



## ZONING BOARD OF APPEALS NOTICE OF DISAPPROVAL

RECEIVED  
MAR 25 2025  
VILLAGE OF GREENPORT  
BUILDING DEPARTMENT

236 THIRD STREET  
GREENPORT, NY 11944

Tel: (631)477-0248  
Fax: (631)477-1877

[villageofgreenport.org](http://villageofgreenport.org)

**MAYOR**  
KEVIN STUESSI  
EXT 215

**TRUSTEES**  
MARY BESS PHILLIPS  
DEPUTY MAYOR

PATRICK BRENNAN  
LILY DOUGHERTY-JOHNSON

JULIA ROBINS

**TREASURER**  
ADAM BRAUTIGAM  
EXT. 217

**VILLAGE CLERK**  
CANDACE HALL  
EXT 214

FROM: Village of Greenport Building Department  
APPLICANT: Magdalena Paragas  
ADDRESS: 432 First Street  
SCTM: 1001:004:007:002.1  
DATE: March 6, 2025

The building permit application for the RESTORATION AND LIFT OF THE EXISTING ACCESSORY STRUCTURE at the above-mentioned premises has been denied for the following reasons:

### HOUSE:

- The proposed FRONT YARD SETBACK is 15.7' where 30' is required; therefore a 14.3' variance is required.
- The proposed NORTH SIDE YARD SETBACK is 2.6' where 10' is required; therefore a 7.4' variance is required.

### ACCESSORY STRUCTURE:

- The proposed NORTH SIDE YARD SETBACK is 1.4' where 5' is required; therefore a 3.6' variance is required.
- The proposed EAST SIDE YARD SETBACK is 2.0' where 5' is required; therefore a 3.0' variance is required.
- The proposed max height is 26.10' where 15' is required; therefore a 11.10' variance is required.

### LOT COVERAGE:

- The proposed LOT COVERAGE is 39.2% where 30% is required; therefore a 9.2% variance is required.

### SHOWER PAD:

- The proposed SETBACK is 3.8' where 5' is required; therefore a 1.2' variance is required.

  
George Pfriend  
Building Inspector



# **ZONING BOARD OF APPEALS APPLICATION**

## **AREA VARIANCE**

236 Third Street, Greenport, New York, 11944

(631) 477-0248

[www.villageofgreenport.org](http://www.villageofgreenport.org)

**Date of Application** 03/17/25

All information below is to be completed by the applicant. This completed application is to be accompanied by the Notice of Disapproval, Copies of Covenants and/or Restrictions, where applicable, Environmental Assessment Form, building plans showing elevations, setbacks, floor plans, room dimensions, details of footings and foundation, and species of lumber and quality of material, where applicable.

### **THE OWNER OF THE PROPERTY IS: (PLEASE PRINT CLEARLY)**

Magdalena	Paragas			
First Name	Last Name	Business Name, if applicable		
432 1st Street	Greenport	NY	11944	
Mailing Address	City/ Town/ Village	State	Zip	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED].com	
Phone #	E-Mail Address			

### **CONTACT PERSON (if different from owner)**

*The person to receive all correspondence:*

Brooke	Epperson	AMP Architecture		
First Name	Last Name	Business Name, if applicable		
PO Box [REDACTED]	Mattituck	NY	11952	
Mailing Address	City/ Town/ Village	State	Zip	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
Phone #	E-Mail Address			

**IF ANYONE OTHER THAN THE OWNER COMPLETES THIS APPLICATION, WRITTEN CONSENT FROM THE OWNER MUST BE SUBMITTED WITH THIS APPLICATION.**

### **Location:**

Suffolk County Tax Map Number: 1001 Section: 04 Block: 07 Lot 2.1

Street Address: 432 1st Street Greenport, New York, 11944

**Zoning District:** ☐ WC ☐ R1 ☒ R2 ☐ PD ☐ CR ☐ CG

**Is property located within the Historic District?** ☒ Yes ☐ No



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The Code Official reviewed and denied an application dated 06/11/24 for a Building Permit for the location specified on this application.

### **Provisions of the Zoning Code appealed:**

*(Indicate Article, Section and Subsection of Zoning Code by numbers)*

Article: V & VI Section: 150 - 12, 13 Subsection: \_\_\_\_\_

### **Type of appeal made for:**

☒ A Variance to the Zoning Code or Zoning Map.

☐ An interpretation of the Village Code Article: \_\_\_\_\_ Section: \_\_\_\_\_ Subsection: \_\_\_\_\_

**Has a prior appeal been made at any time with respect to this property?** ☐ Yes ☒ No ☐ I Don't Know

*If yes, please provide the date appeal was made:* \_\_\_\_\_.

### **Project Description:**

#### **For Demolition of Existing Building Areas:**

Please describe area being removed:

Inside Existing Accessory Building: Removal of interior partitions & existing slab at grade beneath

#### **New Construction Areas (New Dwelling or New Addition/Extensions)**

Dimensions of First Floor (Addition/Extension): Entry Stoop, 4'x20.4' and 4'x9.2'; Outdoor Shower, 6'x3'

Dimensions of Second Floor: N/A

Height (from finished grade to top of ridge): 26 - Feet, 10 - Inches

**Is basement or lowest floor area being constructed?** ☒ Yes ☐ No

*If yes, please provide height (above ground) measured from natural existing grade to first floor:*

1 - Feet, 4 - Inches.



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### **Project Description: (CONTINUED)**

#### **Proposed Construction Description: (Alteration or Structural Changes)**

Number of floors BEFORE alterations: 1 1/2

Describe General Characteristics BEFORE alterations:

Existing 1 1/2 story wood frame accessory barn with slab on grade

Number of floors AFTER Alterations: 1 1/2

Describe General Characteristics AFTER alterations:

Lift barn to add structural foundation wall w/ crawlspace; Accessory barn to be restored with new interior finishes

#### **Calculations of Building Areas and Lot Coverage:**

Existing Square Footage of Building(s) on this property: 2,497.1 SF

Proposed Increase in Building Coverage: 173 SF

Square Footage of this Lot: 6,814.9 SF

Percentage of Coverage of this Lot by Building Area: 39.2 %

#### **Purpose of New Construction:**

*Please describe:*

Restore existing accessory barn and make structurally sound





## **ZONING BOARD OF APPEALS APPLICATION**

### **AREA VARIANCE**

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#### **Area Variance Reasons for Appeal:**

Please answer in detail. *Additional sheets may be submitted with preparers signature.*

**Will an undesirable change occur in the characteristics of the neighborhood or will a detriment to nearby properties be created by the granting of this area variance?**

No, the existing accessory barn was established in a district of Greenport which has many similar accessory buildings built within the same time period

**Can the benefit sought by the Applicant be achieved by another method, feasible for the Applicant to pursue, other than an Area Variance?**

No, the existing accessory barn is located on the property as to not meet required setbacks or lot coverage limitations

**Is the requested Area Variance substantial?**

No, existing footprint of accessory barn is proposed to remain

**Will the requested Area Variance have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district?**

No, the proposed work restore a delapidating building and make it safe

**Was the alleged difficulty self-created, which consideration shall be relevant to the decision of the Zoning Board of Appeals, but shall not necessarily preclude the granting of the Area Variance?**

No, the existing accessory barn has existing non-conforming zoning

**Are there Covenants or Restrictions concerning this land? [ ] Yes [✓] No**

*If yes, please furnish copies.*

# AFFIDAVIT

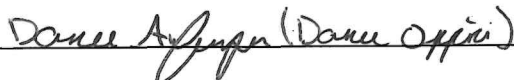
Village of Greenport     )  
Town of Southold         )  
County of Suffolk        ) ss  
State of New York        )

I swear that to the best of my knowledge and belief that the statements contained in this application, together with the plans and specifications submitted, are true and complete statements of proposed work to be done on the described premises and that all provisions of the Building Code, Zoning Code, and all other laws pertaining to the proposed work shall be complied with, whether specified of not, and that such work and inspections are authorized by the owner. The Village of Greenport is hereby granted permission to enter the property listed as the "Location" for the purposes of inspecting my property for a site visit. I understand that if approved, this Area Variance will be granted and accepted on condition that the provisions of Federal, State and Local rules and regulations, and any additional requirements of the Area Variance are complied with. Any violation of all applicable codes, or deviations from the approved plans may result in the immediate revocation of this Area Variance & legal action taken against me. No responsibility rests upon the Village of Greenport, Code Enforcement, the Fire Marshal or the Fire Department by reason of this application and permit.

Sworn to be before this 17 day  
of March 20 25

Signature \_\_\_\_\_

  
Owner or Applicant

  
\_\_\_\_\_  
Notary Public, Suffolk County, New York

DARCEE AUFENANGER NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01AU0019644 Qualified in Suffolk County Commission Expires January 9, 2028
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## **AUTHORIZATION**

(Where the Applicant is not the Owner)

I, Magdalena Paragas residing at 432 1st Street, Greenport  
(Print property owner's name) (Mailing Address)

Magdalena Paragas do hereby authorize AMP Architecture  
(Agent)

\_\_\_\_\_ to apply on my behalf to the

Village of Greenport Zoning Board of Appeals

Magdalena Paragas  
(Owner's Signature)

11/25/2023  
(Date)

Magdalena Paragas  
(Print Owner's Name)

617.20  
Appendix B  
Short Environmental Assessment Form

**Instructions for Completing**

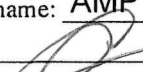
**Part 1 - Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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.

<b>Part 1 - Project and Sponsor Information</b>							
Name of Action or Project: <b>Paragas Accessory Structure Restoration</b>							
Project Location (describe, and attach a location map): <b>432 1st Street, Greenport</b>							
Brief Description of Proposed Action: <b>Proposed lift and restoration of existing accessory structure</b>							
Name of Applicant or Sponsor: <b>AMP Architecture</b>		Telephone: 631-██████████					
		E-Mail: <b>aportillo@amparchitect.com</b>					
Address: <b>PO Box ██████████</b>							
City/PO: <b>Mattituck</b>		State: <b>NY</b>	Zip Code: <b>11952</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.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NO</td> <td style="text-align: center;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<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: <b>Greenport Village Building and Historical</b>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NO</td> <td style="text-align: center;">YES</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	NO	YES	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NO	YES						
<input type="checkbox"/>	<input checked="" type="checkbox"/>						
3.a. Total acreage of the site of the proposed action?		<u>0.16</u> acres					
b. Total acreage to be physically disturbed?		<u>0.04</u> acres					
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>0.16</u> 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							



5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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:			
<input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> 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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES	
If Yes,	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES			
If Yes, briefly describe: _____			
Proposed gutters connected to proposed drywells			

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: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
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: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
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: _____	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<b>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b> Applicant/sponsor name: <u>AMP Architecture (Anthony Portillo)</u> Date: <u>3/17/25</u> Signature: <u></u>		

**Part 2 - Impact Assessment.** The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

**Part 3 - Determination of significance.** The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
<div> <div>Name of Lead Agency</div> <div>Date</div> </div>	
<div> <div>Print or Type Name of Responsible Officer in Lead Agency</div> <div>Title of Responsible Officer</div> </div>	
<div> <div>Signature of Responsible Officer in Lead Agency</div> <div>Signature of Preparer (if different from Responsible Officer)</div> </div>	

**PRINT**