

Agenda

City of Middletown Planning Board

January 3, 2019

7:00 PM to 10:00 PM

Common Council Chambers

Meeting called by: Anthony Capozella, Planning Board Chairman

Clerk: Martina Tu, Clerk

Members: John Naumchik, Nicole Hewson, Dan Higbie, Vanessa Cid,
Anthony Capozella, Andy Britto, Dave Madden

Approval of December 5, 2018 minutes

Shai Malul
23-27 West Main Street
residential apartments

Yinfei Liu
8-10 East Main Street
a barber shop

New Inspiration
5 South Street
Herbalife show room

Abjo Realty Corp.
17-39 Midland Avenue Ext; Bld. #9
a distribution and warehousing facility

★ Amended ★

APPLICATION

PLANNING BOARD

City of Middletown, New York

Date deemed complete 11-3-18
Accepted by WCV

Date _____

Items 1, 2 and 3 are required to be completed

1. Address of Subject Property 23-27 West Main Street
Section 31 Block 10 Lot 15 Current Zoning District DMU
Building Existing X New _____

2. Owner of Property Robert Minor
Owner's Address 1670 Winding Oaks Way #201
City Naples State Florida Zip 34102

Phone numbers: Home: _____
Business: _____
Cell: _____

3. Applicant name Shari Maini
If different from Owner
Applicants Address 370 Willard Rd.
City Paramus State NJ Zip 07652

Phone numbers: Home: 201- _____
Business: _____
Cell: 201- _____
Fax: _____

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # 475-21.1 (F) (16)

Classification of Occupancy requested Multiple Dwelling (R-2)

Description of what you are requesting: Would Like To Add (1) Efficiency Apartment And (3) 2 Bedroom Apartments On The Third Floor And (1) 1 Bedroom Apartment And (3) 2 Bedroom Apartments On The Fourth Floor

Uses currently in property: First Floor – Restaurant (Existing) & Office (Existing)

Second floor – Apartments (Existing)

Third Floor – Vacant

Fourth Floor - Vacant

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area	475-21.1 (H)	7,500 SF	4,877 SF
Front yard	475-21.1 (J)	0	0
Rear yard	475-21.1 (J)	0	20.68'
Side yard	475-21.1 (J)	0	0
Side yard	475-21.1	0	0
Parking	UR-3 Table 1	14 Total Required	0

Answer this section only for multiple dwellings

Lot coverage 80.6%

Building height +/- 43.0 FT (Existing)

Open Space +/- 943 SF

Playlot 0

Livable floor area Efficiency – 629 SF; 1- Bedroom 629 SF (Min) 2- Bedroom 721 (Min)

Number of Bedrooms (1) Efficiency; (1) 1-Bedroom, (6) 2- Bedrooms

5. Nonconforming Use. In the area provided, list each use for which an expansion is sought and the reason therefore. State the current use and all conditions that presently exist and those that will be created. Refer to the excerpt from the Zoning Ordinance Section 475-44. Additional sheets may be attached if required.

6. Fence and/or Parking Nonconformance. In the area provided, list the reason(s) requested for all conditions which are not in conformance with the regulations. Indicated the requirement(s) and the amount of relief requested. Additional sheets may be attached if required.

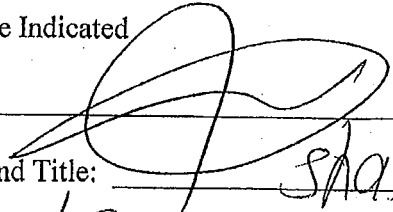
PARKING REQUIREMENTS ARE NOT IN CONFORMANCE
WITH REGULATIONS DUE TO LOT SIZE, RELIEF IS REQUESTED
FROM ALL OFF-STREET PARKING REQUIREMENTS.

7. Sign at the Place Indicated

Signature: _____

Printed Name and Title: _____

Date: _____


Shay Malik owner
9/20/18

OWNERS ENDORSEMENT

COUNTY OF ~~ORANGE~~ Kent
STATE OF ~~NEW YORK~~ Rhode Island

Robert D. Moor being duly sworn, deposes and

says that he/she resides at 1670 Winding Oaks Way #201, Naples

in the County of Collier and State of Florida and that he is the

owner in fee or OWNER of the Property

OFFICIAL TITLE

29-27 West Main St - Phillips Corporation which is the owner

in fee of the premises described in the foregoing application and that he has authorized

Maor Shelli to make the foregoing application for

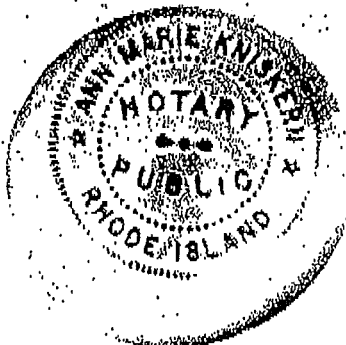
approval as described herein.

Sworn before me this 10 day of July 2018

Ann Marie Kniskern
NOTARY PUBLIC

ANN MARIE KNISKERN
NOTARY PUBLIC 118391
STATE OF RHODE ISLAND
MY COMMISSION EXPIRES JULY 09, 2021

Robert D. Moor
OWNERS SIGNATURE



APPLICATION

PLANNING BOARD

City of Middletown, New York

Date deemed complete _____

Date 11/1/2018

Accepted by _____

Items 1, 2 and 3 are required to be completed

1. Address of Subject Property 10 E Main st, Middletown, NY, 10940

Section 35 Block 5 Lot 3 Current Zoning District DMU

Building Existing New _____

2. Owner of Property Longwei Li

Owner's Address 1350 Boylston st, Apt. 1411

City Boston State MA Zip 02215

Phone numbers: Home: _____

Business: _____

Cell: _____

3. Applicant name Yinfei Liu

If different from Owner

Applicants Address 70 Greenway Ter

City Middletown State NY Zip 10941

Phone numbers: Home: _____

Business: _____

Cell: _____

Fax: _____

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # _____

Classification of Occupancy requested Barber shop

Description of what you are requesting: haircut/color

work time: Wednesday - Sunday
10AM - 6PM

Uses currently in property: empty

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

Answer this section only for multiple dwellings

Lot coverage _____

Building height _____

Open Space _____

Playlot _____

Livable floor area _____

Number of Bedrooms _____

Signature: Yinfei Lia

Printed Name and Title: Yinfei Lia

Date: 11/1/2018

OWNER'S ENDORSEMENT

COUNTY OF ORANGE
STATE OF NEW YORK

Longwei Li being duly sworn, deposes and says that

he/she resides at 1350 Boylston Street, Apt. 1411, Boston

in the County of Suffolk and State of Massachusetts and that he/she is the

owner in fee or _____ of the 10 E Main St, Middletown, NY
OFFICIAL TITLE 10940

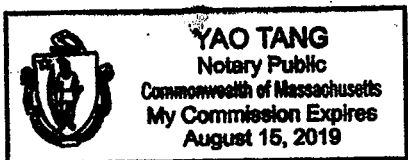
Corporation which is the owner in fee of the premises described in the foregoing application and that

he/she has authorized Yu Li Ying to make the foregoing

application for approval as described herein.

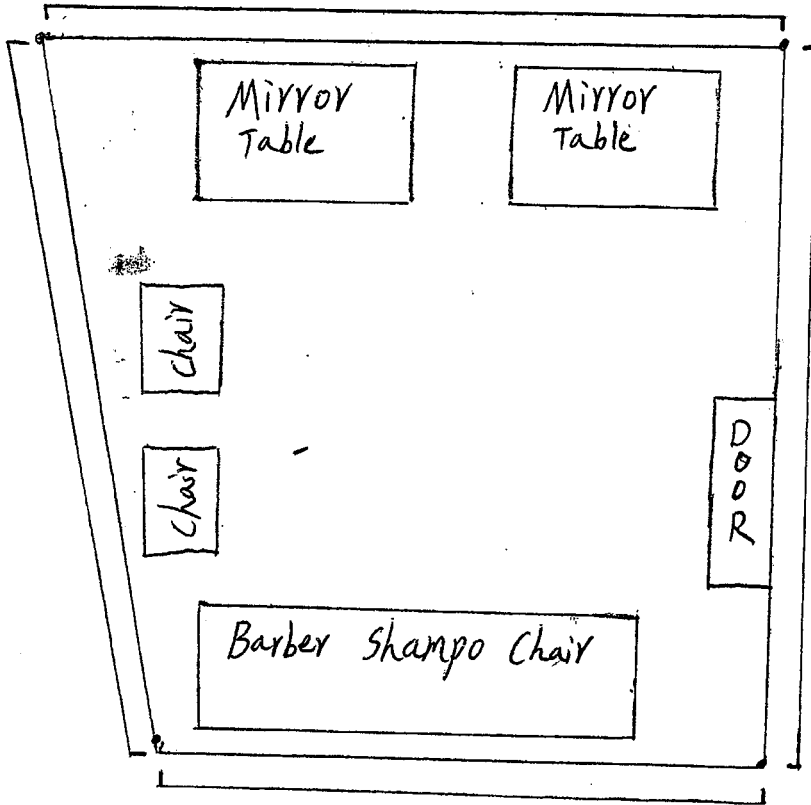
Sworn before me this 1st day of October, 2018

Yao Tang
Notary Public



Longwei Li
OWNER'S SIGNATURE

13' 3" | 160"
400 cm



12' 4" | 148"
375 cm

12' 6"
150"
380 cm

11' 7" | 140"
355 cm

APPLICATION

PLANNING BOARD

City of Middletown, New York

Date deemed complete _____

Date _____

Accepted by _____

Items 1, 2 and 3 are required to be completed

1. Address of Subject Property 5 South St

Section 35 Block 3 Lot 11

Current Zoning District DMU

Building Existing _____ New _____

2. Owner of Property PROMARK HOLDINGS

Owner's Address 9 SHERMAN A MIDDLETOWN

City MIDDLETOWN State NY Zip 10924

Phone numbers: Home: _____

Business: _____

Cell: _____

3. Applicant name Rosa Vega NEW INSPIRATION

If different from Owner

Applicants Address 6 Grant St

City Middletown State NY Zip 10940

Phone numbers: Home: _____

Business: _____

Cell: _____

Fax: _____

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # _____

Classification of Occupancy requested Show Room Herbalife

Description of what you are requesting: Invite People and give samples; Make Apointments and Explain the Benefits of Herbalife Nutrition

Uses currently in property: Vacancy

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

Answer this section only for multiple dwellings

Lot coverage _____

Building height _____

Open Space _____

Playlot _____

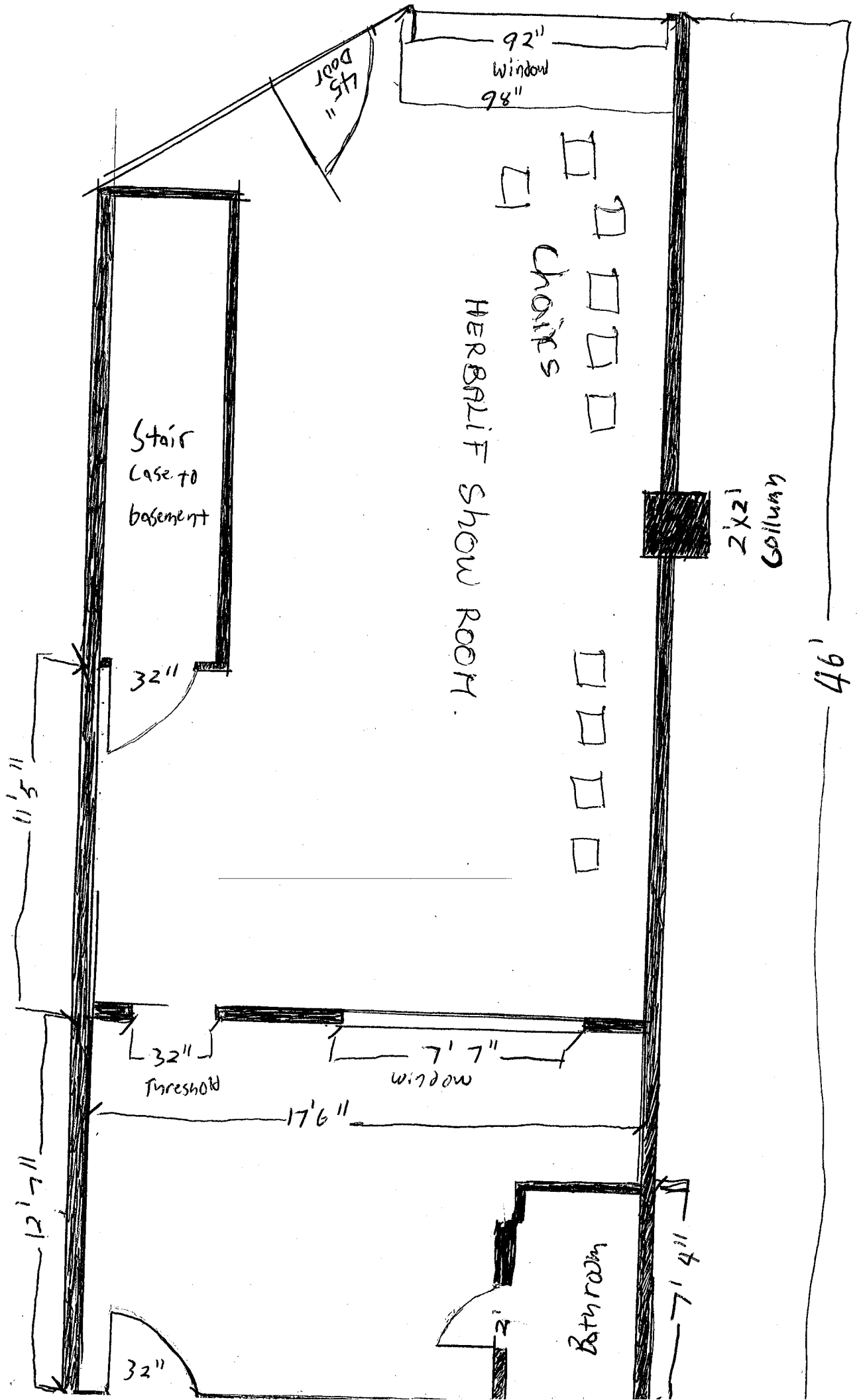
Livable floor area _____

Number of Bedrooms _____

Signature: Rosana Vega ;

Printed Name and Title: Rosana Vega;

Date: 11-25-18



45 inch Door

92" Window
98"

Chairs

HERBALIF SHOW ROOM.

2x2
Gullway

46'

Stair Case to basement

32"

11' 5"

32" Threshold

7' 7" window

17' 6"

Bathroom

7' 4"

32"

12' 7"

OWNERS ENDORSEMENT

COUNTY OF ORANGE

STATE OF NEW YORK

Anthony Proscia being duly sworn, deposes and says that he/she resides at
2 SHERIL IA in the county of Putnam and state of NY

And that he/she owner in fee or OWNER of the PRUMAC HOLDINGS

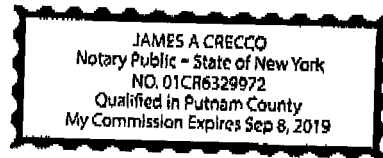
Corporation which is owner in fee of the premises described in foregoing application and that he/she
has the authorized NEW FM SPRATION to make the foregoing application for

approval as described herein

Sworn before me this 21 day of Dec 2018

Notary Public [Signature]

Owners signature [Signature]



APPLICATION

PLANNING BOARD

City of Middletown, New York

Date deemed complete _____
Accepted by _____

Date 8/30/2018

Items 1, 2 and 3 are required to be completed

1. Address of Subject Property 17-39 Midland Ave Ext. Building #9
Middletown, NY 10940
Section 9 Block 1 Lot 3.1 Current Zoning District I 2

Building Existing New _____

2. Owner of Property Isreal Eisdorfer / Abjo Realty Corp.

Owner's Address 23 Schunemunk rd #201
City Monroe State NY Zip 10950

Phone numbers: Home: _____
Business: _____
Cell: _____

3. Applicant name Master Deals USA Inc
If different from Owner

Applicants Address _____
City _____ State _____ Zip _____

Phone numbers: Home: _____
Business: _____
Cell: _____
Fax: _____

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # _____

Classification of Occupancy requested Amazon distribution

Description of what you are requesting: Amazon Distribution

Working hours: 9am-5pm Daily. Sunday and Saturday: closed.

Uses currently in property: Movie Studio

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

Answer this section only for multiple dwellings

Lot coverage	
Building height	
Open Space	
Playlot	
Livable floor area	
Number of Bedrooms	

5. **Nonconforming Use.** In the area provided, list each use for which an expansion is sought and the reason therefore. State the current use and all conditions that presently exist and those that will be created. Refer to the excerpt from the Zoning Ordinance Section 475-44. Additional sheets may be attached if required.

6. **Fence and/or Parking Nonconformance.** In the area provided, list the reason(s) requested for all conditions which are not in conformance with the regulations. Indicated the requirement(s) and the amount of relief requested. Additional sheets may be attached if required.

7. Sign at the Place Indicated

Signature: Isreal Eisdorfer

Printed Name and Title: Isreal Eisdorfer President

Date: 8/30/2018