

236 THIRD STREET **GREENPORT, NY 11944**

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

villageofgreenport.org

MAYOR

KEVIN STUESSI

DATE: JUNE 27, 2025 EXT 215

TRUSTEES

MARY BESS PHILLIPS DEPUTY MAYOR

PATRICK BRENNAN

LILY DOUGHERTY-JOHNSON

JULIA ROBINS

TREASURER ADAM BRAUTIGAM EXT. 217

VILLAGE CLERK

ZONING BOARD OF APPEALS NOTICE OF DISAPPROVAL

FROM: VILLAGE OF GREENPORT BUILDING DEPARTMENT

APPLICANT: DAVID MURRAY

ADDRESS: 518 FIRST STREET

SCTM: 1001-004-003-006

BUILDING FILE #05-007

The building permit application for the ACCESSORY STRUCTURE FOUNDATION at the above-mentioned premises has been denied for the following reasons:

- The proposed SOUTHSIDE SETBACK is 1.6' where 5' is required; therefore a 3.4' variance is required

CANDACE HALL George Pfriender EXT 214 Building Inspector **Building Inspector**



AREA VARIANCE

236 Third Street, Greenport, New York, 11944

(631) 477-0248

www.villageofgreenport.org

Date of Application 07/09/2025

All information below is to be completed by the applicant. This completed application is to be accompanied by the Notice of ENATIMENT

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 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 T | HE PROPERTY | IS: (PLEASE PRINT | CLEARLY) | | |
|--|------------------|------------------------------|------------|----------|------------|
| | | Donald C. Wiss | | | |
| Donald | Wiss | | ~ | ruct | |
| First Name | Last Name | - | Business | Name, if | applicable |
| | | | | | |
| | | C: /T /X':II | | State | Zip |
| Mailing Address | | City/ Town/ Village | | State | Дip |
| | | | .com | | |
| | | E-Mail Address | | | |
| Phone # | | E-Wall Address | | | |
| CONTACT PERSO | | owner) | | | |
| The person to receive a | Murray | | Murray | / Desig | n & Build |
| First Name | Last Name | Business Name, if applicable | | | |
| | | Greenport | 2 | NY | 11944 |
| 449 Main Street | | Greenport | | | |
| Mailing Address | | City/ Town/ Village | | State | Zip |
| | | | | | |
| Phone # | | E-Mail Addre | | | |
| IF ANYONE OTHER THAN THE OWNER COMPLETES THIS APPLICATION, WRITTEN CONSENT FROM THE OWNER MUST BE SUBMITTED WITH THIS APPLICATION. | | | | | |
| Location: | | | | | |
| George Control of Control | | 201 9 1 | D11 | 3 | Lot 6 |
| 1 | | .001 Section: 4 | - Block: | | Lut |
| Street Address: 5 | 18 First Street | | Greenport, | New Y | ork, 11944 |
| Zoning District: | IWC []RI M | R2 []PD []CR [] | CG | | |
| Is property located | d within the His | toric District? MYe | s []No | | |



AREA VARIANCE

236 Third Street, Greenport, New York, 11944 (631) 477-0248 www.villageofgreenport.org

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

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

Foundation is Already Powed

Is the requested Area Variance substantial?

MI No

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

NO

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?

ND

Are there Covenants or Restrictions concerning this land? [] Yes No If yes, please furnish copies.



AREA VARIANCE

236 Third Street, Greenport, New York, 11944
(631) 477-0248

www.villageofgreenport.org

| Project Description: (CONTINUED) |
|---|
| Proposed Construction Description: (Alteration or Structural Changes) |
| Number of floors BEFORE alterations:/ |
| Describe General Characteristics BEFORE alterations: |
| As per pictures, very bad |
| Number of floors AFTER Alterations:l |
| Describe General Characteristics AFTER alterations: |
| Calculations of Building Areas and Lot Coverage: Existing Square Footage of Building(s) on this property: 352 SF Proposed Increase in Building Coverage: SF Square Footage of this Lot: 4,856 SF |
| Square rootage of this Bott. B. O. S. |
| Percentage of Coverage of this Lot by Building Area: Purpose of New Construction: Please describe: Re-Construction A Historic Shed |



AREA VARIANCE

236 Third Street, Greenport, New York, 11944

(631) 477-0248

www.villageofgreenport.org

| The Code Official reviewed and denied an application dated for a Building Permit for the location specified on this application. NOD dated 06/27/25 |
|---|
| Provisions of the Zoning Code appealed: (Indicate Article, Section and Subsection of Zoning Code by numbers) |
| Article: Section: 150 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 M 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: Historic Barn Re-Build |
| O Mary Daviding or Novy Addition/Extensions) |
| New Construction Areas (New Dwelling or New Addition/Extensions) |
| Dimensions of First Floor (Addition/Extension): 29x 21.5 |
| Dimensions of Second Floor: W/A |
| Dimensions of Second Floor: W/A Height (from finished grade to top of ridge): // - Feet, // - Inches |
| Is basement or lowest floor area being constructed? [] Yes M No If yes, please provide height (above ground) measured from natural existing grade to first floor: - Feet, - Inches. |

N. J. MAZZAFERRO, P.E.

Greenport, N.Y. 11944
Phone - 51

November 11, 2024

Consulting Engineer
Design, Construction, Inspection

Murry Design & Build 449 Main Street Greenport, N.Y. 11944

Re: 518 First Street, Greenport, NY 11944

SCTM #1001-4.-3-6

Inspection - Garage Structure - Rear Yard

On November 5, 2024, as requested, I inspected the construction for the garage restoration at the noted location. The inspection covered the new foundation work and the existing framing and exterior enclosure.

The inspection results are:

- The existing building was braced/jacked to provide support for the new foundation work
- The new foundation was designed to be slab on grade accordance with the Code.
- The existing framing is unconventional and randomly installed, structurally inadequate and does not comply with the current building codes.
- As existing, the building is structural unstable.
- The existing framing is in extremely poor condition and has failed in localized areas. The framing has exceeded its lifecycle.
- The existing building frame, if left in the current condition, would result in a structure that remains unstable and not compliant with the codes.
- It is highly probable that the existing frame will not be able to be reconnected to the new foundation in a code compliant manner and the structural stability will be questionable.

Recommendation:

- You should be prepared to rebuild/recreate the existing framing system to have a structurally stable building at the end of the project.
- Based upon the approval of the HPC, the historic nature of the building needs to be preserved and that is a focus on the exterior look of the structure.
- It is highly probable from an engineering perspective that a new framing system will be needed to have a code compliant safe and usable garage structure.

Nicholas Mazzaferro

NJ. Mazzaferro, PE

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: 518 First Street: Shed Re-Build | | |
| Project Location (describe, and attach a location map): 518 First Street, Greenport, NY 11944 | | |
| Brief Description of Proposed Action: | | |
| Rebuild historic property shed according to plans approved Board of Appeals, since deemed structurally unsound; (reb | by Village of Gree uild in kind with ne | nport Historic w framing) |
| Name of Applicant or Sponsor: Dave Murray; Murray Design & Build | Telephone: 631.477. | 0075 |
| Dave Murray, Murray Design & Bulld | E-Mail: dmurray@mu | rraydesignbuild.com |
| Address: 449 Main Street | | |
| City/PO: Greenport | State: NY | Zip Code: 11944 |
| 1. Does the proposed action only involve the legislative adoption of a plan, local administrative rule, or regulation? Village of Greenport Building Department; 2 | l law, ordinance, Zoning, Historic Boards; | NO YES |
| If Yes, attach a narrative description of the intent of the proposed action and the en may be affected in the municipality and proceed to Part 2. If no, continue to quest | nvironmental resources thation 2. | at 🔲 🗸 |
| 2. Does the proposed action require a permit, approval or funding from any other | r government Agency? | NO YES |
| If Yes, list agency(s) name and permit or approval: | | |
| 3. a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? | acres acres | |
| 4. Check all land uses that occur on, are adjoining or near the proposed action: Urban Rural (non-agriculture) Industrial Commercia Forest Agriculture Aquatic Other(Spec | | ban) |

Page 1 of 3 SEAF 2019

| 5. | Is the proposed action, | NO | YES | N/A |
|-------|--|-----------------|--------------|-----|
| | a. A permitted use under the zoning regulations? | | | |
| | b. Consistent with the adopted comprehensive plan? | | | |
| 6. | Is the proposed action consistent with the predominant character of the existing built or natural landscape? | | NO | YES |
| | | | | |
| 7. | Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? | | NO | YES |
| IfY | Yes, identify: | | | |
| 8. | a. Will the proposed action result in a substantial increase in traffic above present levels? | | NO | YES |
| 0. | b. Are public transportation services available at or near the site of the proposed action? | | | |
| | | - | | |
| | c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? | | Ш | |
| 9. | Does the proposed action meet or exceed the state energy code requirements? | } | NO | YES |
| If th | he proposed action will exceed requirements, describe design features and technologies: | | П | |
| - | | | Ш | |
| 10. | Will the proposed action connect to an existing public/private water supply? | $\neg \uparrow$ | NO | YES |
| | If No, describe method for providing potable water: | | \square | |
| | | | <u> </u> | |
| 11. | Will the proposed action connect to existing wastewater utilities? | | NO | YES |
| | If No, describe method for providing wastewater treatment: | | <i>7</i> | |
| | | | \square | |
| | a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or distriction is listed on the National or State Register of Historic Places, or that has been determined by the | rt . | NO | YES |
| Cor | mmissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the te Register of Historic Places? | ; | | |
| | | | | |
| arcl | b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for haeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory? | | L <u>¥</u> J | |
| 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 V | YES |
| | b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? | | | H |
| IfY | es, identify the wetland or waterbody and extent of alterations in square feet or acres: | | | |
| | | | | |
| | | | | |

Page 2 of 3

| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: | | |
|---|------------------|-------|
| ☐Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional | | |
| □Wetland □ Urban ☑ Suburban | | |
| 15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or | NO | YES |
| Federal government as threatened or endangered? | V | |
| 16. Is the project site located in the 100-year flood plan? | | VEC |
| 16. Is the project site located in the 100-year flood plan? | NO | YES |
| | | Ш |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? | NO | YES |
| If Yes, | $ \mathbf{V} $ | |
| a. Will storm water discharges flow to adjacent properties? | | |
| b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? | | |
| If Yes, briefly describe: | | |
| | | |
| | | |
| 18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? | NO | YES |
| If Yes, explain the purpose and size of the impoundment: | | |
| | | Ш |
| 19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste | 210 | VEC |
| management facility? | NO | YES |
| If Yes, describe: | | |
| | | Ш |
| 20.Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or | NO | YES |
| completed) for hazardous waste? | NO | 1 E.5 |
| If Yes, describe: | ∇ | |
| | | |
| I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BE | ST OF | |
| MY KNOWLEDGE | | |
| Applicant/sponsor/name: Dave Murray; Murray Design & Build Date: 08/06/25 | | |
| Applicant/sponsor/name: Dave Murray; Murray Design & Build Date: 08/06/25 Signature: Title: President | | |
| orginature. | | |

PRINT FORM

Page 3 of 3

| Agei | icy Use Only [If applicable] |
|---------|------------------------------|
| roject: | _ |
| Date: | |
| L | |

Short Environmental Assessment Form Part 2 - Impact Assessment

Part 2 is to be completed by the Lead Agency.

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? | | |
| 2. | Will the proposed action result in a change in the use or intensity of use of land? | | |
| 3. | Will the proposed action impair the character or quality of the existing community? | | |
| 4. | Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)? | | |
| 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? | | |
| 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? | | |
| 7. | Will the proposed action impact existing: a. public / private water supplies? | | |
| | b. public / private wastewater treatment utilities? | | |
| 8. | Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources? | | |
| 9. | Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)? | | |
| 10. | Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems? | | |
| 11. | Will the proposed action create a hazard to environmental resources or human health? | | |

| | | | 1 |
|-------|-----|---------|---|
| | N 1 | FORM | |
| 1 1/1 | | 1 OLVIA | |

Page 1 of 2

SEAF 2019

| Agency | Use Only [If applicable] |
|----------|--------------------------|
| Project: | |
| Date: | |
| | |

Short Environmental Assessment Form Part 3 Determination of Significance

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.

| 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. 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. | | | | |
|--|---|--|--|--|
| Name of Lead Agency | Date | | | |
| Print or Type Name of Responsible Officer in Lead Agency | Title of Responsible Officer | | | |
| Signature of Responsible Officer in Lead Agency | Signature of Preparer (if different from Responsible Officer) | | | |

PRINT FORM

Page 2 of 2

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.

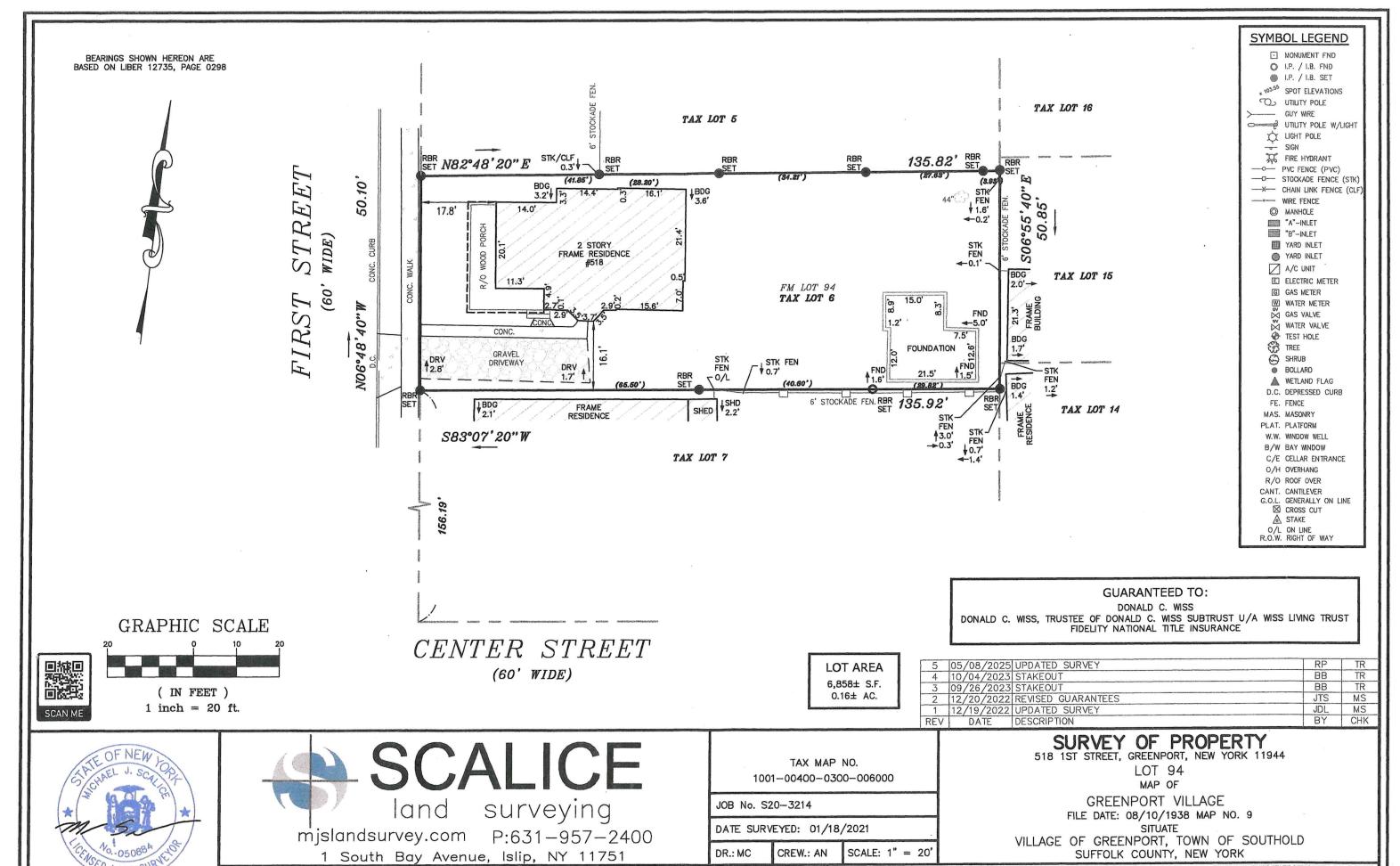
Sworn to be before this 5th day of Aur WH 20 27

Signature_

Owner or Applicant

Notary Public, Suffelk County, New York

BRITTANY A CONRAD
Notary Public, State of New York
Reg. No. 01CO6245154
Qualified in Suffolk County
Commission Expires July 18, 20



(1) UNAUTHORIZED ALTERATION OR ADDITION TO THIS SURVEY WAP BEARING A LICENSED LIND SURVEYOR'S SEAL E. A MOLATION OF SECTION 7200, SUB-DAYSON 2, OF NEW YORK STATE EDUCATION LINE () ONLY BELLINORS SURVEY WAP BEARING A LICENSED LIND SURVEYOR'S SEAL E. A MOLATION OF SECTION 7200, SUB-DAYSON 2, OF NEW YORK STATE EDUCATION LINE () ONLY BELLINORS SET SURVEY WAP BEARING A LICENSED LIND SURVEYOR'S SEAL E. A MOLATION OF SECTION 7200, SUB-DAYSON STATE EDUCATION LINE OF SECTION 7200, SUB-DAYSON STATE EDUCATION LINE () ONLY BELLINORS SET SURVEY WAP IS FRENCHED IN THE SURVEY WAP IS FRENCHED IN THE SURVEY WAS PERFORMED. () THE CONTROLLED OF THE SURVEY WAS PERFORMED WITH THE COMPANY TO THE CONTROLLED ON THIS DESIGNATION OF PROFESSIONAL AND OF THIS SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF SECTION PROFESSION AND AND THIS DESIGNATION OF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD AND THE CONTROLLED OF THIS SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD AND ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD, IF MY, MY NOT SESSION ON ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD, IF MY, MY NOT SESSION ON ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD OF WAY OF RECORD, IF MY, MY NOT SESSION ON ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD OF WAY OF RECORD, IF MY, MY NOT SHOWN AN ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION OF RECORD OF WAY OF RECORD, IF MY, MY NOT SHOWN AN ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION. OF RECORD OF WAY OF RECORD, IF MY, MY NOT SHOWN AN ADDRESSED AND ARE NOT GUARANTEED. (1) IF THE SURVEY WAS PERFORMED WITH A SPECIAL POPULATION. OF RECORD OF WAY OF RECORD OF RECO