Zoning Board of Appeals
Village of Tarrytown
Regular Meeting
Village Hall – 1 Depot Plaza
August 8, 2022 7:30 p.m.

PRESENT: Chairwoman Lawrence, Members Weisel, Kaplan, Abraham, Alt. Member Jolly, Counsel Addona; Village Engineer Pennella; Secretary Meszaros

ABSENT: Member Rachlin, Alternate Member Kudla.

APPROVAL OF MINUTES – June 13, 2022

Ms. Weisel moved, seconded by Ms. Kaplan, with Mr. Abraham abstaining, to approve the minutes of the of the June 13, 2022 regular meeting as submitted.

The secretary recorded the vote:
Member Weisel: Yes
Member Kaplan: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes
All in favor. Motion carried. 4-0

APPROVAL OF MINUTES – July 11, 2022
Ms. Kaplan moved, seconded by Ms. Lawrence, with Member Weisel and Alt. Member Jolly abstaining, to approve the minutes of the of the July 11, 2022 regular meeting as submitted.

The secretary recorded the vote:
Member Kaplan: Yes
Member Abraham: Yes
Chair Lawrence: Yes
All in favor. Motion carried. 3-0

ADJOURNMENTS:

Counsel Addona announced the following applications that have been adjourned at the applicant's request, to the next regular meeting:

Michael and Janaki Degen
86 Crest Drive
Variances to construct a second story over the existing garage and principal dwelling and a one-story rear addition.

ADJOURNMENTS (continued):

Mercy College
828-832 South Broadway
Applicant is seeking an interpretation/appeal pursuant to New York State Village Law and the Village of Tarrytown Zoning Code appealing the Building Inspector's determination requiring the applicant to seek certain setback variances from the Zoning Board and a Compatible Use Permit from the Board of Trustees in order to expand the parking lot areas with accessibility and infrastructure improvements. The applicant seeks approval of the variances under appeal, should the Board determine they are required, in addition to the variance noticed.

NEW PUBLIC HEARING – MMC Corp./Montefiore Medical Center – 555 S. Broadway

Jack A. Addesso, Attorney, representing the applicant appeared before the Board with representatives from Montefiore Corporation, Stefano Cardarelli, the project architect, and Steven Tuckman, the Laboratory Director at Montefiore. They presented renderings of the site, along with the site plan and interior plans. Mr. Addesso referenced his letter to the Board, dated July 28, 2022, in response to the discussion with the Board at the July 11, 2022 meeting and his subsequent email from Counsel Addona, addressing the items that were discussed. Ms. Lawrence asked Mr. Addesso to briefly summarize his main points in the letter.

Mr. Addesso advised that the first question was whether or not what they are proposing is a distribution center. They indicated that it was not a distribution center. Mr. Tuckman, the laboratory director, provided information on how the laboratory would run. There was a question regarding a pilot program and they believe that "research protocol" is comparable to a "pilot program", as it relates to the medical profession. He provided an explanation in the letter but briefly explained that a Doctor from the Montefiore network presents a protocol to the laboratory for a particular kind of medication for a patient. Research protocols are very specific to a particular patient. Just like a pilot program in a commercial field is specific to a particular product being developed. When a doctor presents this protocol to the lab, the lab begins to research and develop the product for use on the patient. They track it to see how the patient responds to it, and they may tweak it. The protocol changes until eventually they get it to the point where it begins to do what the doctor requires. At that point in time, the medication or the product, becomes something that is complete, and probably could be gotten as a prescription filled in any CVS or pharmacy and would not have to be filled at this research laboratory.

Mr. Addesso also advised that they gave information as to the certain number of trips that were coming in and out of the facility. He believes they had four trips a day with small trucks. An Amazon type truck and a truck that the hospital would send with product for the lab would be used. The lab would send a product back to a distribution center located in the Bronx for distribution to the different Montefiore hospital locations. These were the two major sections that Mr. Addesso felt had to be explained in a more direct manner. He advised that the July 28, 2022 letter specifies the code sections that

were raised with regard to how their operation falls within the provisions of the code. Mr. Addesso explained that the lab is for pharmaceutical research, and will not be used for storage, except for materials needed to put together the medicine. Mr. Tuckman, the Laboratory director, will have an office, there will be a meeting room for the staff. The offices will not be used for any other purpose except for the laboratory.

Ms. Lawrence asked if anyone else from the Montefiore team would like to speak.

Mr. Jolly asked of this is a new program and do other hospitals do it. Mr. Addesso said it is not a new program. This particular location was always intended to be a research laboratory for Montefiore's use.

Mr. Abraham referred to the zoning code section 305-34 (B)(2)(c) stating that the products can only consist of "small quantities, for test or trial products, models or prototypes of newly developed or redesigned products". He asked Mr. Addesso how he would describe these medical products. Mr. Addesso said they call them research protocols but they could be referred to as pilots. He explained that they are producing a product that is researched at that location, based upon the protocol provided to the laboratory, from the medical people, at the various hospital locations, to be used by their patients. If a patient has a particular illness, they work with a particular type of treatment, or a modification of a drug, or the creation of a new drug, which is all part of the research protocol. These are small batches since they are not dealing with hundreds of thousands of patients at one time. A pilot program can be small or large depending upon what is being studied, whereas the research protocol, in this particular instance, is limited to a particular patient.

Mr. Abraham asked if the expectation is that they may might be thousands of patients that they are tracking for the purpose of altering the medications or the drugs. Mr. Addesso said, at some point, they may have 4000 patients, but they are not necessarily being tracked or having protocols worked on at this facility. There may be 4000 patients in the Montefiore system that are being treated for various ailments or illnesses, but that does not mean that every one of them is going to have a particular protocol, prepared by a doctor, for research on a particular medication.

Ms. Weisel asked if there are non-research pharmaceuticals being put together on this site for patients who are not within the research protocol. She asked if patients sign up specifically for research protocol and are listed as someone being studied within a protocol. Mr. Addesso said this is all within privacy laws. It is between doctor, patient, the hospital and research facility.

Ms. Weisel asked if the patients pay for these medications. Mr. Addesso said that they probably pay through insurance policies, Medicare, and Medicaid, private insurance policies. Ms. Weisel confirmed with Mr. Addesso that the difference between this and a pilot program is that the study subjects would not being paying for the drug.

Steven Tuckman, the laboratory director, came up to give an example of a research protocol. The population is defined by whatever the protocol is. An example would be 50 patients with ovarian cancer. Those 50 patients are going to be on a protocol of a drug that already exists, but does not exist in the dose with the strength that they are planning on using. In theory, there is no limit to the number of patients, but for all practical reasons, their numbers are always small. With regard to pilot vs. research protocol, he gave an example of the study of macaroni and cheese where they would make one big batch of it and test it. Because of the nature of medications, if there are 50 patients in a protocol, you would only give it to the patient when they are due to take it. Therefore, not every patient is tested on the same day and, in addition, the product is not necessarily stable for more than 24 hours. So, it could be more than a month, depending upon when the patients are due.

Ms. Lawrence is confused. She feels like the applicant has drifted away from the discussion at the first meeting. She thought that it would be more like an individual doctor calling in about their individual patient in a hospital and that doctor would ask the lab to compound this drug for this the patient. It would then be compounded and monitored to see if it is proper medication for that patient. This current discussion is about protocol and doing a study. She is confused and would like to know exactly what the goal is of their research laboratory.

Mr. Tuckman gave an example of their Oncology Department. They have 50 oncologists and 20 of them are focused on cervical cancer. Those 20 oncologists or prescribers, located within the network throughout the Bronx and Westchester, will work to enroll their patients should the patient elect to be part of it within the protocol. It is really a group of prescribers/specialists, not just one doctor. Mr. Tuckman said that it is individual in that it is a small number. He gave an example that there are over 200 million people who take Tylenol, which is a very large number. There are certain drugs that are not taken by many people for different ailments, so they have a protocol for those types of drugs and patients.

Mr. Abraham asked if every drug that is produced, assembled, modified or tweaked at the laboratory is specifically for a research protocol, or could there be 50 cancer patients that are signed up, and if the drug is effective, would they manufacture that drug for other patients through the Montefiore distribution center. Mr. Tuckman said the research protocol is over with what happens with that truck. If another protocol comes up, then they will continue with it. It is the patient's choice whether or not to participate. Anecdotally, many patients drop out for different reasons. They may have an adverse reaction to the drug, move out of state, or just lose interest.

Mr. Abraham re-stated his question to make it clearer to Mr. Tuckman. He asked if patient #1 participates in a particular protocol for a drug and five months down the road, patient #2 comes in, who was not part of that protocol, but a doctor feels that the drug that was tweaked could be good for patient #2, would that drug be manufactured for patient 2? Mr. Tuckman said no, patient #2 would not be part of the initial protocol, so they would be welcomed to go to CVS or some other pharmacy.

Ms. Weisel asked Mr. Tuckman what makes this different from a compounding pharmacy. Mr. Tuckman explained that a compounding pharmacy mixes drugs together based on a prescription; there is no research going on behind it. For example, if a baby cannot take a medication and it needs to be created in a suppository form, then they would use a compounding pharmacy or, if there is a cream that needs to be made that does not exist in the commercial world, then they would use a compounding pharmacy. Is there a real science on whether these things work or not, sometimes there is and sometimes not.

Ms. Weisel said so it may be that a doctor is tracking something that he sent to a compounding pharmacy and what Mr. Tuckman is saying is that there is a research protocol group studying a specific thing that has been compounded on the premises. She asked Mr. Tuckman how long the studies can last. Mr. Tuckman said studies vary and can last three months to two years. Sometimes results are fast and sometimes longer studies end sooner because no real data is coming in.

Ms. Weisel asked if Montefiore is affiliated with a specific drug manufacturer. Mr. Tuckman said that funding for this is from insurance, manufacturers, and foundations. He gave an example that the hemophilia foundation would subsidize medications for hemophilia.

Mr. Jolly thought that most research is done by the pharmaceutical companies like Pfizer, Moderna and J & J, and he asked if the hospitals deal with these companies when they need a certain drug that is already put together. Mr. Tuckman explained that once a drug manufacturer has approval to sell a drug to the public, they continue to do research as required to by the FDA, but they are not looking to change it. Their studies have been done on what they are selling. Doctors dispense drugs in a manner that they think is appropriate. For example, if the bottle says take two pills a day and the doctor thinks it should be three pills a day, that is along the lines of what their research is for.

Mr. Jolly asked Mr. Pennella to clarify and comment on what they have listened to this evening. Mr. Pennella asked the applicant to show the plan of the layout of the laboratory. He asked if this laboratory is similar to the Regeneron Laboratory located in Tarrytown. Mr. Tuckman said they are not similar to Regeneron. Regeneron researches new entities; their laboratory researches the use of entities in a way that is different.

Mr. Pennella referred to the conveyor belts throughout the plan. He said that typically, research Laboratories do not have conveyor belts. They are used for production to move mass quantities and products. This is what led him to his determination that it is more of a production use rather than a pilot program for testing a small amount of quantities to use for full scale production.

Mr. Jolly expressed his concern that hospital stays are not very long and patient relationships are with the doctor. It could take a long time to develop this compound

and very possible that the patient will not be there long enough to get the treatment. Mr. Tuckman advised that the research protocol they will be doing does not apply to in-patient care. Their research would be for patients being seen by Montefiore providers throughout the Bronx and Westchester or patients that are no longer in the hospital.

Ms. Weisel said that she often hears from people that they are volunteering to be part of a study for a specific disease. She asked Mr. Tuckman if that is similar to their protocol. Mr. Tuckman said it was. Ms. Weisel also noted that patients pay for this through insurance with your process, as opposed to a volunteer study where they do not pay. Mr. Tuckman advised that the funding for research often comes from pharma. Once you have a protocol going, the manufacturer, insurance, or foundations provide the funding. They have to provide data on other things, not related to this, but they have to provide data to insurance and payers in order to maintain access. Ms. Weisel asked if that involves out of pocket expenses from the participants in the research protocol. Mr. Tuckman said no.

Counsel Addona wanted to clarify with Mr. Tuckman that the patients do not pay, either through insurance, or in any manner for the medication. She asked if there is any payment by the patient. Mr. Tuckman said there is no payment for the research protocol. Counsel Addona said this is the crux of what the code says with regard to what the permitted use is and that is why it is necessary that the Board ask these questions. It is very important that this be clarified.

Mr. Tuckman said if there was some additional product, like a Tylenol, that needs to be given with the product, that would be paid for, since it is not part of the protocol.

Counsel Addona again asked if the patients are paying for the medication they receive. Mr. Tuckman said no. Counsel Addona said then it is not a sale or an exchange of goods. Mr. Tuckman agreed. Ms. Kaplan asked if the medicine goes on the market for sale, is it available to get anywhere. Mr. Tuckman said the medicine is already on the market, they are tweaking it for individuals, in a research protocol.

Ms. Lawrence asked if any of the medications will be sold to the patients. Ms. Kaplan asked if they work, will they get the medicine free forever. Mr. Tuckman said they get the medicine free only when they participate in the protocol. Ms. Lawrence commented that she assumes that they are trial products and that is why there is no charge.

Ms. Weisel asked if anyone has any questions about the conveyor belt issue.

Mr. Addesso returned and asked Mr. Pennella to elaborate on his determination that, because the conveyor belts are installed, he believes that makes their laboratory a production laboratory rather than a research laboratory.

Mr. Pennella did some research and stated that Regeneron is a research laboratory. They have two facilities, one located in Tarrytown and the other in Rensselaer. Their Tarrytown facility is a research laboratory and they do not use conveyor belts. They

have loading docks where they bring in small quantities and test them, and once tested, then they are manufactured in the Rensselaer plant where they have the conveyor belts for distribution. Mr. Pennella said that he is asking these questions to understand the difference between their proposal and a research facility.

Counsel Addona asked if they could explain the need for the conveyor belts.

Stefano Cardarelli, the project architect, came up and advised that he has designed laboratories with conveyor systems. He has designed labs for the Siemens Facility, located on 511 Benedict Avenue in Tarrytown. They have been his client for 20 years. This facility uses centaur systems for blood testing research. They use conveyor belts to move the blood samples without touching them to prevent contamination to the next station, where they package it and send it out. This Montefiore conveyor system is designed with stations, where it is handled by the pharmacist, then it gets coded since it is tracked by the state, then packaged and loaded onto the vehicles headed to the Moses Campus for distribution.

Counsel Addona asked Mr. Tuckman if these programs are currently happening at other locations in their network. She would like information about exactly what is happening at these locations since Mr. Tuckman said in an earlier meeting that they wanted to consolidate the research that is happening at other locations to one campus. Mr. Tuckman said two of their pharmacies at the Moses campus adjust the doses, but they do not have the facility needed in the hospital to do what they want to do in Tarrytown. It is limited at the hospital and they are not manipulating drugs. They do what they can but they cannot take a vial and give it to a patient in a modified dose under the protocol, but they do provide syringes and directions in order to adjust the dosage for patients and train patients to administer it to themselves. Mr. Tuckman also noted that they have a medical school associated with Montefiore and it very common for most large academic medical centers in America to do this type of research.

Mr. Jolly asked if there is an approval process for them by the CDC or FDA. Mr. Tuckman said that the CDC and the FDA do not have oversight on what they do with the drugs for the most part. The FDA does regulate the environment that the research is being done in order to prevent any contamination of a drug for safety. The CDC does not have any oversight of their operation.

Ms. Lawrence asked Mr. Tuckman if some of the other teaching facility hospitals do have this protocol already in place and Montefiore has several hospitals within the Montefiore system that is doing this on a limited basis.

Mr. Tuckman said other academic medical centers, not Montefiore, are doing this type of research. They currently do not have the capacity to take a vial and provide a dose to the patient that is not the regular dose.

Mr. Lawrence commented that they are doing this research on a limited basis, but there are other academic medical centers that do what they are proposing. Mr. Tuckman agreed.

Mr. Abraham stated that there is some inconsistency with whether or not patients would be paying for this in any way or whether their insurance would pay. He thought at the last meeting, it was stated that patients were paying for the medicine. He asked if that was incorrect or if it needs to be amended tonight to confirm that patients are not paying for the drug and there is no exchange of goods. Mr. Tuckman said that the patient is not paying for the drug that they get from the research protocol.

Mr. Abraham asked if only research protocol drugs are produced at the proposed laboratory and patients do not pay for the drugs. Mr. Tuckman agreed and said that the hospital is re-numerated by insurance companies because of the research that they do. The same situation applies to manufacturers and foundations. Counsel Addona asked if the companies pay, that is separate from patient specific insurance. Mr. Tuckman said yes and gave an example of a company who would fund $100,000 for asthma research.

Mr. Abraham commented that he now understands that the end user is not paying for the drug. He asked Mr. Tuckman again, as it relates to the code language, if he would describe these products as tests or trial products, models, or prototypes of newly developed or redesigned products. Mr. Tuckman said yes. Mr. Abraham is confused and asked Mr. Tuckman if the drugs are all of these things. Mr. Tuckman explained that what they are proposing applies to the language in the code, but not 100% of the language. He does not believe you have to check every box in the code. Mr. Abraham asked Mr. Tuckman if they are test or trial products. Mr. Tuckman said they are test products. Mr. Abraham asked Mr. Tuckman if they are models or prototypes of newly developed or redesigned products. Mr. Addesso came back up and said there is a broad definition for prototype. It could be for a particular airplane, valve or a machine. This language in the code does not necessarily fit the medical field. You could say that the drugs they are creating as part of the protocol are a prototype. A pilot, in this case, is a protocol, so he asked if the drug itself a prototype. Mr. Abraham explained to Mr. Addesso that he is asking these questions to determine if the use they are describing fits in with the language in the code to determine if it is a permitted use. This is the language the Board has to interpret. Mr. Addesso said Mr. Tuckman has described how the use fits into the language. They are producing a product based upon a protocol that has been created or has been asked for by the doctor. When you say the word prototype, he asked Mr. Abraham, what he thinks it means.

Counsel Addona clarified for Mr. Addesso that the burden is on the applicant to demonstrate that the proposed use fits within the code. Mr. Abraham is reading directly from the code, which was provided to Mr. Addesso after the last meeting so that we would not have to go around in circles at this meeting. Mr. Addesso said we are not going around in circles. He is telling the Board that the things that Mr. Abraham has

asked and that Mr. Tuckman has discussed this evening is exactly what they will be doing in this laboratory.

Mr. Abraham said that Mr. Tuckman earlier stated that these products would fall under test or trial products. He asked Mr. Tuckman if these products would be testing the characteristics and qualities of such products. Mr. Tuckman said they are researching to test the effectiveness of the product. The language in the code is geared more toward the manufacturing side of research rather than the scientific side of research. They are taking a product, not naming it, and are determining at what strength or dosage it is effective for the treatment of a disease.

Ms. Lawrence said at this point, she believes that the Board understands what the applicant has presented to us. She noted the additional information that has submitted in writing. The Board has asked many comprehensive questions and the applicant has provided a comprehensive response. She suggested closing the public hearing.

Counsel Addona advised that it may be better to keep the hearing open since additional information has been given this evening and the Board may have additional questions, or, if the Board wishes, they can close the public hearing and authorize Counsel to prepare a resolution in advance the next meeting for the Board's consideration, based upon the discussion this evening.

Ms. Lawrence moved, seconded by Ms. Weisel, to close the public hearing.

The secretary recorded the vote:
Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes
All in favor. Motion carried. 5-0

<u>NEW PUBLIC HEARING – Rosann Cardillo – 34 Bridge Street</u>

The following public hearing notice was made available to the public at the meeting:

PLEASE TAKE NOTICE that the Zoning Board of Appeals of the Village of Tarrytown will hold a public hearing at **7:30 p.m. on Monday, August 8, 2022**, in the Municipal Building, One Depot Plaza, Tarrytown, New York, to hear and consider an application by:

Rosann Cardillo
34 Bridge Street
Tarrytown, NY 10591

For variances from Chapter 305 of the Village of Tarrytown ("Zoning Code") for the construction of a rear deck, the installation of a shed and the conversion of an attached garage to habitable space with interior renovations to a single-family dwelling.

The property is located at 34 Bridge Street and is shown on the Tax Maps of the Village of Tarrytown as Sheet 1.100, Block 65, Lot 86 and is located in the R-7.5 Zone.
The variances sought are as follows:

Code Section	Required/ (Permitted)	Existing	Proposed	Variance Required
§305-47.B. Yards Setbacks- Attachment 5:1				
Column 14: Minimum Rear Yard Setback Deck - South Side 305-47B. (5) 26'-6'=20ft	20 feet	n/a	16 feet	4 feet
Column 16: Minimum distance from an Accessory building to Side Lot Line - Shed	10 feet	n/a	3 feet	7 feet
Column 17: Minimum Distance from an Accessory building to Rear Lot line- Shed	10 feet	n/a	6 feet	4 feet
§305-49 Impervious Surface	(40.75%)	40.5%	44.0%	3.25%
§305-63C(3)(b) Off Street Parking, Minimum Distance from Side Lot Line	10 feet	n/a	2 feet	8 feet

Documents are available for inspection in the Planning and Zoning Office at Tarrytown Village Hall. All interested parties are invited to attend and be heard. Access to the meeting room is available to the elderly and the handicapped. Signing is available for the hearing impaired; request must be made to the Village Clerk at least one week in advance of the meeting.

Additional approval is required from the Architectural Review Board.

By Order of the Zoning Board of Appeals

Lizabeth Meszaros
Dated: July 29, 2002 Secretary to the Zoning Board

The mailing receipts were received and the sign was posted. Board Members visited the property.

Sam Vieira, RA, appeared before the Board representing Rose Cardillo, the owner, also present, who they met at the site visit yesterday. Mr. Vieira presented the site plan showing relatively small modifications to the floor plan which have triggered variances; however, the footprint of the structure remains the same. The applicant would like to reconfigure the first floor, first-floor plan to make it easier in preparation for Mrs. Cardillo's future residency here. They will enlarge the bathroom, bring the laundry up to

the first floor from the basement. What is now being used as a dining area will become an open plan kitchen and the single car garage will become the dining room. They will add in windows and French doors so that Mrs. Cardillo can enjoy the view of the Hudson River. They will increase the size of the existing low-lying wood deck, and situate the deck on the south side of the house behind it, to accommodate two distinct areas: one for a lounge, and the other for dining. The extension of the deck will require a variance of 4-feet since the deck will be 16- feet from the property line where 20 feet is required. Without the additional four feet, the deck would be too narrow. They will be turning the single car garage into livable space for the dining area and will need to show two parking spaces on site plan since they do not have the ability to use the garage. They are only able to maintain a 2-foot separation where 10-foot is necessary, so an 8-foot variance is required. He noted that the house to the east also has a driveway running along the property where they park their cars. Mrs. Cardillo would like to install an 8 x 10 foot shed for use as storage since she will not have the garage space. The shed has been placed so that it is adjacent to the shed on the detached garage of the neighboring property so there will not be any encroachment on privacy. It is also situated at the end of the existing blacktop driveway so it will be easier for loading and offloading tools, gardening supplies, etc. The placement of this shed will require variances of 4- feet and 7-feet due to the proximity to the rear lot and side yard. Lastly, because they are introducing a structure that is impervious, the impervious surface gets increased slightly above the required, but he noted that the lot is undersized at 6,000 s.f. He ended his presentation stating that all of the work proposed is at the rear of the property with very little visual impact to the neighborhood in general.

Mr. Vieira advised Ms. Weisel that the driveway will remain as is with no changes, nor will the footprint of the house change.

Mr. Pennella asked about the sewer easement and if that would be a problem for the placement of the shed. Mr. Vieira was not aware of any easement and it was not shown on the deed. He noted that the shed has no foundation, so if access was needed, it could easily be moved.

Ms. Lawrence asked for public comment. No one appeared. Mrs. Cardillo advised that one of her neighbors offered to write a letter to the Board in support of the project.

Mr. Vieira confirmed with Mr. Jolly that there is no increase in the floor area.

Ms. Weisel moved, seconded by Ms. Kaplan, to close the public hearing.

The secretary recorded the vote:
Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes
All in favor. Motion carried. 5-0

Ms. Lawrence read through and responded to the criteria for an area variance.

1. That no undesirable change will be produced in the character of the neighborhood nor will a detriment to nearby properties be created by the granting of the area variance. *Ms. Lawrence stated that the proposed project does not change the is in line with other similar neighboring properties that have converted their garages to livable space. There is also no change to the footprint or any changes that can be seen from the street so there will be no undesirable change.*

2. That the benefit sought by the applicant cannot be achieved by some method, feasible for the applicant to pursue, other than an area variance*. Ms. Lawrence stated that the benefit sought by the applicant cannot be achieved by some other method other than the area variances due to the pre-existing-non-conformity of the lot.*

3. That the requested area variance is not substantial. *Ms. Lawrence stated that the requested variances are substantial.*

4. That the proposed variances will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district. *Ms. Lawrence stated that the proposed variances will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district.*

5. That the alleged difficulty was self-created which consideration shall be relevant to the decision of the Board of Appeals but shall not necessarily preclude the granting of the variance*. Ms. Lawrence stated that it is self-created but that does not preclude this Board from granting the variances.*

Mr. Abraham moved, seconded by Ms. Weisel, to approve the requested variances, and authorize Counsel Addona to prepare a Resolution to include this condition and the standard conditions based upon the general discussion during the public hearing.

The secretary recorded the vote:

Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes

All in favor. Motion carried. 5-0

NEW PUBLIC HEARING – Steven Secon, RA – 131 Neperan Road

The following public hearing notice was made available to the public at the meeting:

PLEASE TAKE NOTICE that the Zoning Board of Appeals of the Village of Tarrytown will hold a public hearing at **7:30 p.m. on Monday, August 8, 2022**, in the Municipal Building, One Depot Plaza, Tarrytown, New York, to hear and consider an application by:

Steven Secon, RA
145 Palisade Street
Dobbs Ferry, New York 10522

For variances from Chapter 305 of the Village of Tarrytown ("Zoning Code") for the construction of an exterior wood ramp and interior alterations to a single-family dwelling. The property is located at 131 Neperan Road and is shown on the Tax Maps of the Village of Tarrytown as Sheet 1.50, Block 22, Lot 3 and is located in the R-10 Zone.

The variances sought are as follows:

Code Section	Required/ Permitted	Existing	Proposed	Variance Required
§305-20 Residential R-10 Zone Attachment 5:1 - Column 14: Minimum Rear Yard Setback - West	28 ft.	13.3 ft.	19.8 ft.	8.2 ft.
§305-25 Maximum Floor Area	3,500 sq. ft.	5,214 sq. ft.	5,582 sq. ft.	368 sq. ft.

Documents are available for inspection in the Planning and Zoning Office at Tarrytown Village Hall. All interested parties are invited to attend and be heard. Access to the meeting room is available to the elderly and the handicapped. Signing is available for the hearing impaired; request must be made to the Village Clerk at least one week in advance of the meeting.

Additional approval is required from the Planning Board and the Architectural Review Board.

By Order of the Zoning Board of Appeals

Lizabeth Meszaros
Secretary to the Zoning Board

Dated: July 29, 2022

The mailing receipts were received and the sign was posted. Board Members visited the property.

Steven Secon, RA, the project architect, appeared before the Board, and introduced the owner, Blake Harrison, also present. He presented the site plan and noted the site visit

by the Board Members. Mr. Secon showed the plan and noted the 25-foot grade change in homes in this area. He noted the abandoned door leading to the basement in the rear of the home currently has no access and there are safety concerns. The Harrison family would like to make this basement area into a playroom for their young children and for storage. In order to accommodate this access to the basement, he showed the proposed ramp on the plan. He noted that the home already sits in a non-conforming condition, so by increasing the non-conformity, a rear yard variance will be needed for the proposed ramp with a 4- foot square landing. In addition, a FAR variance for the increase in livable space in the basement is also needed. He showed the small retaining wall which is also in disrepair. In order to bring equipment around, this wall will need to be moved a few feet to the southwest. Mr. Secon feels that this is the best plan, with the least disturbance to the steep slope, which is about 20 to 30 s.f.

Ms. Lawrence asked if this house has an historic designation. Mr. Pennella advised that it is not designated but there are two homes in the area, 121 and 111 Neperan Road, that do have an historic designation.

Mr. Pennella asked if the applicant if they intended to use this space for a separate living unit. Mr. Harrison, the owner, came up and said this space will only be used for the family as a recreation room. The intent is to have safe access to the back of the basement with the least intrusion as possible, while maintaining the historical character of the home.

Counsel Addona asked Mr. Harrison if he had any objection to including a condition in the resolution that the property will continue to be used as a single-family home. Mr. Harrison had no objection to this condition.

Ms. Lawrence asked if anyone in the public wished to comment on this application. No one appeared.

Ms. Weisel moved, seconded by Ms. Kaplan, to close the public hearing.

The secretary recorded the vote:
Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes

All in favor. Motion carried. 5-0

Ms. Lawrence read through and responded to the criteria for an area variance.

1. That no undesirable change will be produced in the character of the neighborhood nor will a detriment to nearby properties be created by the granting of the area variance. *Ms. Lawrence stated that the proposed project will not change the*

character of the neighborhood nor will a detriment to nearby properties be created by the granting of the area variance since the work that is being done is in the rear of the property.

2. That the benefit sought by the applicant cannot be achieved by some method, feasible for the applicant to pursue, other than an area variance*. Ms. Lawrence stated that the benefit sought by the applicant cannot be achieved by some other method other than the area variances due to the pre-existing-non-conformity of the lot.*

3. That the requested area variance is not substantial. *Ms. Lawrence stated that the requested variances are not substantial.*

4. That the proposed variances will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district. *Ms. Lawrence stated that the proposed variances will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district.*

5. That the alleged difficulty was self-created which consideration shall be relevant to the decision of the Board of Appeals but shall not necessarily preclude the granting of the variance*. Ms. Lawrence stated that it is self-created but that does not preclude this Board from granting the variances.*

Ms. Kaplan moved, seconded by Mr. Jolly, to approve the requested variances, and authorize Counsel Addona to prepare a Resolution to include the standard conditions along with a condition that the property will continue to be used as a single-family home, based upon the general discussion during the public hearing.

The secretary recorded the vote:
Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes

All in favor. Motion carried. 5-0

<u>NEW PUBLIC HEARING – Michael Varland, RA – 57 Grove Street</u>

The following public hearing notice was made available to the public at the meeting:

PLEASE TAKE NOTICE that the Zoning Board of Appeals of the Village of Tarrytown will hold a public hearing at **7:30 p.m. on Monday, August 8, 2022**, in the Municipal Building, One Depot Plaza, Tarrytown, New York, to hear and consider an application by:

Michael Varland, RA
368A Broad Street
Bloomfield, NJ 07003

For variances from Chapter 305 of the Village of Tarrytown ("Zoning Code") for the conversion of an unenclosed porch to habitable space with interior renovations to a single-family dwelling.

The property is located at 57 Grove Street and is shown on the Tax Maps of the Village of Tarrytown as Sheet 1.80, Block 50, Lot 3 and is located in the R-10 Zone.

The variances sought are as follows:

Code Section	Required/ (Permitted)	Existing	Proposed	Variance Required
305-20. Residential R-10 Zone:				
Attachment 5:1- Column 14: Minimum Rear Yard Setback Conversion of Unenclosed Porch (West)	28 feet	n/a	19 feet	9 feet
Attachment 5:1- Column 12: Minimum for Each Side Yard (Egress window well on North/East)	12 feet	n/a	2.9 feet	9.1 feet
§305-25 Maximum Floor Area - Table 2 (Undersized lot 8,000 SF)	0.38 or (3,056 S.F.)	3,275 S.F.	0.43 or 3,469 S.F.	.05 or 194 S.F.

Documents are available for inspection in the Planning and Zoning Office at Tarrytown Village Hall. All interested parties are invited to attend and be heard. Access to the meeting room is available to the elderly and the handicapped. Signing is available for the hearing impaired; request must be made to the Village Clerk at least one week in advance of the meeting.

Additional approval is required from the Architectural Review Board.

By Order of the Zoning Board of Appeals

Lizabeth Meszaros
Secretary to the Zoning Board

Dated: July 29, 2022

The mailing receipts were received and the sign was posted. Board Members visited the property.

Michael Varland, RA, the project architect, appeared before the Board and introduced Mary O'Neill, the property owner. He presented the plan and briefly went over the two side and rear yard variances and a FAR variance that they will need to move forward with their project.

They would like to convert the existing 300 s.f. porch into livable space in order to open up the living room and dining room area and make the space bigger. The porch will have new casement windows. He advised that this home is not within the Historic Grove Area district. The rear yard setback is due to encroachment of the porch on the Old Croton Aqueduct trail, owned by the State of New York.

Mr. Varland noted that the home is a two-family. There is an existing apartment on the floor. The main residence is in the ground level and basement. They will be flipping it and putting the apartment in the basement area and the main residence on the first and second floor. The egress window well on the north east side of the property will also require a variance.

Mr. Pennella advised that the porch area that encroaches on the aqueduct does is not owned by the village and the State could ask them to remove it from their property. Mr. Pennella advised that he will confirm that there is a certificate of occupancy for a two-family home. It is pre-existing non-conforming.

Mr. Varland said he called the state and they said it is an existing vegetable garden and it should be okay.

There was no one in the public to comment on this application.

Ms. Weisel moved, seconded by Mr. Jolly, to close the public hearing.

The secretary recorded the vote:

Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes

All in favor. Motion carried. 5-0

Ms. Lawrence read through and responded to the criteria for an area variance.

1. That no undesirable change will be produced in the character of the neighborhood nor will a detriment to nearby properties be created by the granting of the area variance. *Ms. Lawrence stated that the proposed project will not change the character of the neighborhood nor will a detriment to nearby properties be created by the granting of the area variance since they are enclosing an existing porch area and the footprint is not changing.*

2. That the benefit sought by the applicant cannot be achieved by some method, feasible for the applicant to pursue, other than an area variance. *Ms. Lawrence*

stated that the benefit sought by the applicant cannot be achieved by some other method other than the area variances due to the pre-existing condition.

3. That the requested area variance is not substantial. *Ms. Lawrence stated that the requested variances are not substantial.*

4. That the proposed variances will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district. *Ms. Lawrence stated that the proposed variances will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district.*

5. That the alleged difficulty was self-created which consideration shall be relevant to the decision of the Board of Appeals but shall not necessarily preclude the granting of the variance*. Ms. Lawrence stated that it is self-created but that does not preclude this Board from granting the variances.*

Ms. Weisel moved, seconded by Ms. Lawrence, to approve the requested variances, and authorize Counsel Addona to prepare a Resolution to include the standard conditions based upon the general discussion during the public hearing and subject to the Board not approving any encroachments onto other property.

The secretary recorded the vote:

Member Weisel: Yes
Member Kaplan: Yes
Member Abraham: Yes
Alt. Member Jolly: Yes
Chair Lawrence: Yes

All in favor. Motion carried. 5-0

ADJOURNMENT:
Ms. Lawrence moved, seconded by Ms. Weisel, to adjourn the meeting at 9:10 p.m.
All in favor. Motion carried. 5-0

Liz Meszaros- Secretary