

SAVAD CHURGIN
ATTORNEYS AT LAW

Paul Savad (1941-2020)
Joseph A. Churgin

55 OLD TURNPIKE ROAD – SUITE 209
(Rt. 59 & THRUWAY EXIT 14)
NANUET, NEW YORK 10954

Of Counsel
Susan Cooper
Donna Sobel

(845) 624-3820
Fax: (845) 624-3821

May 9, 2025

Members of the Zoning Board of Appeals
Village of Montebello
One Montebello Road
Montebello, New York 10901

Attn: Regina Rivera

Re: *Zvi Sternberg*
1 Sheilah Court, Montebello, New York
Home Professional Office (Physical Therapy)
**Comprehensive Application Seeking an Area Variance (Home Occupation) and
Appealing the Building Inspector's Denial**

Dear Ms. Rivera:

We represent Zvi Sternberg, the owner of the above residence in the Village of Montebello.

Per the ZBA's directive, enclosed please find a comprehensive application (5 copies) seeking an area variance and appealing the denial issued by Adam Gordon, Building Inspector, dated January 7, 2025.

Our client will deliver checks for any fees associated with this submission.

Please advise of any additional information or documentation required at this time.

Please advise our office of the date and time when this matter will be considered at a Board Meeting.

Very truly yours,



JOSEPH A. CHURGIN
JAC/mc
encs
cc: Zvi Sternberg

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May 6, 2025

Members of the Zoning Board of Appeals
Village of Montebello
One Montebello Road
Montebello, New York 10901

Re: *Zvi Sternberg*
1 Sheilah Court, Montebello, New York
Home Professional Office (Physical Therapy)

**Application for an Area Variance (Home Occupation) and
Appealing the Building Inspector's Denial**

NARRATIVE

Applicant Zvi Sternberg, the owner of the above residence in the Village of Montebello, is a New York State licensed physical therapist who seeks the Board's approval for a variance to permit a home occupation – home professional office of more than 500 sq. ft., located in the premises at 1 Sheilah Court, Montebello, New York, pursuant to Zoning Code 195-82.

The Applicant also submits this application appealing from the denial issued by Adam Gordon, Building Inspector, dated January 7, 2025.

The Denial Letter of Adam Gordon, Building Inspector states that the application submitted by the Zvi Sternberg must be for a Use Variance not an Area Variance. However, the property is located in the RR-50 zone which specifically permits as a Special Permit use, Home Occupation/Home Professional office. Thus, the use is not a prohibited use in the zone. Upon information and belief, a use variance is not needed pursuant to the Village's Bulk Table.

The Denial Letter further states that a use variance is required because four specific items raised in his letter exceed or vary from the requirements of Section 195-82 of the Village Code when, in reality, it is just the square footage of the area of the home occupation that varies from the Code. However, the only aspect that varies from the Code is the total square footage of the home occupation (see Churgin Letter to Gordon, dated February 3, 2025 submitted herewith).

The Applicant resides in the single-family residence located at 1 Sheilah Court, Montebello, New York, on a 1.16 acre lot (see Site Plan prepared by Paul Gdanski, PE, submitted herewith, and dated September 11, 2024).

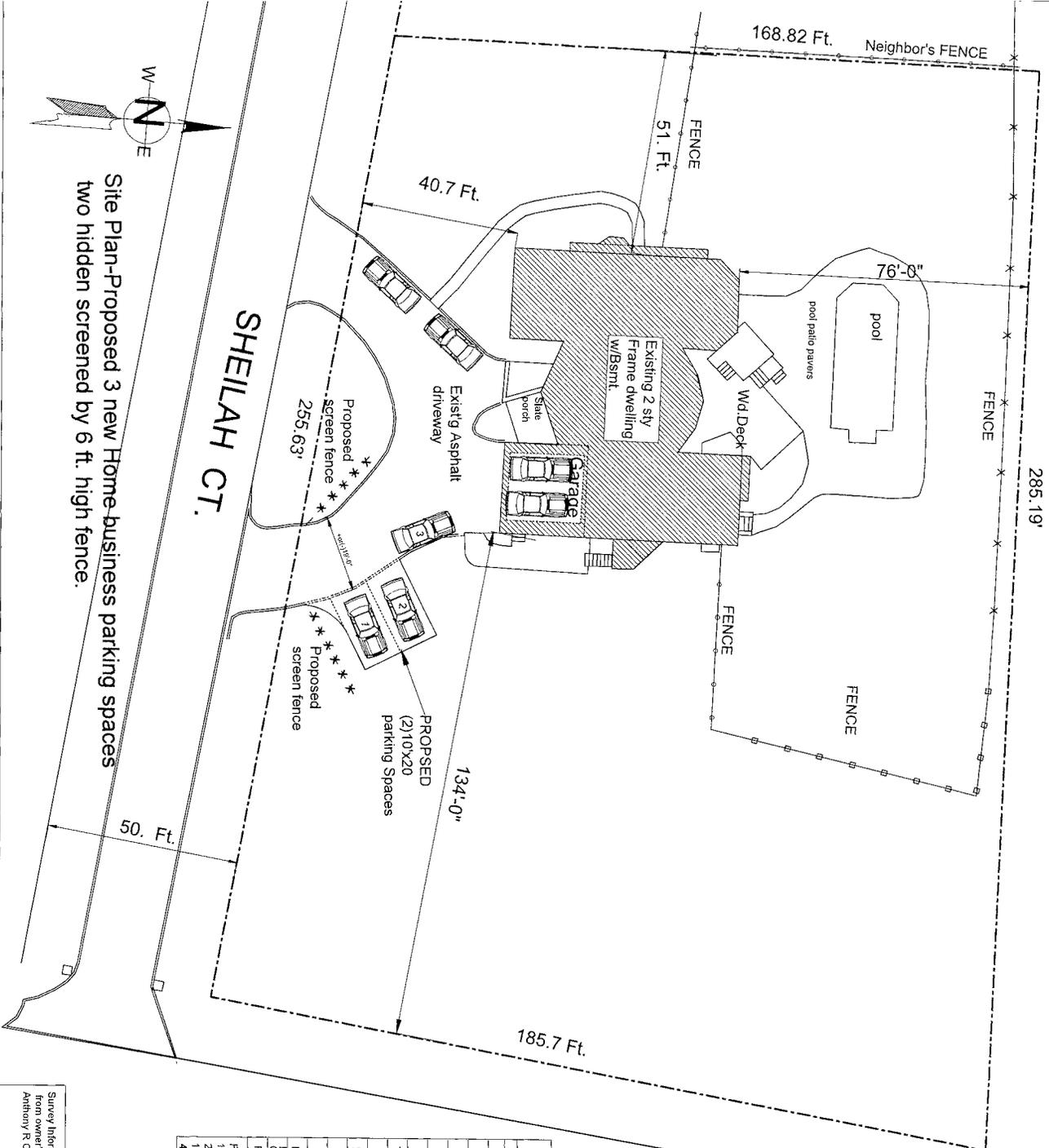
The physical therapy office is located on the basement level, consisting of a gym with treatment rooms and an office and waiting room area, as shown as Area "A" on the floor plan prepared by Matthew Oscar, Architect, submitted herewith.

The total area being used for the home occupation is 1,187 sq. ft. The total square footage of the dwelling is 6,932 sq. ft.

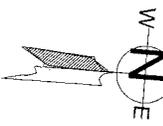
The Applicant employs a part time staff working approximately 20 hours a week as shown in the three-month Report submitted herewith.

The Applicant's driveway has more than sufficient space for a part time employee's vehicle. The premises at 1 Sheilah Court is located off of Spook Rock Road, a County road. Submitted herewith is a parking plan also prepared by Matthew Oscar, Architect.

Based on the forgoing and on the application submitted herewith, the Applicant requests that this Board grant his application for the issuance of a Special Use Permit allowing him to maintain a home professional office for his physical therapy practice.



Site Plan-Proposed 3 new Home-business parking spaces
two hidden screened by 6 ft. high fence.



SPOOK ROCK Rd.

| Zone RR-50 Use Group h | Required | Existing | Proposed | Zone RR-50 Use Grp. h Home Office Special Permit Required |
|------------------------------|--------------|-----------------|-----------|---|
| Min Lot Area | 50,000 sq.ft | 50,222 sq.ft | No Change | |
| Lot width | 175 | 255+ 187 varies | No Change | |
| Front setback | 50 ft. | 40.7 ft. | No Change | |
| Side Setback | 30 | 51 + 134 ft. | No Change | |
| Total side setback side yard | 75 | 185 | No Change | |
| Rear Setback | 25 | 51 | No Change | |
| Rear Yard | 25 | 76 ft. | No Change | |
| Street Frontage | 100 | 255.63 | No Change | |
| Maximum Height | 35 | 27' | No Change | |
| Development Coverage | 20% | +or(-)19.9% | No Change | |
| Floor Area ratio | .15 | .086 | No Change | |

FAR Calculation
1st flr. Plan 3,885 sq.ft.
2nd floor Plan 471
1st & 2nd Flr = 4,327 combined total
4,327 / 50,222 = FAR of .086

Project Title: Proposed Site Plan for 3 new Home Office parking spaces
Address: 1 Sheilah Ct. Residence Alteration
Machichee NY 10851

Author: Matthew Oscar, Architect
256 S. Church St. Machichee NY 10852
607-871-1111
NY Lic. # 21217 N.J. Lic. # 15869

DATE: 7-23-2014
DRAWN BY: [Signature]
CHECKED BY: [Signature]
SCALE: AS SHOWN

Survey Information obtained from owner's survey dated 5-5-2023 by Anthony R. Celestano PLS



A-001 00
Sheet 1 of 1

APPLICATION REVIEW FORM

PART I

VILLAGE OF MONTEBELLO

Date 5/6/2025

Please check all that apply:

| | |
|---|---|
| <input type="checkbox"/> Planning Board | <input type="checkbox"/> Village Board |
| <input checked="" type="checkbox"/> Zoning Board of Appeals* <i>*(Fill out Part II of this form)</i> | <input type="checkbox"/> Historic Preserv. Comm. |
| <input type="checkbox"/> CDRC | <input type="checkbox"/> Architectural Review Board |
| <input type="checkbox"/> Subdivision | <input type="checkbox"/> Number of Lots |
| <input type="checkbox"/> Site Plan | <input type="checkbox"/> Informal |
| <input type="checkbox"/> Architectural Review | <input type="checkbox"/> Preliminary |
| <input type="checkbox"/> Stream and Wetlands Permit | <input type="checkbox"/> Final |
| <input type="checkbox"/> Special Permit | <input type="checkbox"/> Cert. of Appropriateness |
| <input type="checkbox"/> Zoning Code Amendment | <input type="checkbox"/> Zone Change |
| <input checked="" type="checkbox"/> Variance <u>area</u> | <input checked="" type="checkbox"/> Other <u>Appeal</u> |
| <u>Building Inspector's Denial</u> | |

Project Information

Project Name: Sternberg

Tax Map Designation:

Section 49.17 Block 1 Lot(s) 3
Section _____ Block _____ Lot(s) _____

Location: On the NORTH side of Sheilah Court,
0 feet west of Spook Rock Road in the
Village of Montebello.

Street Address: 1 Sheilah Court

Acreage of Parcel 1.16 Zoning District RR50

School District SUFFERN CENTRAL S.D. Postal District SUFFERN 10901

Fire District TALLMAN F.D. Ambulance District RAMAPO VALLEY

Water District VEOLIA WATER Sewer District ROCKLAND #1

APPLICATION REVIEW FORM

Project Description: (If additional space required, please attach a narrative summary.)

Applicant wishes to operate a home occupations/home professional office at his residence (physical therapy) per zoning code 195-82.

If subdivision:

- 1) Is any variance from the subdivision regulations requested?
2) Is any open space being offered? If so, what amount?
3) Is this a standard or average density subdivision?

If site plan:

- 1) Total size of building(s) in square feet
2) Proposed addition

If special permit, list special permit use and what the property is proposed to be used for.

Environmental Constraints:

Are there slopes greater than 15%?
Are there streams, flood plains, lakes, or other land under water on the site?
If yes, please provide the names.
Are there wetlands on the site?
If yes, please provide the names and type.
If yes to any of the above, please indicate the amount and show the gross and net area per section 195-14.A.

SHOW ENVIRONMENTAL CONSTRAINTS ON SEPARATE DRAWINGS.

Project History: Has this project or property ever been reviewed before? yes

If so, provide a narrative, including the list case number, name, date, and the board(s) that reviewed it, together with the status of any previous approvals.

CDRC Meeting on 7/30/2024. Referred to ZBA for variances - see Minutes of Meeting annexed. ZBA appearance on March 20, 2025. A combined submission was requested by the Board for an area variance and appeal of building inspector's denial.

APPLICATION REVIEW FORM

List tax map section, block & lot numbers for all other abutting properties in the same ownership as this project.

General Municipal Law Review:

This property is within 500 feet of (Check all that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> State or County Road | <input type="checkbox"/> State or County Park |
| <input type="checkbox"/> New York State Thruway | <input type="checkbox"/> County Stream |
| <input type="checkbox"/> Municipal Boundary | <input type="checkbox"/> County Facility |

List name(s) and/or numbers of facility(ies) checked above. _____

IF ANY ITEM IS CHECKED, A REVIEW MUST BE DONE BY THE ROCKLAND COUNTY COMMISSIONER OF PLANNING UNDER THE STATE GENERAL MUNICIPAL LAW, SECTIONS 239 K, L, M, AND N.

Referral Agencies:

- | | |
|--|--|
| <input type="checkbox"/> RC Highway Department | <input type="checkbox"/> RC Division of Environmental Resources |
| <input type="checkbox"/> RC Drainage Agency | <input type="checkbox"/> RC Dept. of Health |
| <input type="checkbox"/> NYS Dept. of Transportation | <input type="checkbox"/> NYS Dept. of Environmental Conservation |
| <input type="checkbox"/> NYS Thruway Authority | <input type="checkbox"/> Palisades Interstate Park Comm. |
| <input type="checkbox"/> Adjacent Municipality _____ | |

Contact Information

Applicant: Zvi Sternberg Phone # 845.694.2454
 Address 1 Sheilah Court Email: zvi.sternberg@gmail
Street Name & Number (Post Office) State Zip code

Property Owner: Same as above Phone # _____
 Address _____ Email: _____
Street Name & Number (Post Office) State Zip code

Engineer: Paul Golanski Phone # 917.418.0999
 Address 3512 Nittica Ct, Mahwah NJ 07430 Email: pgski@earthlink.net
Street Name & Number (Post Office) State Zip code

APPLICATION REVIEW FORM

Surveyor: Anthony Celentano Phone # 845-429-5290
Address 31 Rosman Rd. Thiells NY 10984 Email: jkcelentano@gmail.com
Street Name & Number (Post Office) State Zip code

Architect: Matthew Oscar Phone # 845-371-1444
Address 222 Ackertown Rd. Monsey NY 10952 Email: MOscar.RA@gmail.com
Street Name & Number (Post Office) State Zip code

Attorney: Joseph Churgin Phone # 845-624-3820
Address 55 Old Turnpike Rd #209 Nanuet, NY Email: mail@sanadchurgin
Street Name & Number (Post Office) State Zip code

Contact Person: same as above Phone # _____
Address _____ Email: _____
Street Name & Number (Post Office) State Zip code

TO ALL APPLICANTS - YOU MUST SEND COPIES OF APPLICATIONS AND PLANS TO:

Regional Manager
Orange and Rockland
75 West Route 59
Spring Valley, NY 10977

I have informed the above checked agencies and Orange and Rockland on _____.

APPLICATION REVIEW FORM

Applicant's Combined Affidavit and Certification

State of New York)
County of Rockland) ss.:

Zvi Steenberg, being duly sworn, deposes and says:
Applicant's Name

I am the applicant in this matter. I make these statements to induce the Village of Montebello, its boards, commissions, officers, employees, and consultants, to entertain my application, knowing that the Village will rely upon the statements made herein.

1. Verification of Facts. All statements contained in this application and in all documents, drawings, writings, and other communications submitted in connection with this application are true.

2. Consent to Enter. I hereby give permission to members of said boards and/or supporting staff to visit the property in question at a reasonable time during the day.

3. Affidavit Pursuant to General Municipal Law Section 809. All the following statements and the statements contained in the papers submitted herewith are true and the nature and extent of any interests set forth are disclosed to the extent that they are known to the applicant.

A. I certify that I am the owner, officer, member or agent of owner, of all that certain lot, piece or parcel of land and/or building described in this application **and if not the owner that he has been duly and properly authorized to make this application and to assume responsibility for the owner** in connection with this application for the relief below set forth:

B. There is no state officer, Rockland County officer or employee or village officer or employee nor his or her spouse, brother, sister, parent, child or grandchild, or a spouse of any of these relatives who is the applicant or who has an interest in the person, partnership or association making this application, petition or request, or is an officer, director, partner or employee of the applicant, or that such officer or employee, if this applicant is a corporation, legally or beneficially owns or controls any stock of the applicant in excess of 5% of the total of the corporation if its stock is listed on the New

APPLICATION REVIEW FORM

York or American Stock Exchanges; or is a member or partner of the applicant, if the applicant is an association or a partnership; nor that such village officer or employee nor any member of his family in any of the foregoing classes is a party to an agreement with the applicant, express or implied, whereby such officer or employee may receive any payment or other benefit, whether or not for service rendered, which is dependent or contingent upon the favorable approval of this application, petition or request.

C. To the extent that the same is known to your applicant, and to the owner of the subject premises **there is disclosed herewith** the interest of the following officer or employee of the State of New York or the County of Rockland or of the Village of Montebello in the petition, request or application or in the property or subject matter to which it relates:

(if none, so state)

- a. Name and address of officer or employee None
- b. Nature of interest _____
- c. If stockholder, number of shares _____
- d. If officer or partner, nature of office and name of partnership _____
- e. If a spouse or brother, sister, parent, child, grandchild or the spouse of any of these blood relatives of such state, county or town/village officer or employee, state name and address of such relative and nature of relationship to officer and employee and nature and extent of office, interest or participation or association having an interest in such ownership or in any business entity sharing in such ownership. _____

f. In the event of corporate or limited liability company ownership: A list of all directors, officers and stockholders of each corporation or members of each limited liability company owning more than five (5%) percent of any class of stock or more than five (5%) percent beneficial interest, must be attached, if any of these are officers or employees of the State of New York, or of the County of Rockland, or of the Village of Montebello.

D. I do hereby depose and say that all the above statements and statements contained in the papers submitted herewith are true, knowing that a person who knowingly and intentionally violates this section is guilty of a misdemeanor.

4. Reimbursement for Professional Consulting Services. I understand that the Village Board, Planning Board, Zoning Board of Appeals, and other municipal boards, in the review of any application described above, may refer any such application presented to it to such engineering, planning, environmental or other technical consultant as such Board shall deem reasonably necessary to enable it to review such application as required by law. The charges made by such consultants shall be in accord with charges usually made for such services in the metropolitan New York region or pursuant to an existing contractual agreement between the Village and each such consultant for the cost of such consultant services upon receipt of the bill.

I agree to establish an escrow account with the Village of Montebello from which these consultants' fees will be paid. The escrow account will not draw interest, and will be replenished upon notification by the Village. Any additional sums needed to pay the Village's consultants shall be paid prior to final action on the application. The Village may suspend processing of the application if there is a deficiency in the escrow account.

Permits will not be issued and site plan or subdivision will not be signed until bill is paid in full. Any sums remaining in the escrow account after the consultants have been paid in full will be returned to the applicant. The applicant has the right to examine escrow and payment records upon prior written notice to the Village.

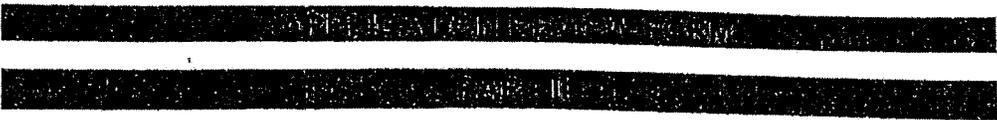
Applicant's Signature Zvi Sternberg
Print Applicant's Name Zvi Sternberg

affirmed
SWORN to before me this 6th day of May, 2025

[Signature]
Notary Public

JACK KELLNER
Notary Public, State of New York
Qualified in Rockland County
No. 01KE6287543
My Commission Expires 2-1-27

SEP 24 25



Application before the Zoning Board of Appeals

Application, petition or request is hereby submitted for:

- Use Variance from the requirement of Section _____
- Area Variance from the requirement of the Bulk Table (Section 195-13);
- Area Variance (other than Bulk Table) Section 195-82
- Review of an administrative decision of the Building Inspector;
- An interpretation of the Zoning Ordinance or Map;
- Certification of an existing non-conforming structure or use;
- Other (*explain*) _____

To permit construction, maintenance and use of:

A home occupation of more than 500 sq. ft.

If an area variance is required, please fill out below:

This application seeks a variance from the provisions of:

- Bulk Table (Section 195-13) Use Group _____
- Section(s) 195-82

Specifically, the applicant seeks variance from the requirements from:

| <u>Dimension*</u> | <u>Column</u> | <u>Required</u> | <u>Provided</u> |
|-------------------|---------------|-----------------|-----------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

*e.g., front yard, side setback, FAR

Applicant's initials: Z.S. (X)

APPLICATION REVIEW FORM

Previous Appeal:

- a. A previous appeal has, or has not, been made with respect to this property.
- b. Such appeal was in the form of:
 - Interpretation of the Zoning Ordinance or Map; or
 - Appeal from decision of Village Official or Officer.
 - A USE Variance; or
 - An AREA Variance; or
- c. The previous appeal described above was appeal number _____, dated _____ and was _____ (Granted/Denied).

TO ALL APPLICANTS: Complete all relevant information by the section or sections pertaining to your appeal ONLY. You may also include extra pages to supplement this form with a narrative explanation. At the time of the hearing you must present written documentation in support of all the statements made in this application. You must also substantiate all financial information supplied.

A. INTERPRETATION OF ZONING CODE

(This section to be completed for an interpretation, only. Use additional pages, if needed)

- 1. Section(s) to be interpreted: 195-_____
- 2. An interpretation of the Zoning Code is requested because:

B. APPEAL OF DECISION OF VILLAGE OFFICIAL

(This section to be completed for an appeal, only. Use additional pages, if needed)

- 1. Name and position of official making the decision:
Adam Gordon, Building Inspector
- 2. Nature of decision:
Whether the home occupation complied with standards set forth in sec. 195-82 of Village Code, and whether a Use Variance is required.
- 3. The decision described above is hereby appealed because:
See attachments

The Denial Letter of Adam Gordon, Building Inspector, dated January 7, 2025 (copy annexed) states that the application submitted by the Zvi Sternberg must be for a Use Variance not an Area Variance. However, the property is located in the RR-50 zone which specifically permits as a Special Permit use, Home Occupation/Home Professional office. Thus, the use is not a prohibited use in the zone. We do not need a Use Variance per the Bulk Table.

Further, the Letter of Adam Gordon dated January 7, 2025 states that the use variance is required because four specific items raised in his letter exceed or vary from the requirements of Section 195-82 of the Village Code when, in reality, it is just the square footage of the area of the home occupation that varies from the Code.

Village of Montebello
Building & Zoning Department
One Montebello Road
Montebello, N.Y. 10901
(845) 368-2491* Fax (845) 368-2044

Adam Gordon
Building Inspector

Marcos Padilla
Fire Inspector

January 7, 2025

Zvi Sternberg
1 Sheilah Ct.
Montebello, NY 10901

Re: Denial Letter – 1 Sheilah Ct, Montebello, New York, 10901
S/B/L 49.17-1-3

Dear Mr. Sternberg,

I have reviewed the following submittals to the ZBA for an area variance:

- “Survey for Sternberg” by Anthony Celentano, PLS dated May 5, 2023
- Floor plans, undated and unsigned
- Narrative from Joseph Churgin, Esq. dated November 12, 2024
- ZBA application dated November 12, 2024

Be advised that the proposed home occupation does not comply with the standards set forth in Sec. 195-82 of the village code entitled “ Home occupations/Home professional office.

1. The proposed “traction and magnetic therapy” machinery likely violates the provisions of paragraph C.
C. The use of any chemical, mechanical or electrical equipment, which is not a customary household appliance, or light office equipment, or is not ordinary to a home shop or garage, is not permitted unless expressly granted in the special permit, but in no event shall same be permitted if same becomes integral to the structure of the dwelling, or if emitting potentially harmful fumes or radiation, or if emitting noxious odors, or noise offensive or disturbing to neighboring properties, or if not capable of being powered by electrical mains of ordinary household current capacity (i.e., two-phase, 200 ampere service), or as otherwise prohibited in Subsection G.
2. The proposed use and floor plan show separate workspaces for a receptionist and a billing office. Further, according to the Applicant’s website, there are three (3) physical therapists associated with the practice. This proposal exceeds the allowable number of employees as set forth in paragraph E.
E. No persons other than the occupants of the household may engage in the home occupation/home professional office. However, a maximum of one full-time person not residing in the household, or the equivalent of one full-time person, but not more than one person at the same time, may be employed therein if that employment is secondary to, but in support of and necessary to the occupation, and the residence is located such that the driveway access thereto is from a state or county road. If the residence and driveway access thereto is not so located, a nonresident of the

household may not be employed thereat unless the occupation is of a nature which does not require contact with visitors in the residence for the purposes of the occupation.

3. The proposed use exceeds the maximum allowable space within the home as set forth in paragraph D, with two separate gender-specific gyms, an all-inclusive gym, six treatment rooms, and a traction/agent therapy room, taking up most of the basement area.

D. The activity shall not occupy more than 1/2 of the ground floor area of the principal structure or its equivalent elsewhere on the lot, if so used, but in no case more than 500 square feet. When requested by the Planning Board, a single line floor plan shall be provided together with the application for special permit. The Planning Board may require that the drawing be certified by an appropriate professional.

4. The hours of operation on the website total thirty-seven per week, which does not comply with the standards of paragraph I, which limits the maximum number of hours to thirty-five.

I. The use may not operate more than 35 hours per week, and only between the hours of 8:00 a.m. to 9:00 p.m., weekdays and one day on the weekend. The hours of operation shall be disclosed to the Planning Board as a part of the application and shall be a condition of the special permit.

The application does not comply with any of the standards, spirit or intent of Sec. 195-82 while ostensibly changing the standards of the existing single-family home, and will therefore require a Use variance.

Be further advised that any order, requirement, decision or determination by the Building Inspector regarding the Local Zoning Law may be appealed to the Zoning Board of Appeals.

Sincerely,



Adam Gordon
Building Inspector

cc: Zoning Board of Appeals
Joseph A. Churgin, Esq.
Paul Gdanski, PE, PLLC
Anthony Celentano, PC
Matthew Oscar, Architect

SAVAD CHURGIN
ATTORNEYS AT LAW

Paul Savad (1941-2020)
Joseph A. Churgin

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NANUET, NEW YORK 10954

Of Counsel
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January 9, 2025

Via email: agordon@villageofmontebello.com

Adam Gordon- Building Inspector
Village of Montebello
Building & Zoning Department
One Montebello Road
Montebello, New York 10901

Re: *Response to Denial Letter*
Premises: 1 Sheilah Court, Montebello, New York, 10901
S/B/L: 49.17-1-3

Dear Mr. Gordon:

I am in receipt of your letter dated January 7, 2025.

Your letter states that the application must be for a Use Variance not an Area Variance. However, the property is located in the RR-50 zone which specifically permits as a Special Permit use, Home Occupation/Home Professional office. Thus, the use is not prohibited use in the zone. We do not need a Use Variance, the use table is attached for your convenience.

The bulk of your letter states that our client is exceeding the standards set forth in § 195-82. That is exactly what an Area Variance is for.

We therefore request that you omit the second to last paragraph from your denial letter.

Very Truly Yours,



JOSEPH A. CHURGIN

JAC/dk

enc.

cc: Zvi Sternberg

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February 3, 2025

Via email: agordon@villageofmontebello.com

Adam Gordon- Building Inspector
Village of Montebello
Building & Zoning Department
One Montebello Road
Montebello, New York 10901

Re: *Response to Denial Letter*
Premises: 1 Sheilah Court, Montebello, New York, 10901
S/B/L: 49.17-1-3

Dear Mr. Gordon:

This letter is in furtherance of my letter to you of January 9, 2025, which letter was in response to your letter dated January 7, 2025 (*copies annexed*).

We take issue with your conclusion that a use variance is required and are therefore submitting only an area variance application.

We are submitting the area variance application together with an appeal of your determination that a use variance is required pursuant to Montebello Code §195-108(a).

Your letter in ¶1 states:

The proposed "traction and magnetic therapy" machinery likely violates the provisions of paragraph C.

C. *The use of any chemical, mechanical or electrical equipment, which is not a customary household appliance, or light office equipment, or is not ordinary to a home shop or garage, is not permitted unless expressly granted in the special permit, but in no event shall same be permitted if sa.me becomes integral to the*

structure of the dwelling, or if emitting potentially harmful fumes or radiation, or if emitting noxious odors, or noise offensive or disturbing to neighboring properties, or if not capable of being powered by electrical mains of ordinary household current capacity (i. e., two-phase, 200 ampere service), or as otherwise prohibited in Subsection G.”

However, the materials that we submitted with our application establish that these devices are not harmful in any way. They do not emit “potentially harmful fumes or radiation”, emit “noxious odors, or “noise offensive or disturbing to neighboring properties”. In fact, Mr. Sternberg will testify at the Zoning Board Hearing that these types of devices are very similar to other devices which are commonly used for home care. You have failed to cite any evidence, but instead you merely stated a conclusion.

Your letter in ¶2 states:

The proposed use and floor plan show separate workspaces for a receptionist and a billing office. Further, according to the Applicant's website, there are three (3) physical therapists associated with the practice. This proposal exceeds the allowable number of employees as set forth in paragraph E.

E. No persons other than [he occupants of the household may engage in the home occupation/home professional office. However, a maximum, one full-time person not residing in the household, or the equivalent of one full-time person, but not more than one person at the same time, may be employed therein if that employment is secondary to, but in support of and necessary to the occupation, and the residence is located such that the driveway access thereto is from a state or county road. If the residence and driveway access thereto is not so located, a nonresident of the household may not be employed thereat unless the occupation is of a nature which does not require contact with visitors in the residence for the purposes of the occupation.

Please see the Affidavit of Zvi Sternberg dated July 28, 2024 (*copy annexed*) at ¶6, where he states that there are multiple employees. However, they are all part time staff and therefore they do not exceed a full time worker.

Furthermore, the parking comments do not exist as the employees are not there at the same time.

Your letter in ¶3 states:

The proposed use exceeds the maximum allowable space within the home as set forth in paragraph D, with two separate gender-specific gyms, an all-inclusive gym, six treatment rooms, and a traction/agent therapy room, taking up most of the basement area.

D. The activity shall not occupy more than 1/2 of the ground floor area of the principal structure or its equivalent elsewhere on the lot, if so used, but in no case more than 500 square feet. When requested by [he Planning Board, a single line floor plan shall be provided together with the application for special permit. The Planning Board may require that the drawing be certified by an appropriate prQfession.al.

This is the area variance being sought from the ZBA. The house is 6,932 sq. ft. We are seeking to use 1,180 sq. ft. in the basement for a home occupation. We are permitted 500 sq. ft.

Your letter in ¶4 states:

The hours of operation on the website total thirty-seven per week, which does not comply with the standards of paragraph I, which limits the maximum number of hours to thirty-five.

I. The use may not operate more than 35 hours per week, and only between the hours of 8:00 a. m. to 9:00 p.m., weekdays and one day on the weekend The hours of operation shall be disclosed to the Planning Board as a part of the application and shall be a condition of the special permit.

We are not exceeding 35 hours per week, as shown on the website.

Very Truly Yours,



JOSEPH A. CHURGIN

JAC/mc

enc.

cc: Zvi Sternberg

Village of Montebello
Building & Zoning Department
One Montebello Road
Montebello, N.Y. 10901
(845) 368-2491* Fax (845) 368-2044

Adam Gordon
Building Inspector

Marcos Padilla
Fire Inspector

February 4, 2025

Joseph A. Churgin, Esq.
55 Old Turnpike Rd., Ste. 209
Nanuet, NY 10954

Re: RE - 1 Sheilah Ct, Montebello, New York, 10901
S/B/L, 49.17-1-3

Dear Mr. Churgin,

In response to your letter dated February 3, 2025 in which you again dispute my interpretation of the zoning law with regards to the above-referenced property, be advised that you may appeal my determination to the ZBA.

I recommend that you supplement your current ZBA application dated November 12, 2024 for an area variance with your request for an appeal of my determination that a use variance is required.

Sincerely,



Adam Gordon
Building Inspector

cc: Zoning Board of Appeals
Zvi Sternberg

APPLICATION REVIEW FORM

C. USE VARIANCE

(This page to be completed only for a USE variance. Use additional pages, if needed).

NA

1. This property cannot be used for any uses currently permitted in this zone because:

2. The problem with this property is due to unique circumstances and not to the general conditions of the neighborhood in that:

3. The use requested by this variance will not alter the essential character of the neighborhood in that:

4. The amount paid for the entire parcel was: _____

5. The date of purchase of the property was: _____

6. The present value of the entire property is: _____

7. The monthly expenses attributed to normal and usual maintenance of the property are: _____

8. The annual taxes on the property are: _____

9. The current income from the property is: _____

10. The amount of mortgages and other encumbrances on the property in question are:

- a. Date of mortgage: _____
- b. Scheduled maturity (payoff) date: _____
- c. Present monthly payment amount: _____
- d. Current principal balance: _____
- e. Current interest rate: _____

11. Other factors I/we wish the Board to consider in this case are:

APPLICATION REVIEW FORM

N/A

D. AREA VARIANCE

(This page to be completed only for an AREA variance. Use additional pages, if needed)

1. Is the requested variance the minimum necessary to relieve the practical difficulty or economic injury? _____

Describe: _____

2. Is the variance substantial in relation to the zoning code? _____

Explain: _____

3. Will a substantial change be produced in the character of the neighborhood, or a substantial detriment to adjoining property owners be created, if this variance is granted? _____

Explain: _____

4. Can the alleged practical difficulty or economic injury be overcome by some method other than a variance? _____

Explain: _____

5. Will the granting of this variance affect the health, safety or welfare of the neighborhood or community? _____

Explain: _____

6. Will there be any affect on governmental facilities or services if this variance is granted? _____

Describe: _____

7. Other factors I/we wish the Board to consider in this case are

VILLAGE OF MONTEBELLO
CDRC MINUTES

CDRC Meeting Date: July 30, 2024 Project Name: 1 Sheilah Court – Home Professional Office

Project Address: 1 Sheilah Court S/B/L 49.17-1-3

Subdivision ___ Amended Site Plan ___ Special Permit X Sign Plan ___ Wetlands Permit ___

Preliminary ___ Final ___ Informal Discussion ___ Tree Removal ___ ARB ___

Application ready for Board? NO SEQRA Status: Type II

Present: The Applicant Zvi Sternberg, his attorney Joseph Churgin, and architect Matthew Oscar.

See J. Lockman memo dated June 24, 2024; The maximum allowable space allowed for Home Occupation is 500 sf, Applicant proposes using 1,180 square feet for the practice. Mr. Churgin explained that his client serves the orthodox community, and therefore men and woman needing treatment must be separated. J. Lockman explained that this is not a religious use.

Other elements of the proposal do not meet the standards of Sec. 195-82 of the Village code: Proposed number of employees exceeds the maximum allowed, driveway access is not on a state or county road, and the required parking of five spaces, two of which should only be visible from Sheilah Ct. has not been met.

See M. Spence memo dated July 29, 2024.

See A. Gordon memo dated June 24, 2024; Applicant to provide more details on the proposed "Traction & Magnet Therapy Room," as there may be machinery not permitted in a residential zone.

Applicant to determine whether they wish to comply with all the standards of Sec. 195-82 or go to the Zoning Board for variances. Should Applicant choose the latter, the Building Inspector will issue a referral letter to the ZBA.

Applicant advised to go to ZBA before returning to CDRC.

SAVAD CHURGIN
ATTORNEYS AT LAW

Paul Savad (1941-2020)
Joseph A. Churgin

55 OLD TURNPIKE ROAD – SUITE 209
(Rt. 59 & THRUWAY EXIT 14)
NANUET, NEW YORK 10954

Of Counsel
Susan Cooper
Donna Sobel

(845) 624-3820
Fax: (845) 624-3821

July 30, 2024

Members of the Community Design Review Committee
Village of Montebello
One Montebello Road
Montebello, New York 10901

Re: *Zvi Sternberg*
1 Sheilah Court, Montebello, New York
Home Professional Office (Physical Therapy)

Dear Members of the Committee:

We represent Zvi Sternberg, the owner of the above residence, who appeared before you on July 30, 2024.

After the meeting, it was decided by the Applicant that he would like to have a referral to the Zoning Board of Appeals for variances. Therefore, we are requesting that such a letter be issued by the Committee.

Respectfully,



JOSEPH A. CHURGIN
JAC/mc
cc: Matthew Oscar, Architect
Zvi Sternberg

Village of Montebello

Building & Zoning Department
One Montebello Road
Montebello, N.Y. 10901

MEMORANDUM

TO: CDRC

FROM: ADAM GORDON, BUILDING INSPECTOR

SUBJECT: 1 SHEILAH CT.
SBL 49.17-1-3

DATE: JUNE 24 2024

The following review is based on "BSMT Level Physical Therapy Office Floor Plan" undated and unsigned, 1 page; Survey dated May 5, 2023 by Anthony Celentano, PLS, 1 page; Narrative by Joseph Churgin, Esq. dated June 6, 2024. I will have additional comments and questions at the CDRC meeting.

1. This plan encompasses the entirety of the basement. A major interior renovation was completed in the home under permit# 3077-22, the floor plans/rooms for which were labeled differently from what is shown here, possibly an intentional misdirection by the applicant. During that renovation, I asked the Applicant the reason for installing an ADA-compliant door and bathroom in the basement and was told it was to accommodate a handicapped parent and for easy access to the pool. In retrospect, patient access may have been the intent all along.
2. Required parking spaces must be shown on site plan. Per Sec. 195 Attachment 1-1, the minimum number of off-street parking spaces is seven (7): Home occupations require a three (3) spaces maximum, not more than two (2) of which shall be visible to the public way, and an additional two (2) spaces for the residents.
3. The proposed square footage, while not shown, is well over the maximum allowable 500 sf per Sec. 195-82D.
4. Provide details on the "Traction & Magnet Therapy Room," as there may be special machinery that is prohibited by Sec. 195-82 C and G.
5. Provide clear details of number of employees, their specific roles and number of hours each will work weekly. Sec. 195-82E very clearly limits non-resident employees to one (1) or its equivalent, and not more than one (1) employee working at a time. Further, there is a receptionist desk on the floor plans which will presumably be occupied by a receptionist who will be working at the same time as other employee(s). Please clarify.
6. Sec. 195-82 I. prohibits more than 35 hours of operation per week and limits those hours between 8:00 a.m. and 9:00 p.m. weekdays and one weekend day. Provide proposed hours of operation, which is an intrinsic part of the Special Permit application.

AFFIDAVIT

Zvi Sternberg, affirms the following under penalty of perjury:

1. I am the owner of the residential premises at 1 Sheilah Court, in the Village of Montebello, New York.
2. I am a licensed physical therapist in the State of New York.
3. I make this affidavit in response to the opinion letter of Nelson Pope Voorhis ("NPV") dated June 24, 2024, submitted to the Village Planning Board.
4. With respect to "Zoning" ¶5(C) and (G) of the letter, NPV states that the floor plan shows a magnet therapy room. The magnetic magnosphere machine is solely used by my wife and I who suffer from back and joint pain. This magnashere machine is not hazardous and is manufactured for home use as a relaxation and recreational tool.

The balance therapy area has been eliminated from this center area to further assure square footage limits are complied with. The space for this machine is in the center of the basement near the laundry area and mechanical room, and should be discounted from the overall square footage of the home office since it is part of the homeowner's standard use space. The therapy area has been eliminated from this center area to further assure square footage limits are complied with.

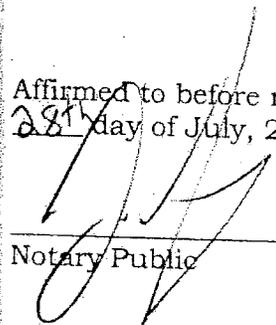
5. With respect to ¶5(D), the total square footage designated for office space, my physical therapy practice requires an area of 1,187 square feet, approximately one-third of the pre-existing finished basement area. Although the zoning code limits the size of a home office to 500 s.f., I need additional space because separate men's and women's facilities are required due to my clients' religious restrictions. The remaining space in the basement will be used for my family recreational rooms, study rooms and a home gym, all of which are typical uses in a basement of a residence of this size and in this neighborhood.
6. With respect to ¶5(E) regarding employee restrictions, I have three part-time employees whose combined hours are in compliance with the 35-hour restriction. Billing is done remotely/off-site. My physical therapy assistant works no more than 15 hours per week, and the two secretarial staff members work no more than a combined 20 hours per week. My wife also assists with the business activities.

7. Regarding ¶5(H) and (I), the office hours shall comply with the zoning law limitation not to exceed 35 hours per week. Clients are seen by appointment only, Monday through Friday, 10:00 a.m. to 6:00 p.m. (Wednesdays 10:00 a.m. to 1:30 p.m.).
8. With respect to ¶5(J), the site plan attached shows the proposed location of parking spaces to demonstrate compliance with the zoning code. Three spaces are show for the home office business; two of those three are shown screened off (hidden as required); with an additional two spaces located on the driveway; for a total of five outside parking spaces, and two garage spaces.



ZVI STERNBERG

Affirmed to before me this
28th day of July, 2024



Notary Public

JOEL LITCHFIELD
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01L16444995
Qualified in Rockland County
Commission Expires 12/05/2026

Efficacy and Safety of Low Level Electromagnetic Fields Treatment in Parkinson's Disease

O. Klepritskaya, University of Colorado Health Sciences Center, Aurora, Colorado
 R. Kumar, Colorado Neurological Institute Movement Disorder Center, Englewood, Colorado

BACKGROUND

1990s. Early experiments suggested that utilization of extremely weak magnetic fields (EMF) may impact signs or symptoms of several major neurological disorders (e.g. Epilepsy, Parkinson's Disease, Alzheimer's).

2003. Further clinical observations by Dr. Jerry Jacobson suggested that EMF fields applied by a specially created device (Resonator) appeared to ameliorate a number of the signs and symptoms associated with Parkinson's disease (PD).

2007. The first open label pilot study in PD.

- 13 subjects
- 3 weeks (3 treatments a week)
- Conclusion: EMF treatment with the Resonator may have beneficial effects as determined by the scores:

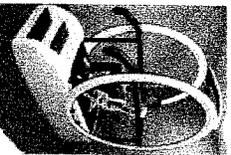
| Change | Base | 3 weeks | % |
|-----------|-------------|-------------|------|
| UPDRS II | 13.92±4.59 | 6.77±3.42 | -51% |
| UPDRS III | 32.46±10.09 | 21.08±8.83 | -35% |
| PDQ39 SI | 24.75±12.85 | 18.81±14.47 | -24% |

OBJECTIVE

To conduct a pilot study to demonstrate the efficacy of the Resonator, a non invasive device, utilizing targeted low level EMF as an adjunct therapy for symptomatic relief of PD symptoms.

METHODS

- * double-blind, randomized, placebo controlled
- * adjunct to standard medical therapy
- * PD patients with motor fluctuations
- * 12 subjects (6 per group)
- * Intervention: 1.5hrs. 3 treatments a week, 8 weeks
- * Standardized motor and non-motor assessments at baseline, 8 weeks, and monthly during 3 month washout period.



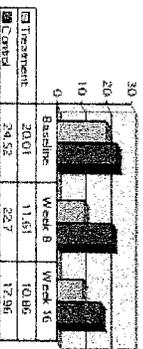
RESULTS

The treatment group demonstrated significant improvement over placebo after 8 weeks (endpoint) of therapy in the scales listed below.* Significantly, improvement on several scales persisted up to 2 months (week 16) post treatment.

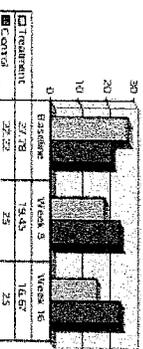
No treatment related adverse events reported.

*In all tests $p < 0.05$, except for UPDRS III $p = 0.054$ and Finger Taps OFF $p = 0.308$.

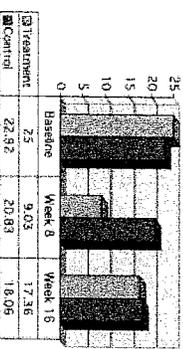
PDQ39 Single Index



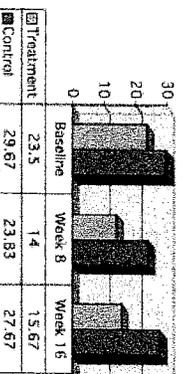
PDQ39B. Discomfort



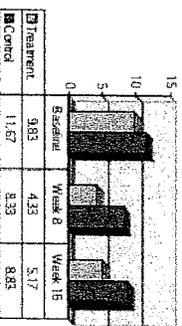
PDQ39 ADL



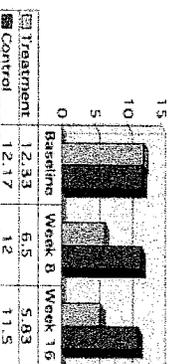
UPDRS: Motor (III)



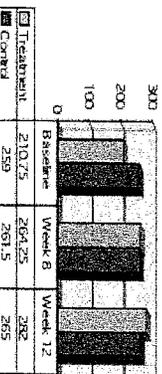
UPDRS: ADL (II)



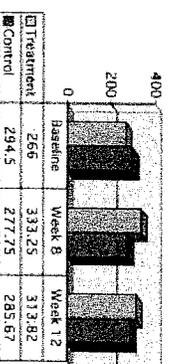
Beck Depression II



Finger Taps: OFF



Finger Taps: ON



The following tests were also used but showed little or no difference:
 Fatigue Severity Scale (FSS)
 Epworth Sleepiness Scale (ESS)
 Pittsburgh Sleep Quality Index (PSQI)
 Increase in "On" time as measured by diaries
 Pain, Smell Identification Test
 PDQ 39 subscales: Stigma, Social, Comm. Steps & Seconds test

MECHANISM

The precise mechanism of operation is unknown, but analogous to magnetic resonance imaging (MRI), the Resonator applies an external magnetic field to alter molecular or atomic targets in the body to achieve its results.

The field strengths used by the Resonator are in orders of magnitude below those utilized in MRI scanners, transcranial magnetic stimulators (TMS) and even well below that of the earth.

| Tesla | Gauss |
|---------------|--------------------------------|
| MRI | 1,000-40,000 |
| rTMS or TMS | 1,000-20,000 |
| bar magnet | 100-300 |
| Earth's Field | 0.5 |
| Human Brain | 0.00000005 |
| Resonator | 5x10 ⁻¹² 0.00000005 |

The Resonator utilizes a field strength and frequency that specifically focuses on target molecules associated with a disease. Various neurotrophic factors (brain derived neurotrophic factor, neurturin, glial derived neurotrophic factor) are considered to be the candidate target molecules for the magnetic fields and frequencies applied for the treatment of PD.

CONCLUSIONS

Low level EMF may improve motor and non-motor features of PD beyond that achieved with standard medical therapy. These effects are long-lasting. Larger placebo-controlled studies should be undertaken to confirm and further investigate the benefit of this unique, non-invasive and potentially promising therapy.

FUTURE DIRECTIONS

Q4 of 2008 Sponsor will begin enrollment in a large pivotal phase III randomized, placebo controlled clinical trial, utilizing the PDQ-39 SI as its primary outcome measure.

REFERENCES

1. Klepritskaya O, Kumar R, et al. (2007) "Low Level Electromagnetic Fields Treatment in Parkinson's Disease: A Pilot Study." *Journal of Parkinson's Disease*, 1(4), 1-10.
2. Kumar R, et al. (2007) "The Resonator: A Non-Invasive Device for the Treatment of Parkinson's Disease." *Journal of Parkinson's Disease*, 1(4), 1-10.
3. Kumar R, et al. (2007) "The Resonator: A Non-Invasive Device for the Treatment of Parkinson's Disease." *Journal of Parkinson's Disease*, 1(4), 1-10.
4. Kumar R, et al. (2007) "The Resonator: A Non-Invasive Device for the Treatment of Parkinson's Disease." *Journal of Parkinson's Disease*, 1(4), 1-10.



NELSON POPE VOORHIS

environmental • land use • planning

MEMORANDUM

TO: Village of Montebello Planning Board

FROM: Jonathan Lockman, AICP
Sam Justiniano, Planning Analyst

SUBJECT: 1 Sheilah Court – Home Occupation Office
1 Sheilah Court
S/B/L 49.17-1-3

DATE: June 24, 2024

CC: Regina Rivera - Planning Board Secretary
Martin Spence, P.E. - Village Engineer
Alyse Terhune, Esq. - Planning Board Attorney

We have reviewed the following materials received by our office, for the preparation of this memo:

- Survey for Sternberg, 1sheet, stamped by Anthony Celentano, dated May 5, 2023.
- Floor Plan, entitled "BSMT Level Physical Therapy Office," unstamped and undated.
- Transmittal Letter, Application for the Issuance of Special Use Permit, signed by Joseph A. Churgin, Esq., Savad Churgin, dated June 5, 2024.
- Narrative Letter, by Savad Churgin, Attorneys at Law, unsigned, dated June 5, 2024
- Application Review Forms package, signed by Zvi Sternberg, dated May 23, 2024
- Deeds for property from Rockland County Clerk
- Proof of Taxes Paid

Project Summary

The application proposes to convert the basement of an existing single-family dwelling into a home occupation/home professional office, located at 1 Sheilah Court. Rooms include a waiting room, Men's Gym, Women's Gym, Coed Gym, 6 Treatment Rooms, 1 Traction/Balance Therapy Room. The applicant does not appear to propose any changes to the existing footprint of the residence. The lot contains 1.15 acres (50,222 sf) and is located in the R-50 zoning district, as well as the Historic and Scenic Road Overlay. Home Occupations are permitted with a special use permit.

We offer the following comments based on our review of these materials:

Submissions:

1. Use. Home occupations/home professional offices are not designated under a use group. In accordance with §195-10E, the bulk regulations as applied to the single-family dwelling shall apply to the project. The applicant should provide a bulk table with future submittals to demonstrate compliance with these requirements. In addition, the applicant should show the location of the setbacks and yard requirements directly on the site

- plan to demonstrate compliance. This should not be an issue if no changes to the exterior of the structure are proposed.
2. Narrative. The applicant has provided a narrative related to the project; however, additional information is needed to ensure compliance with the zoning code. Please refer to the comments under the zoning section of this memorandum.
 3. Application form. We note the following comments in relation to the submitted application form:
 - a. Environmental constraints. Please complete this section on page 2.
 - b. Project history. The applicant has not provided a response for this section, on page 2.
 - c. General municipal law review. Please list the name of the county road. The site is within 500 feet of the boundary of the Town of Ramapo, so please check this category as well.
 4. Floor plan.
 - a. Please provide a floor plan with an architect's or engineer's stamp.
 - b. The footprint outline of the proposed basement level, which is shown on the floor plan, does not align with the building footprint shown on the survey, or the shape of the building on google maps aerial photography. Please clarify.
 - c. Are there any changes to the other floors of the dwelling?

Zoning:

5. The application is for a home occupation/home professional office, which is a special use in the Village of Montebello. The special use standards for home occupations/home professional offices from §195-82 are listed below (in blue font), with comments regarding each:
 - A. *There shall be no exterior evidence of such use except for a sign not exceeding six inches in vertical dimension and 30 inches in horizontal dimension, set back at least 10 feet from the designated street line, bearing the name of the person engaged in the home occupation, plus letters designating the license or degree relevant to the home occupation, if one exists (i.e., MD, Esq., or JD, DDS, DC, CPA, etc.), but not words descriptive of the occupation or the name of a business, and as further limited, but not expanded, by other regulations of signs as may appear in the Zoning Chapter. For safety reasons, the sign may be illuminated, but only during the hours of operation permitted by the special permit. It is unclear if the applicant will be using any signs on the exterior of the building or freestanding, to indicate the new use. **Please clarify and provide details of proposed signs if applicable.***
 - B. *The use shall not involve, except as otherwise permitted in residence districts, the parking, storage or standing of any commercial vehicles or construction equipment or the outdoor storage of materials. This does not appear to be applicable to the application.*
 - C. *The use of any chemical, mechanical or electrical equipment, which is not a customary household appliance, or light office equipment, or is not ordinary to a home shop or garage, is not permitted unless expressly granted in the special permit, but in no event shall same be permitted if same becomes integral to the structure of the dwelling, or if emitting potentially harmful fumes or radiation, or if emitting noxious odors, or noise offensive or disturbing to neighboring properties, or if not capable of being powered by electrical mains of ordinary household current capacity (i.e., two-phase, 200 ampere service), or as otherwise prohibited in Subsection G. The floor plan provided by the applicant shows a **magnet therapy room**. It would not appear that this is a customary household appliance and is therefore prohibited or **requires express permission** from the Planning Board.*

- D. The activity shall not occupy more than 1/2 of the ground floor area of the principal structure or its equivalent elsewhere on the lot, if so used, but in no case more than 500 square feet. When requested by the Planning Board, a single line floor plan shall be provided together with the application for special permit. The Planning Board may require that the drawing be certified by an appropriate professional. **The application is not compliant with this maximum area requirement.** The applicant is currently proposing the use for the entirety of the basement, which has a similar area as the ground floor of the principal structure. Therefore, it would appear from quick estimations that the area is greater than 500 square feet. **The applicant should provide floor areas for each room and the total gross floor area for the proposed use and reduce the size of the project to comply.**
- E. No persons other than the occupants of the household may engage in the home occupation/home professional office. However, a maximum of one full-time person not residing in the household, or the equivalent of one full-time person, but not more than one person at the same time, may be employed therein if that employment is secondary to, but in support of and necessary to the occupation, and the residence is located such that the driveway access thereto is from a state or county road. If the residence and driveway access thereto is not so located, a nonresident of the household may not be employed thereat unless the occupation is of a nature which does not require contact with visitors in the residence for the purposes of the occupation. The applicant has indicated there will be at least five workers at the proposed use, including the owner, a part time assistant, part time female physical therapist, part time bookkeeper and part time secretary. **The application states that four outside, part time employees will be working approximately 20 hours per week each, which computes to 80 hours or two full time equivalents.** However, the applicant states these four part time workers will be equivalent to one full time employee, which is inconsistent. **We also note the applicant's driveway access is not directly located on a state or county road but rather takes access from Sheilah Court**
- As the house takes access from Sheilah Court, which is not a State or County Road, subsection F prohibits any nonresident employees. The applicant should reduce the proposed outside employment to one full-time equivalent.**
- F. The person engaging in the occupation must be the applicant, and must use the subject dwelling as his or her primary residence. If that person is not the record owner of the dwelling, said person must submit in conjunction with the application for a special permit an affidavit from a record owner, in a form as prescribed by the Village, which among other things, grants permission to engage in said occupation at the premises, and to make application therefore. The application appears to comply.
- G. There shall be no visual, olfactory, or auditory evidence of the use at the property line other than permitted accessory parking and a sign. Such evidence includes, but is not limited to nuclear, radiological, or electromagnetic emanations, or vibration, noise, light or other elements potentially disruptive to a residential neighborhood. The applicant is proposing a "magnet therapy room" as well as balance therapy room. **Please provide additional evidence that this standard can be met.**
- H. Wholesale, retail or service businesses which sell, lease, service or rent goods, products or services on a walk-in or drive-up basis are prohibited. The applicant should **confirm the services will only be provided on an appointment basis, not allowing walk-in services.**
- I. The use may not operate more than 35 hours per week, and only between the hours of 8:00 a.m. to 9:00 p.m., weekdays and one day on the weekend. The hours of operation shall be disclosed to the

Planning Board as a part of the application and shall be a condition of the special permit. The applicant must **provide more information in relation to the proposed hours of operation for the use.** No such information has been provided.

1. *Parking requirements shall be as stated in Article III of this chapter, and the location of parking spaces may be required to be specified on a plan.* According to the zoning code, home occupations/home professional offices allow a maximum of 3 spaces, not more than 2 of which shall be visible to the public way, plus two spaces for residents. We note there is a garage associated with the dwelling. **The applicant should demonstrate compliance with this parking requirement for 5 spaces, including the requirement that only two of these spaces will be visible from Sheilah Court.**
6. Historic and Scenic Road Overlay District. The project site is located within the Historic and Scenic Road Overlay District. The application may require a certificate of appropriateness from the Historic Preservation and Parks Commission depending on where any signage or changes to the exterior of the structure are proposed within the Overlay District.
7. **The Building Inspector, in consultation with the Planning Board Attorney, should provide an opinion whether the applicant can apply to the Zoning Board of Appeals for use and/or area variances, particularly for the size of the home occupation, the number of employees, and parking requirements.**

SEQR Procedural:

8. SEAF. **The applicant has not provided an SEAF** with the application. Note comment 10 below.
9. Type II. We recommend that when the Planning Board receives a complete application, it assumes Lead Agency under SEQRA and categorizes the action as **Type II, requiring no further environmental review.** The proposed action meets the criteria for 6 CRR-NY 617.5, Type II actions, item (9):

“(9) construction or expansion of a primary or accessory/appurtenant, nonresidential structure or facility involving less than 4,000 square feet of gross floor area and not involving a change in zoning or a use variance and consistent with local land use controls; but not radio communication or microwave transmission facilities;”
10. GML. In accordance with §239-l, 239-m, and 239-n of the General Municipal Law of the State of New York, **the project requires review by the Rockland County Planning Department** due to its proximity with County Route 85 and the Boundary of the Village of Montebello and the unincorporated area of the Town of Ramapo.

SPENCE ENGINEERING
CONSULTING & MUNICIPAL ENGINEERS

To: Village of Montebello Planning Board, CDRC
From: Martin K. Spence, PE Village Engineer
Date: July 29, 2024
Re: 1 Sheilah Court Home Office
49.17-1-3 CDRC

Martin K. Spence



We have received and reviewed the following plan;

- Application
- Narrative prepared by Savad Churgin Attorneys at Law, dated 6/5/2024
- Survey for Sternberg, prepared by Anthony R. Cefentano PLS, dated 5/5/2023
- Basement Level Physical Therapy Office Floor Plan

The application proposes using the single-family residence on a 1.16 acre lot as a home professional office for physical therapy. No addition to the residence is proposed as per the plans submitted. The home office will be located in the existing basement.

We offer the following comments:

1. A site plan shall be prepared showing access to the home office via sidewalks; parking as per Village Code; landscaping required to provide screening of onsite parking; proposed lighting and signage; and any site modifications that are proposed.

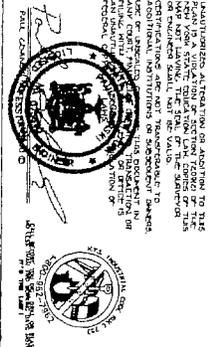
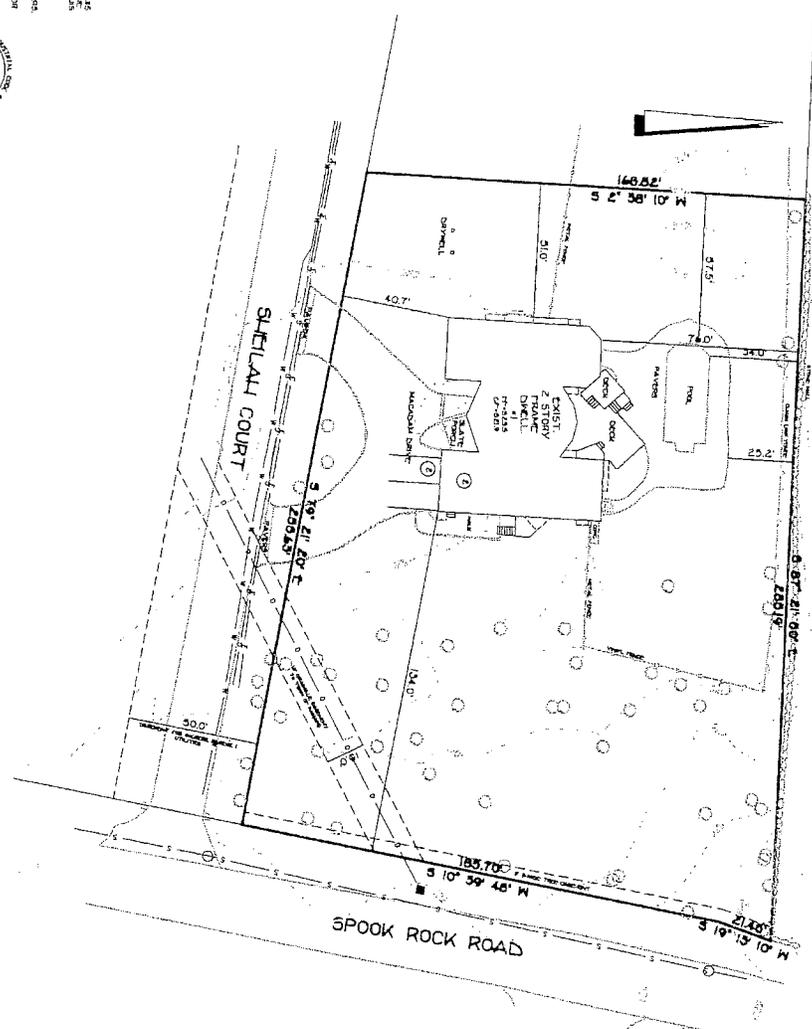
End of Report

TAX SECTION 4917 BLOCK 1 LOT 3

RECORDING INFORMATION: THIS DOCUMENT IS SUBJECT TO THE PROVISIONS OF THE REAL PROPERTY TAX ACT AND THE REAL PROPERTY TAX ACT. THIS DOCUMENT IS SUBJECT TO THE PROVISIONS OF THE REAL PROPERTY TAX ACT AND THE REAL PROPERTY TAX ACT. THIS DOCUMENT IS SUBJECT TO THE PROVISIONS OF THE REAL PROPERTY TAX ACT AND THE REAL PROPERTY TAX ACT.

BULK REQUIREMENTS ZONE RR-50 SPECIAL PERMIT-HOME OCCUPATIONAL/PHYSICAL THERAPY

| USE | MINIMUM LOT AREA (SQ. FT.) | MINIMUM FRONT YIELD (FEET) | MINIMUM SIDE YIELD (FEET) | MINIMUM REAR YIELD (FEET) | MINIMUM FRONT SETBACK (FEET) | MINIMUM SIDE SETBACK (FEET) | MINIMUM REAR SETBACK (FEET) | MINIMUM FRONT YIELD (FEET) | MINIMUM SIDE YIELD (FEET) | MINIMUM REAR YIELD (FEET) | MINIMUM FRONT SETBACK (FEET) | MINIMUM SIDE SETBACK (FEET) | MINIMUM REAR SETBACK (FEET) |
|-------------|----------------------------|----------------------------|---------------------------|---------------------------|------------------------------|-----------------------------|-----------------------------|----------------------------|---------------------------|---------------------------|------------------------------|-----------------------------|-----------------------------|
| RESIDENTIAL | 115 | 30 | 30 | 30 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| COMMERCIAL | 1350 | 40 | 40 | 40 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 |
| INDUSTRIAL | 1350 | 40 | 40 | 40 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 |

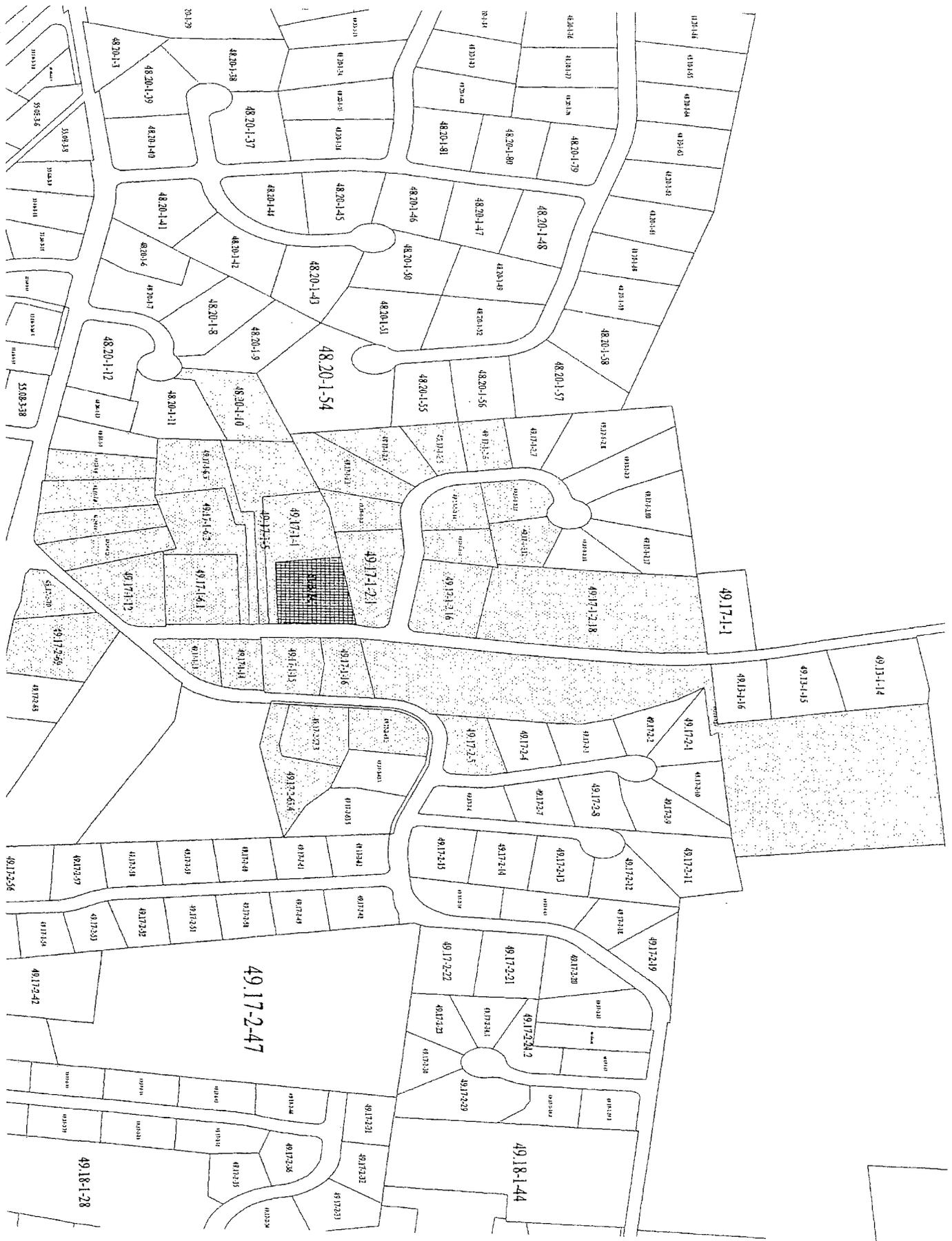


LANDSCAPE ARCHITECTURE: THE ARCHITECT HAS REVIEWED THE PLAN IN A VIVIDATION OF SECTION 1700 OF THE REAL PROPERTY TAX ACT AND THE REAL PROPERTY TAX ACT. THE ARCHITECT HAS REVIEWED THE PLAN IN A VIVIDATION OF SECTION 1700 OF THE REAL PROPERTY TAX ACT AND THE REAL PROPERTY TAX ACT. THE ARCHITECT HAS REVIEWED THE PLAN IN A VIVIDATION OF SECTION 1700 OF THE REAL PROPERTY TAX ACT AND THE REAL PROPERTY TAX ACT.

SITE PLAN FOR STERNBERG
 FOR
 PAUL GDANSKI, P.E., P.L.L.C.
 3512 WILMUTTER COURT
 MAHWAH, NEW JERSEY 07430
 (973) 418-0999
 EMAIL: P.GDANSKI@CARTEL.LINK.NET

ROCKLAND COUNTY, NEW YORK
 VILLAGE OF MONTICELLO
 TOWN OF RAMAPO

15'-0" PL.
 9/11/24
 1'-30"



48201-54

4917-1-1

4917-1-21

4917-247

4918-144

4918-1-28

48201-1

48201-2

48201-3

48201-4

48201-5

48201-6

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48201-281

89/49.17-2-70
GEORGE ANNIEAMMA J
278 SPOOK ROCK RD
SUFFERN, NY 10901

89/49.17-2-69
CONG SANZ OF LAKEWOOD INC
117 HIGHGROVE CRESCENT
LAKEWOOD, NJ 08701

17/49.17-1-8
DEUTSCH JACOB
135 HORTON DR
MONSEY, NY 10952

17/49.17-1-9
96 N AIRMONT LLC
10 CHAMPION PKWAY
MONTEBELLO, NY 10901

17/49.17-1-12
HAYWARD ALAN & DIANE
271 SPOOK ROCK RD
SUFFERN, NY 10901

17/49.17-1-10
CONSOLO TERESA
98 N AIRMONT RD
SUFFERN, NY 10901

17/49.17-1-11
SPIELMAN CHAIM &
SCHWARTZ SARA
275 SPOOK ROCK RD
MONTEBELLO, NY 10901

17/49.17-1-13
WILCOX ELAINE E LIVING
TRUST
266 SPOOK ROCK RD
SUFFERN, NY 10901

17/49.17-1-6.1
DIEHL HILDEGARD
269 SPOOK ROCK RD
SUFFERN, NY 10901

17/49.17-1-6.2
MANHERTZ ELOUISE
267 SPOOK ROCK RD
MONTEBELLO, NY 10901

17/49.17-1-6.3
WINIKOFF SARA
265 SPOOK ROCK RD
MONTEBELLO, NY 10901

17/49.17-1-14
KATZ MOSHE & ESTHER
264 SPOOK ROCK RD
SUFFERN, NY 10901

17/48.20-1-10
WOLLMAN RICK & SHARON
9940 SEAGRASS WAY
PALM BEACH GARDENS, FL 3341

17/49.17-1-5
TRYNAUER SOLOMON
5 SHEILAH CT
MONTEBELLO, NY 10901

17/49.17-1-15
STERNHILL ZIPORAH DINI &
DAVID
110 CARLTON RD W
SUFFERN, NY 10901

17/49.17-1-4
SEEMAN HERBERT & SHOSHANA
3 SHEILAH COURT
SUFFERN, NY 10901

89/49.17-2-63.4
GOTTLIEB STEVEN M & AMY G
115 CARLTON RD W
SUFFERN, NY 10901

89/49.17-2-63.3
SCHLEZINGER MARTIN &
BROWN LEAH & SCHNEEBALG
ERIE
113 CARLTON RD W
SUFFERN, NY 10901

89/49.17-2-5
HAUER JACK & PENINA
1 ARROWHEAD LANE
SUFFERN, NY 10901

17/49.17-1-3
STERNBERG ZVI
1 SHEILAH CT
SUFFERN, NY 10901

17/49.17-1-16
ZUPIC STEPHEN J
260 SPOOK ROCK RD
SUFFERN, NY 10901

89/49.17-2-63.2
WEISS SHIMON
111 WEST CARLTON RD
SUFFERN, NY 10901

17/49.17-1-2.18
253 S-ROCK ROAD LLC
59 CARLTON RD
MONSEY, NY 10952

17/49.17-1-2.19
MONTEBELLO VILLAGE OF
ONE MONTEBELLO ROAD
MONTEBELLO, NY 10901

17/49.17-1-2.1
STERN TZVI
5 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.2
BRAVER JOEL & RIFKIE
7 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.3
BRACHFELD EMANUEL MENDEL
9 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.4
GOMES LINDA J &
GETLER JANINE A
11 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.5
LAM-VO PHUONG & VO SANG V
15 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.6
MARTINEZ WALTER & DESIREE
17 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.12
CHEN GUY & JACOBS DONNA
12 FANT FARM LA
MONTEBELLO, NY 10901

17/49.17-1-2.13
DARTNALL RUSSELL & LOIS
10 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.14
CONG OHR HALEV
8 FANT FARM LANE
SUFFERN, NY 10901

17/49.17-1-2.15
NICI ANTHONY & JENNIFER
6 FANT FARM LANE
MONTEBELLO, NY 10901

17/49.17-1-2.16
MOETZINGER MARGARET &
MATTHEW
2 FANT FARM LANE
MONTEBELLO, NY 10901

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: PHYSICAL THERAPY HOME OFFICE IN BASEMENT OF EXIST'G RESIDENCE | | | |
| Project Location (describe, and attach a location map): 1 SHIELDA CT. MONTEBELLO NY | | | |
| Brief Description of Proposed Action: EXIST'G RESIDENCE 2 STORY 1 FRAME WITH BASEMENT A PORTION OF THE BASEMENT TO BE USED FOR OWNER'S PHYSICAL THERAPY HOME OFFICE | | | |
| Name of Applicant or Sponsor: MATTHEW OSCAR ARCHITECT | | Telephone: 845-642-7120 | |
| Address: 222 ACKERTOWN RD. | | E-Mail: MOSCAR.RA@Comcast.com | |
| City/PO: MONSEY N.Y., 10952 | | State: NY | Zip Code: 10952 |
| 1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? SPECIAL PERMIT REQUIRED BY THE PLANNING BOARD | | NO <input type="checkbox"/> | YES <input type="checkbox"/> |
| 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. | | | |
| 2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: | | NO <input type="checkbox"/> | YES <input checked="" type="checkbox"/> |
| 3. a. Total acreage of the site of the proposed action? _____ acres | | NOT APPLICABLE NO DISTURBANCE TO A CREAGE. | |
| b. Total acreage to be physically disturbed? _____ acres | | | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres | | | |
| 4. Check all land uses that occur on, are adjoining or near the proposed action: | | | |
| <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input 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 | | | |

| | | NO | YES | N/A |
|--|--|-------------------------------------|-------------------------------------|--------------------------|
| 5. | Is the proposed action, | | | |
| 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? | <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? 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? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| b. | Are public transportation services available at or near the site of the proposed action? | <input type="checkbox"/> | <input type="checkbox"/> | |
| c. | Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9. | Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: <u>THE ACTION MEETS THAT STATE ENERGY CODE</u> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. | Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: <u>EXIST'G HOME WITH WATER SERVICE EXIST'G</u> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. | Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: <u>EXISTING SEWER CONNECTION NO CHANGE</u> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. | a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| b. | Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory? | <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? | <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 plan? | NO | YES |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, | NO | YES |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. Will storm water discharges flow to adjacent properties? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | |
| | | |
| 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)? If Yes, explain the purpose and size of the impoundment: | NO | YES |
| | <input checked="" type="checkbox"/> | <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 | YES |
| | <input checked="" type="checkbox"/> | <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 | YES |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | |
| I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE | | |
| Applicant/sponsor/name: <u>MATTHEW OSCAR, ARCHITECT</u> Date: <u>7/28/24</u> | | |
| Signature: <u><i>[Signature]</i></u> Title: <u>ARCHITECT</u> | | |

PRINT FORM