



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



SCANNED

Permit#

Application# 23-0710

Building Permit Application

NOTE: Two sets of construction documents must be submitted with application.

1. Project address: 317 MAMARONECK DR.

Zone C-2 Section 9 Block 19 Lot 14A1
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 (Please Specify)

Estimated cost: \$14,000

Application Fee: \$892

Permit Fee: \$2382

2. Description of work: MILL WORK, HAND SWK, BUILD counter, install customer counter
install ice machine, Partition wall for bubble tea shop

3. Owners name and address: ANTHONY DIROMA
7 PINE LD
WHITE PLAINS NY 10710

Phone#: 914-270-4845

4. Applicant name and address: SEAN CHRISTIE
107 DELAWARE RD
YONKERS NY 10710

schristie@christiepropertygroup.com
E-Mail Address:
Phone#: 914-218-1331

5. Applicant Name (Please print): SEAN CHRISTIE

Applicants Signature:

3. Is this a new residential house? ☐ Yes ☒ No ☐ Addition ☐ Alteration
7. Is this a new commercial building? ☐ Yes ☒ No ☐ Addition ☐ Alteration
3. Municipal sewer? YES Septic system? (if applicable, attached Health Dept. approval)
9. Is this structure with in the flood plain? NO ☐ 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.
11. Is this project with in the fresh water wetland or buffer? 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 file a SWPPP permit per section 294.
13. Topography: ☒ Flat ☐ Hilly ☐ Rocky ☐ Steep Incline ☐ Other
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:

Phone#: 914-444-5152

16. Contractor name and address:

STEVEN SPOERLE
SPOERLE CONTRACTING INC
24 CHRISTINE CT
STORMVILLE NY 12582

License#: WC-25459-H12

Expiration date: 10/10/24

Phone # ~~914-253-9455~~ 914-444-5152

17. Electrician name and address:

~~A PERFECT ELECTRICIAN~~
A PERFECT ELECTRICIAN 10801
44 POTTER AVE, NEW ROCHELLE NY

License #: 204 12/31/23

Expiration date:

Phone #: ~~914-636-5220~~

8. Plumbers name and address:

Domenic Bucci
PRONTO PLUMBING
PO BOX 175
YONKERS NY 10704

License #: 1501

Expiration date: 12/31/23

Phone #: 914-255-6153

19.

I SEAN CHRISTIE

is the OWNER of said property, and duly authorized
(Owner, Contractor, Agent or Corporate officer)

to perform 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 that the work will be performed in the manner set forth in the application in the plans and specification filed therewith and in full compliance with New York State Codes.

Do not write below this line office uses only

Received By: _____

- ☐ Residential Application Fee 85.00
☐ Commercial Application Fee \$140.00
☐ License:

- ☐ Residential Permit Fee
☐ Commercial Permit Fee
☐ CO or cc Fee

- ☐ Insurance:
☐ 2 Sets of drawings:
☐ EAS:
☐ Flood Plain Development Application if required

Building Inspector Reviewed: _____

Building Inspector Approval: _____