

Village of Mamaroneck Building Department 169 Mt. Pleasant Avenue

Mamaroneck, N.Y. 10543

914-777-7731 Fax 914-777-7792

www.village.mamaroneck.ny.us

RECEIVED

□Other

☐ HCZM

Planning

Zoning

□ BAR

Permit# Application# **Building Permit Application** of construction documents must be submitted with application 1.Project address: KDO, MAMARONECK Section Zone ☐ Other ☐ 2 Family ☐ Single Family Existing use Residential: ☐ Other ☐ 2 Family ☐ Single Family Intended Use: Other **Restaurant** ☐ Business ☐ Retail Multi Family, how many? Existing Use Commercial: □ Other □ Business Restaurant ☐ Retail ☐ Multi Family, how many? Intended Use: ☐ No (Please Specify) Is this a Non-Conforming Use: Application Fee: - 5000° Estimated cost: 4000 FROM AND SIDES OF RESTAURANT. 2. Description of work: RE-PAINT ALL INTERIOR SRE-FINISH WOOD FLOORS AND BAR. ITALIANA CORP. 3. Owners name and address: CHMELECKI ASSET MANAGEMENT, INC (406) HOW BOSTON POST RD MANAROMECK, N.Y. 10543 Phone#: 914 329 - 1760 1. Applicant name and address: ROSA CUCINA ITALIAMA CORP. ANGELO MERENDA PRESIDENT AHGELOMERENDAS @ GMAIL. COM 1146 NORTHAVE NEW ROCHELLE, N.Y. 10804 E-Mail Address: Phone#; Applicants Signature 5. Applicant Name (Please print): □ Addition MO 3. Is this a new residential house? Alteration □ Addition □No X Yes 7.1s this a new commercial building? Septic system? (if applicable, attached Health Dept. approval) 3. Municipalsewer? If yes, please file a Flood Development Permit 3. Is this structure with in the flood plain? If yes, please file a wetland activity permit. 10. Is this project with in the tidal wetland or buffer? If yes, please file a wetland activity permit. 11. Is this project with in the fresh water wetland or buffer? ☐ If yes, please file a SWPPP permit per section 294. 12. Is there a disturbance of land greater than 1,000 square feet? Other ☐ Rocky ☐ Steep Incline Hilly **X**Flat 13. Topography: 14. Do you require any other board approvals? If yes please check which boards you require bellow.

Name of Applicant)		Page 1 of 2	
15. Architect/Engineer name and address:			
			Phone#:
16. Contractor name and address:	THE	PAIMTI	
17. Electrician name and address:	ELE	CTRICA	License # : Expiration date : Phone # :
3. Plumbers name and address:	RLO	1 MBE,	License #: Expiration date: Phone#:
is the (Owner, Contractor, Agent or Corporate or perform or have performed the said work are true to the best of my knowledge and believe application in the plans and specification filed to the best of my knowledge. Do not write	te officer) nd to file this ap ef, and that the I therewith and	pplication: that a work will be pe in full complian	ce with New York State Codes.
Received By: Residential Application Fee 85 Commercial Application Fee 9 License: Insurance:	5.00 \$140.00		Residential Permit Fee Commercial Permit Fee CO or cc Fee
2 Sets of drawings:EAS:			
☐ Flood Plain Development App	plication if req	luired	

Building Inspector Reviewed:

Building Inspector Approval: