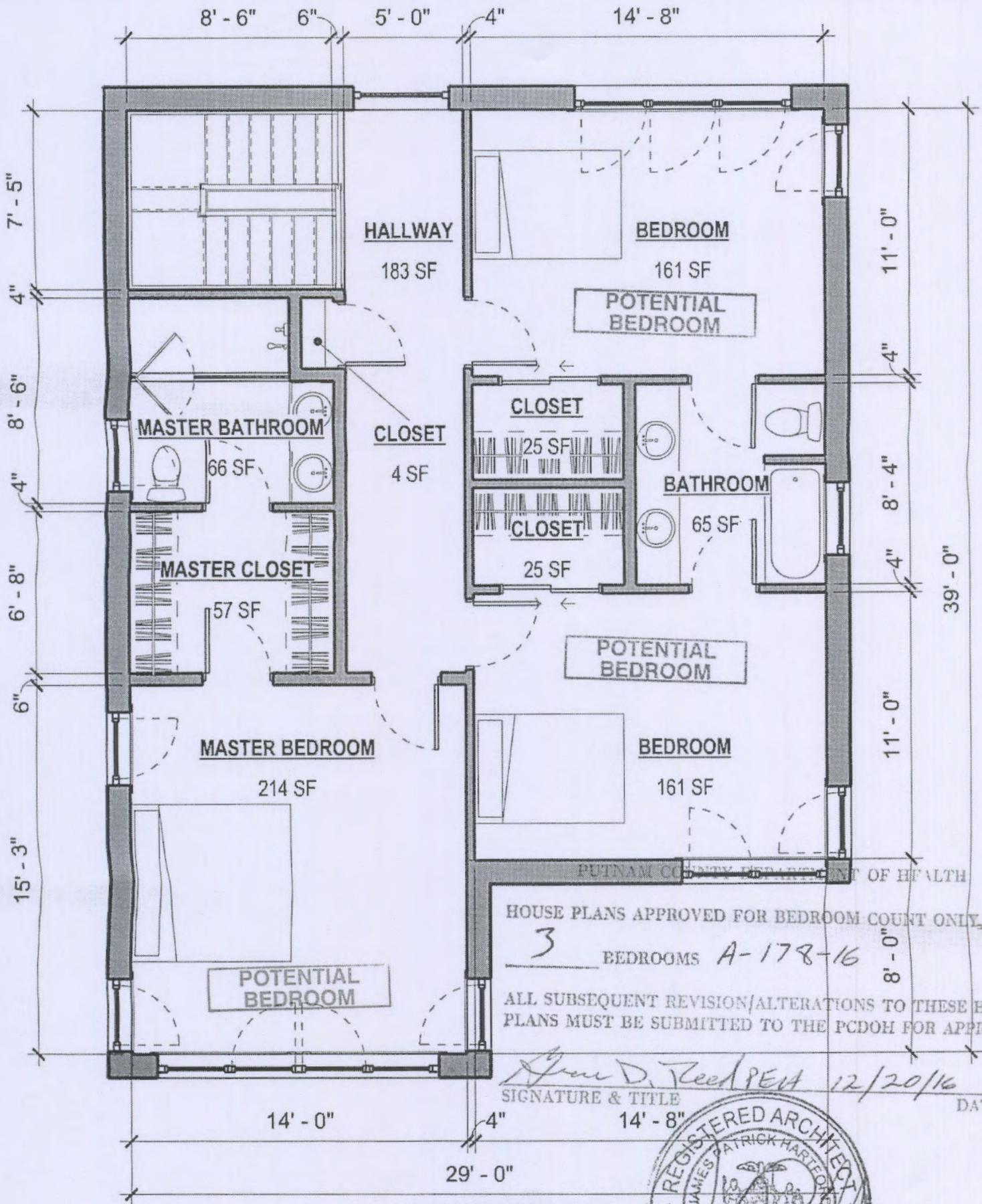
15 KINGS DOCK ROAD  
 GARRISON, NY 10524  
 TAX MAP #: 81.-1-27



**HD-05**

3/16" = 1'-0"

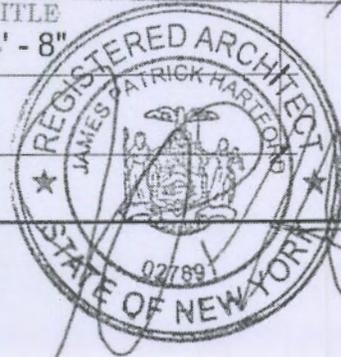
12/01/16



**PROPOSED SECOND FLOOR**

**BANKER MAIN HOUSE**

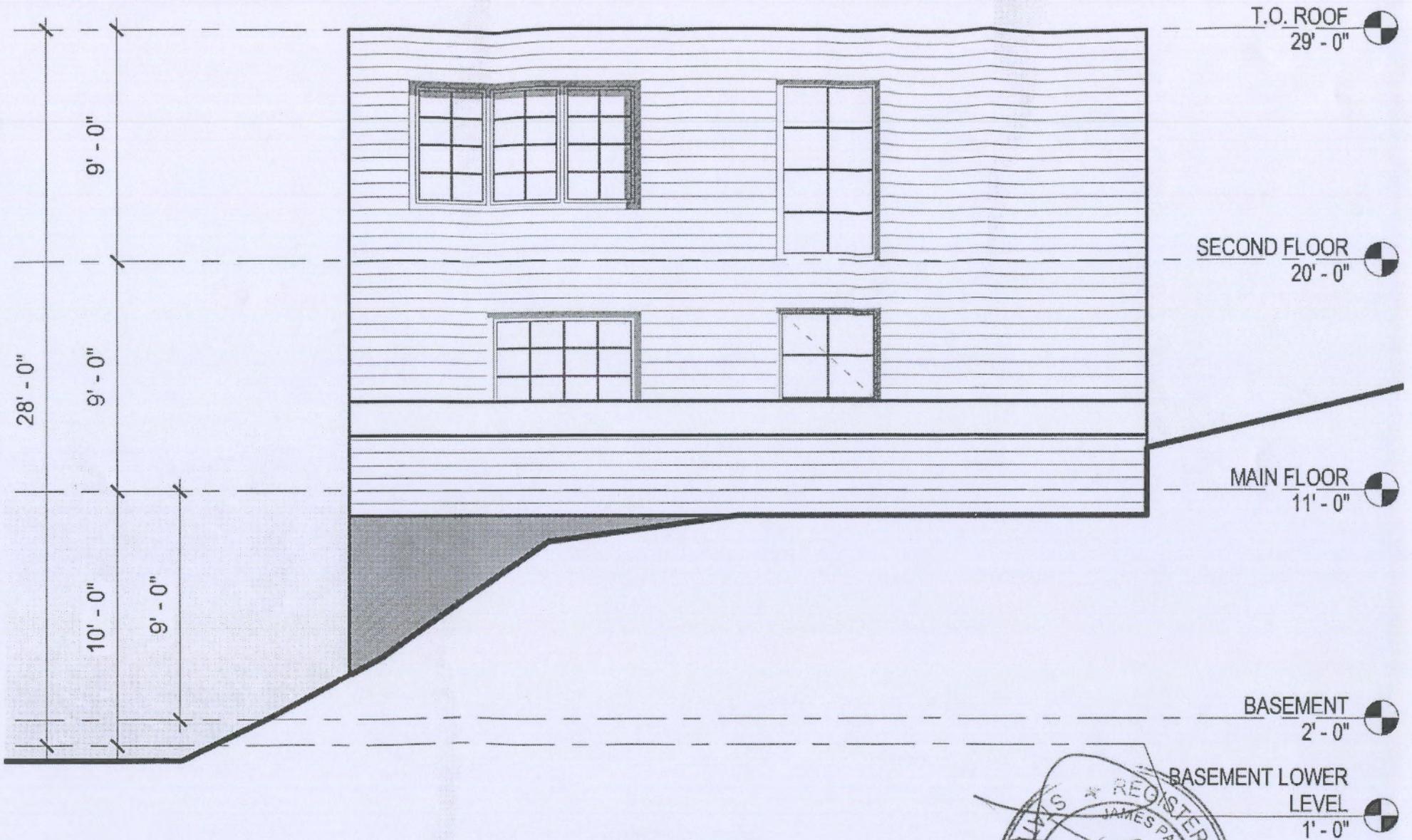
15 KINGS DOCK ROAD  
 GARRISON, NY 10524  
 TAX MAP #:81.-1-27



**HD-06**

3/16" = 1'-0"

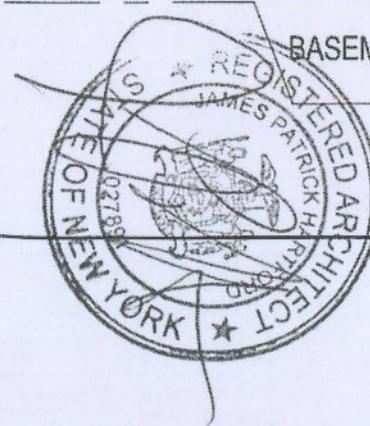
12/01/16



**PROPOSED NORTH ELEVATION**

**BANKER MAIN HOUSE**

15 KINGS DOCK ROAD  
 GARRISON, NY 10524  
 TAX MAP #:81.-1-27





PROPOSED EAST ELEVATION

**BANKER MAIN HOUSE**

15 KINGS DOCK ROAD  
GARRISON, NY 10524  
TAX MAP #: 81.-1-27



**HD-08**

3/16" = 1'-0"

12/01/16

*River*  
ARCHITECTS

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www.riverarchitects.com / 845.265.2254



**PROPOSED SOUTH ELEVATION**

**BANKER MAIN HOUSE**

15 KINGS DOCK ROAD  
 GARRISON, NY 10524  
 TAX MAP #:81.-1-27



**HD-09**

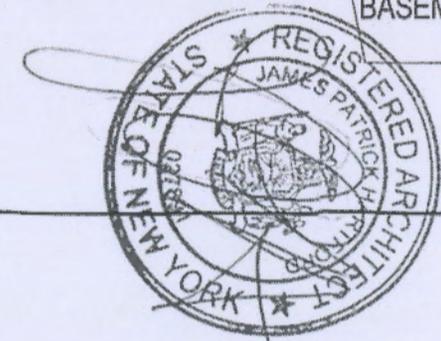
3/16" = 1'-0"  
 12/01/16



**PROPOSED WEST ELEVATION**

**BANKER MAIN HOUSE**

15 KINGS DOCK ROAD  
 GARRISON, NY 10524  
 TAX MAP #:81.-1-27

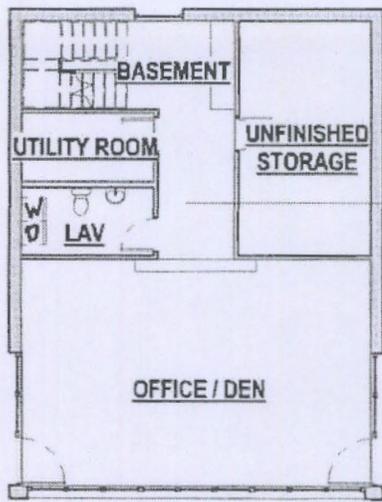


**HD-10**

3/16" = 1'-0"

12/01/16

**River**  
 ARCHITECTS  
 8 Marion Avenue Suite 3, Cold Spring, NY  
 www.riverarchitects.com / 845.265.2254



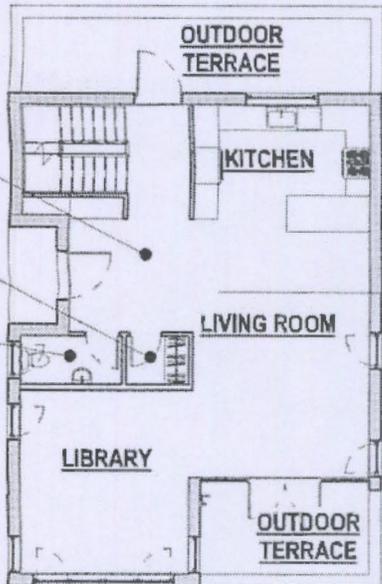
**BASEMENT**  
841 SF

RENTABLE SQUARE FOOTAGE	
Level	Area

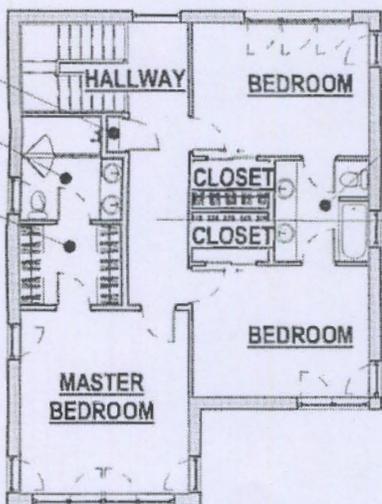
BASEMENT LOWER LEVEL	841 SF
MAIN FLOOR	971 SF
SECOND FLOOR	1011 SF
<b>TOTAL SQUARE FOOTAGE</b>	<b>2823 SF</b>

**NOTE:**

2 STORY RESIDENCE WITH  
BASEMENT - SPRINKLER SYSTEM  
NOT REQ'D



**MAIN FLOOR**  
971 SF



**SECOND FLOOR**  
1011 SF

**RENTABLE SQUARE FOOTAGES**

**BANKER MAIN HOUSE**

15 KINGS DOCK ROAD  
GARRISON, NY 10524  
TAX MAP #:81.-1-27



**HD-11**

1/16" = 1'-0"

12/01/16



8 Marion Avenue Suite 3, Cold Spring, NY  
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# ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

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

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Douglas H. Banker and Sarah G. Banker				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15 Kings Dock Road				Company NAIC Number:	
City Garrison		State New York		ZIP Code 10524	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Parcel Number 81.-1-28					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>N 41-20-55.1</u> Long. <u>W 73-57-24.6</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number <u>3</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>1,198.7</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>0</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Town of Philipstown 361026			B2. County Name Putnam County		B3. State New York
B4. Map/Panel Number 36079C0177	B5. Suffix E	B6. FIRM Index Date 03/04/2013	B7. FIRM Panel Effective/ Revised Date 03/04/2013	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 7
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					



# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15 Kings Dock Road			Policy Number:
City Garrison	State New York	ZIP Code 10524	Company NAIC Number

## SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: PID# LX1104 Vertical Datum: NAVD 1988

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

NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

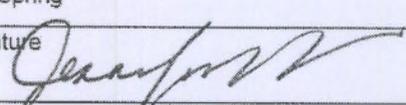
Check the measurement used.

- |   |             |  |
|---|-------------|--|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | <u>1.0</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>2.0</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | _____       | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | _____       | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>1.0</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>9.0</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>20.0</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | <u>9.0</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name Jennifer W. Reap	License Number 50389
Title President	
Company Name Badey & Watson Surveying & Engineering, P.C.	
Address 3063 Route 9	
City Cold Spring	State New York
	ZIP Code 10516
Signature 	Date 01/09/2017
	Telephone (845) 265-9217



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

Comments (including type of equipment and location, per C2(e), if applicable)

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15 Kings Dock Road			Policy Number:
City Garrison	State New York	ZIP Code 10524	Company NAIC Number

## SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

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

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

Property Owner or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments

Check here if attachments.



# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008  
Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 15 Kings Dock Road			Policy Number:
City Garrison	State New York	ZIP Code 10524	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

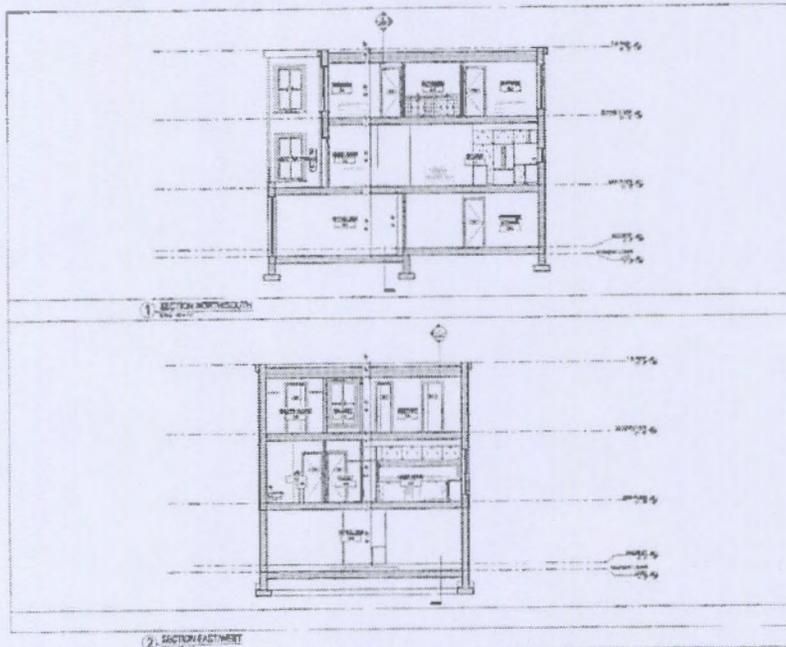


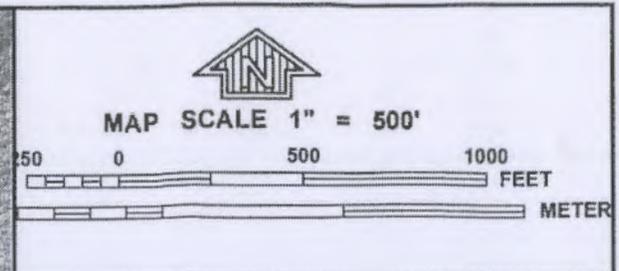
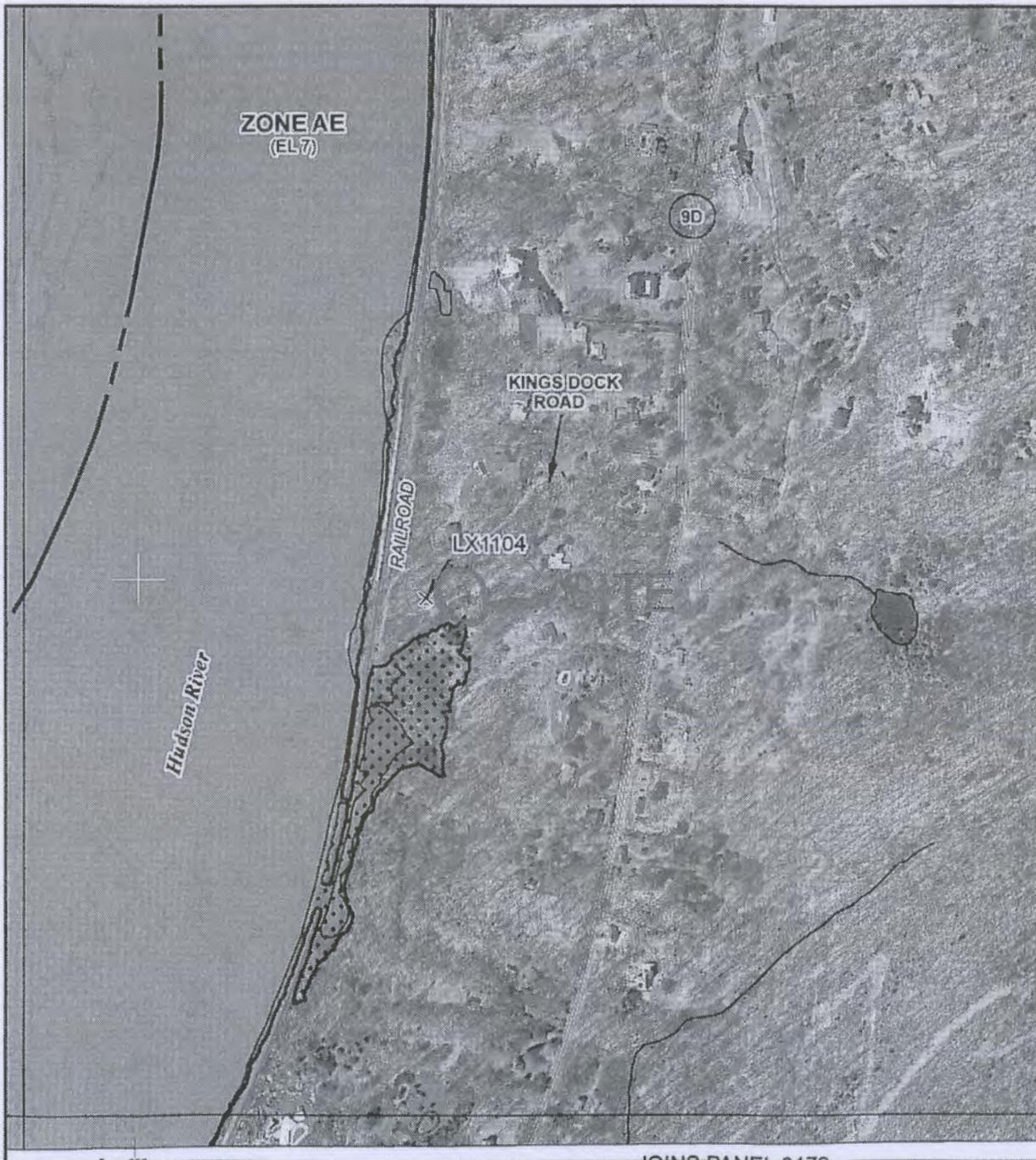
Photo One

Photo One Caption North/South & East/West Sections



Photo Two

Photo Two Caption Site plan



**NFIP**  
**NATIONAL FLOOD INSURANCE PROGRAM**

PANEL 0177E

**FIRM**  
**FLOOD INSURANCE RATE MAP**  
**PUTNAM COUNTY,**  
**NEW YORK**  
 (ALL JURISDICTIONS)

PANEL 177 OF 256  
 (SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
PHILIPSTOWN, TOWN OF	361026	0177	E

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.



**MAP NUMBER**  
**36079C0177E**

**EFFECTIVE DATE**  
**MARCH 4, 2013**

Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.msc.fema.gov](http://www.msc.fema.gov)

**APPLICATION FOR WETLANDS PERMIT**

**Note to Applicant:**

Submit the completed application to the appropriate permitting authority. The application for Wetlands Permit should be submitted simultaneously with any related application (e.g., subdivision approval, site plan approval, Special Use Permit, etc.), being made to the permitting authority.

(Office Use Only)

Application # 17-284 Permitting Authority \_\_\_\_\_  
Received by: \_\_\_\_\_  
Date 1-31-17  Conservation Board  
Fee 285.00 \_\_\_\_\_  
500.00 Wetlands Inspector

Pursuant to Chapter 93 of the Code of the Town of Philipstown, entitled "Freshwater Wetlands and Watercourse Law of the Town of Philipstown" (Wetlands Law), the undersigned hereby applies for a Wetlands Permit to conduct a regulated activity in a controlled area.

1. Owner: Name: H.J. ROSSOUW  
Address: 374 SPROUT BROOK RD GARRISON 10524  
Telephone: 845-736-6370

If Corporation, give names of officers:  
\_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_

2. Name of Agent (must have letter of permission from property owner .)  
(Applicant must be owner of the land. The Application may be managed an authorized agent of such person.)

Mailing Address: N/A.

Telephone: \_\_\_\_\_

3. Location of Proposed Activity:

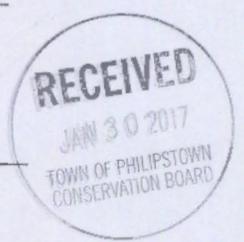
Tax Map #: 90-8-2-6

Square footage of Controlled Wetland Area Affected: 400 Sq Ft.

Square footage of soil disturbed by the entire project: 400 Sq Ft.

4. Type of Activity: (See list of regulated activities)

WELL.



5. Other permit(s) required and agency or agencies responsible for granting such permits such as but not limited to P.C.B.O.H, N.Y.D.E.C, Army Core of Engineers, EPA, DOT, Building Dept. Planning Board, and Z.B.A.
- 

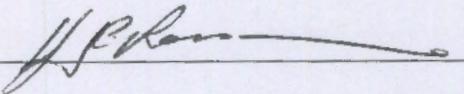
6. Each copy of this application shall be accompanied by:

- a. A detailed description of the proposed activity and a comparison of the activity to the criteria for approval specified in §93-8 of the Wetlands Law. (See below)
- b. A completed short form environmental assessment form (*included in the application folder*)
- c. A map prepared by a licensed surveyor, landscape architect or engineer showing:
  1. The controlled area(s) wetland buffer zone 100 feet from the edge of any wetlands, lakes, ponds or streams on the site;
  2. Any wetland or watercourse therein and the location thereof;
  3. The location, extent, and nature of the proposed activity.
- D. The names of claimants of water rights in the wetland or watercourse of whom the applicant has record notice and the names and addresses of all owners of record of properties abutting and directly across from the proposed activity as shown on the latest tax record.

(Note: Any map, plat or plan showing the above information that is required to be submitted for any other permit or approval in connection with the regulated activity, and that is acceptable to the Permitting Authority, may be used.)

Date: 26th January 2017.

Signature of Applicant:



## Check List for a Complete Wetlands Permit Application

\*\*\*\*All supporting materials must be submitted to the Conservation Board/Wetland Inspector two weeks prior to the scheduled meeting date to allow to distribution to members before the meeting.

Ten (10) sets for major applications and two (2) sets for minor applications of all material as follows:

### Application Form

Environmental Assessment Form (short form), unless other agencies have requested the long form in which case that should be presented.

A plan of your site drawn by a design professional, such as an engineer, architect or land surveyor. All plans must show: wetlands delineation boundaries, 100' buffer zones from wetlands and watercourses, location of access route for construction activities, the location of any well or sewage or wastewater disposal system and, in most cases, the topography of the site. Site plans must include all proposed work within the 100 'foot buffer zone and be full sized for easy reading by CB members

Copies of correspondence from all other agencies including, but not limited to; DEC, DOT, EPA, PCBOH, ACOE or other Town of Philipstown agencies; Town Board, Planning Board, ZBA, Building Dept.

A written outline of the proposed activity, along with a construction scenario that should include specific items such as the estimated quantities of material excavated or the amount of fill required and the total square footage of soil to be disturbed.

Names and addresses of all owners of record of properties abutting and directly across from the proposed activity as shown on the latest tax record as well as the names of claimants of water rights in the wetland or watercourse of whom the applicant has record notice.

A detailed description of the proposed activity and a comparison of the activity to the criteria for approval specified in §93-8 of the Wetlands Law.

### § 93-8. Criteria for approval. [Amended 11-1-2001 by L.L. No. 4-2001]

A. The following are criteria applicable to the approval of permits for Proposed regulated activities in controlled areas:

- (1) The activity will not have a substantial adverse effect upon the natural function and benefits of a wetland or watercourse as set forth in § 93-2B;
- (2) The activity will not substantially change the natural channel of a watercourse or substantially inhibit the dynamics of a watercourse system;
- (3) The activity will not result in the degrading or pollution of waters.
- (4) The activity will not increase the potential for flooding.
- (5) Sufficient provision has been made for control of pollution, erosion, Siltation and sedimentation during and after conduct of the activity;
- (6) No practicable alternative location is available on the subject parcel.
- (7) No additional technical improvements or safeguards can reasonably be added to the plan or activity which would minimize the impact on a controlled area; or
- (8) The activity will alleviate or remove a hazard to the public health or safety.

B. In evaluating the criteria and the determination required in § 93-8A above, the Council and the permitting authority shall utilize the objective methodology for determining the functions of a wetland set out in the publication entitled "A Rapid Procedure for Assessing Wetland Functional Capacity," dated May 1998, by Magee and Hollands, a copy of which is on file in the office of the Town Clerk of the Town of Philipstown. [Amended 7-14-2005 by L.L. No. 2-2005]

# 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: <span style="font-size: 1.2em; font-family: cursive;">RESIDENTIAL WELL</span>			
Project Location (describe, and attach a location map): <span style="font-size: 1.2em; font-family: cursive;">15 Ox Yoke Rd.</span>			
Brief Description of Proposed Action: <span style="font-size: 1.2em; font-family: cursive;">SHORT ACCESS ROAD. " WELL LINE WELL.</span>			
Name of Applicant or Sponsor: <span style="font-size: 1.2em; font-family: cursive;">H.J. ROSSOW</span>		Telephone: <span style="font-size: 1.2em; font-family: cursive;">845-736-6370</span>	
		E-Mail: <span style="font-size: 1.2em; font-family: cursive;">JROSSOW@OPTIMUM.NE.</span>	
Address: <span style="font-size: 1.2em; font-family: cursive;">374 SPROUTBROOK RD.</span>			
City/PO: <span style="font-size: 1.2em; font-family: cursive;">GACRISON</span>		State: <span style="font-size: 1.2em; font-family: cursive;">VT</span>	Zip Code: <span style="font-size: 1.2em; font-family: cursive;">10524</span>
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			NO <input type="checkbox"/>
			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<span style="font-size: 1.2em; font-family: cursive;">1.2</span> acres	
b. Total acreage to be physically disturbed?		<span style="font-size: 1.2em; font-family: cursive;">400</span> acres <span style="font-size: 1.2em; font-family: cursive;">59 FT.</span>	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<span style="font-size: 1.2em; font-family: cursive;">—</span> acres	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<div style="display: flex; justify-content: space-between;"> <span>9Urban</span> <span>9Rural (non-agriculture)</span> <span>9Industrial</span> <span>9Commercial</span> <span><input checked="" type="checkbox"/> 9Residential (suburban)</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span>9Forest</span> <span>9Agriculture</span> <span>9Aquatic</span> <span>9Other (specify): _____</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span>9Parkland</span> </div>			





<p>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)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p>NO</p> <p><input checked="" type="checkbox"/></p>	<p>YES</p> <p><input type="checkbox"/></p>

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

Applicant/sponsor name: H.J. Rossouw Date: 26th January 2018

Signature: [Signature]

90.8-2-5  
FULLE DOUGLAS  
FULLE HENRY  
434 OSCAWANA LAKE RD

90.8-2-37  
BUI TAN  
DAO HANH  
16 OX YOKE RD

90.8-2-11  
PHILLIPS JASMIN  
2 FERRIS DR  
GARRISON, NY 10524

90.8-2-23  
MCKOY NORIS  
MCKOY JANICE  
33 WINSTON LN

90.8-2-19  
ZIMMER BARBARA  
147 HUDSON AVE  
PEEKSKILL, NY 10566

90.8-2-35  
KEENE MARY  
14 OX YOKE RD  
GARRISON, NY 10524

90.8-2-7  
KELLY DONALD  
KELLY LOUISE  
217 BUTTONWOOD AVE

90.8-2-8  
GAINER RUBEN  
SEGARRA WANDA  
30 WINSTON LN

90.8-2-10  
BROWN DAVID & MELINDA  
NEWMAN KEITH & CHERYL  
38 WINSTON LN

90.8-2-4  
WHITE DONETTA  
7 OX-YOKE RD  
GARRISON, NY 10524

90.8-2-6  
ROSSOUW J  
374 SPROUT BROOK RD  
374 Sprout Brook Road  
GARRISON, NY 10524

90.8-2-34  
SCHLITT RONALD  
SCHLITT SUSAN  
18 OX YOKE RD

90.8-2-9  
SEGARRA WANDA  
GAINER RUBEN  
30 WINSTON LN

90.8-2-22  
RIECKHOFF PAUL  
39 WINSTON LN  
GARRISON, NY 10524

90.8-2-36  
TOWN OF PHILIPSTOWN  
238 MAIN ST  
COLD SPRING, NY 10516

90.8-2-7  
Jose Lotaro  
33 Hobbells Dr.  
NY Kisco NY 10549



**PUTNAM COUNTY DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH SERVICES**

**APPLICATION TO CONSTRUCT A WATER WELL**

please print or type

PCHD Permit # PH 05-07

<b>Well Location:</b>	Street Address: <u>15 OX LAKE ROAD</u>	Town/Village: <u>Phillipstown</u>	Tax Grid #
			Map <u>90.8</u> Block <u>2</u> Lot(s) <u>6</u>
<b>Well Owner:</b>	Name: <u>H.J. ROSSOUW</u>	Address: <u>374 SPRING BROOK ROAD</u> <u>GARRISON NY 10524</u>	
<b>Use of Well:</b>	<input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Air/Cond/Heat Pump
<b>1-primary</b>	<input type="checkbox"/> Business	<input type="checkbox"/> Farm	<input type="checkbox"/> Test/Monitoring
<b>2-secondary</b>	<input type="checkbox"/> Industrial	<input type="checkbox"/> Institutional	<input type="checkbox"/> Standby
<b>Amount of Use</b>	Yield Sought <u>5</u> gpm	# People Served <u>4</u>	Est. of Daily Usage <u>600</u> gal.
<b>Reason for Drilling</b>	<input type="checkbox"/> Replace Existing Supply	<input type="checkbox"/> Test/Observation	<input type="checkbox"/> Additional Supply
	<input checked="" type="checkbox"/> New Supply (new dwelling)	<input type="checkbox"/> Deepen Existing Well	
<b>Detailed Reason for Drilling</b>	<u>NEW HOUSE</u>		
<b>Well Type</b>	<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven	<input type="checkbox"/> Gravel
			<input type="checkbox"/> Other
Is well site subject to flooding?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is well located in a realty subdivision?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Name of subdivision	<u>COIT VILL MAP# 10</u>	Lot No.	<u>7</u>
Water Well Contractor:	<u>BRIDGEMAN</u>	Address:	<u>17 GARRISON NY</u>
Is Public Water Supply available to site?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Name of Public Water Supply:	Town/Village _____		
Distance to property from nearest water main:	_____		
Proposed well location & sources of contamination to be provided on separate sheet/plan.			
Date: <u>12/15/15</u>	Applicant Signature: <u>[Signature]</u>		

**PERMIT TO CONSTRUCT A WATER WELL**

This permit to construct one water well as set forth above, is granted under provisions of Article 10 of the Putnam County Sanitary Code and Subpart 5-2 of Part 5 of the New York State Sanitary Code and provided that within thirty (30) days of the completion of water well construction, the applicant or their designated representative shall: 1) Pump the well until the water is clear. 2) Disinfect the well in accordance with the requirements of the Putnam County Health Department. 3) Submit a Well Completion Report on a form provided by the Putnam County Health Department. During all well drilling operations, the applicant and/or well driller shall take appropriate action to assure that any and all water and waste products from such well drilling operations be contained on this property and in such a manner as not to degrade or otherwise contaminate surface or groundwater.

**APPROVED FOR CONSTRUCTION:** This approval expires two years from the date issued unless construction of the well has been completed and inspected by the PCHD and is revocable for cause or may be amended or modified when considered necessary by the Public Health Director. Any revision or alteration of the approved plan requires a new permit. Well to be constructed by a water well driller certified by Putnam County.

Date of Issue 6/2/16  
Date of Expiration 6/2/18  
**Permit is Non-Transferrable**

Permit Issuing Official: [Signature]  
Title: Assistant Public Health Director  
**RECEIVED**  
JAN 30 2017  
TOWN OF PHILLIPSTOWN

White copy - HD file; Yellow copy - Building Inspector; Pink copy - Owner; Orange copy - Well driller