

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

DEC 29 2022

Permit#

SCANNED

Application# 27 - 0813	Permit#
Building Per	mit Application
NOTE: Two sets of construction docum	nents must be submitted with application.
1.Project address: 212 JENSEN AV.	
0.5 Section 4	Block 31 Lot 61
Zone Section Section Existing use Residential: Single Family	☐ 2 Family ☐ Other
Intended Use: Single Family	☐ 2 Family ☐ Other
Existing Use Commercial: Multi Family, how many?	□ Retail □ Restaurant □ Business □Other
Intended Use: Multi Family, how many?	☐ Retail ☐ Restaurant ☐ Business ☐ Other
Is this a Non-Conforming Use: Yes No (Pleas	
Estimated cost: \$35000 = Application	Fee: Permit Fee:
	Lance hours a SECOMO FLOOR
2. Description of work:	DONT THIS HODITION SECOND !
REAR YARD ADDITION AT 154 FLOOR	
3. Owners name and address:	
morella rammez	
212 JENSEN AV	
MAMPRONECE MY	Phone#: 954-805-0476
1 - 11-20	
1. Applicant name and address: VASILIOS SICAMANCAS	
23 500714 140	DHI(NC@ OPTONLINE.NET
HAMPISON AV. N.Y 10528	E Mail Address.
	Phone#: 914 - 774-9206 Applicants Signature:
5. Applicant Name (Please print):	Applicants digitalities
MSILIOS SAMAWERS 3. Is this a new residential house? ☐ Yes ☐ Yes	
7 to this a new commercial building? ☐ Yes ✓NO	
3. Municipalsewer? 165 Septic system? (if applic	able, attached Health Dept. approval)
). Is this structure with in the flood plain?	If yes, please file a Flood Development Permit
10. Is this project with in the tidal wetland or buffer? NO	If yes, please file a wetland activity permit.
wetland or huffer? NO	☐ If yes, please file a wetland activity permit.
12. Is there a disturbance of land greater than 1,000 square feet	?NO If yes, please life a SWFFF permit per section
10 Tanagraphy: WElat Hilly Rocky	☐ Steep Incline
14. Do you require any other board approvals? If yes please	check which boards you require bellow.
☐ BAR ☐ Zoning ☐ Planning	☐ HCZM ☐ Other

15. Architect/Engineer name and address:

203-981-8930 mobile

Marl	k W.Fritz Architects AIA	Phone #_203-880-9800 CT
16.	Contractor name and address:	
Vas	silios Skamangas	
	COVER H.I. INC	License # R. Evelention Date:
	OUTH RO HARRISON NY.	License # & Expiration Date:
		Phone # 914-774-9206
17.	Electrician name and address:	
		License # & Expiration Date:
		Phone #
18.	Plumbers name and address:	
		License # & Expiration Date:
		Phone #
19.	State of New York	
25.	County of Westchester	
	•	being duly sworn deposes and says
773		- ,
He / Sh	ne is the	of said property, and duly authorized
To perf	form or have performed the said work and to	file this application: that all statements contained in this application are
true to	the best of my knowledge and belief, and the ons and specification filed therewith and in ful	at the work will be performed In the manner set forth in the application in
Sworn	to before me this day or	20 (Signature of Notary)
		rite below this line office use only
Receiv	red By:	
∩ Res	idential Application Fee: \$75.00	Residential Permit Fee
	nmercial Application Fee \$100.00	Commercial Permit Fee
	ense Received	○ Certificate Fee Paid
◯ Insu	urance Certificates	 2 Sets of Drawings Floodplain Development Application if Required
<u> </u>		
Reviev	wed by:	Dated:
Appro	ved by:	Dated: