

Timothy Tenke  
Mayor

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**CITY OF GLEN COVE**

City Hall  
9 Glen Street  
Glen Cove, NY 11542-4106

**BUILDING DEPARTMENT**

**Date:** August 10, 2020  
**To:** The Chairman and Members of the Board of Appeals  
**Application:** Side Yard  
**Address:** 53 Valentine Avenue  
**Type of USE:** Residential Two -Family

SECTION	BLOCK	LOT	ZONE
21	J	441	R-4B

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**DESCRIPTION OF CONSTRUCTION WORK TO BE PERFORMED:**

Existing Stairs and deck at side of house. No work proposed.

**DENIED for the following reasons:**

*Variance 1*

Pursuant to the Municipal Code of the City of Glen Cove, § 280-59.1 R-4B Seven-Thousand-Five-Hundred-Square-Foot-One and Two-Family Residence District, C.

(8) Minimum side yard: 10 feet each.

**APPLICANT IS PROPOSING 2.3' (Existing)**

**§ 280-30 Conditions governing nonconforming uses.**

A. Changes. No building which is nonconforming in respect to height, percentage of land occupied, minimum yard sizes or minimum area per family shall be altered or reduced or enlarged in such manner as to increase such nonconformance, except that after due notice and public hearing the Board of Appeals may issue a permit for such change if in its judgment the public interest is not jeopardized.

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THIS IS FOR A ZONING BOARD APPLICATION ONLY. DOES NOT CONSTITUTE APPROVAL OF DRAWINGS SUBMITTED FOR CONSTRUCTION.

Please contact the Board of Appeals secretary Rosa Rizzo at 516-676-4448 for variance applications and requirements.

<b>(1) Variance required</b>	<b>\$200.00</b>
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Thank you,



**David Jimenez**  
*Director – The City of Glen Cove Building Department*



CITY OF GLEN COVE

APPLICATION TO THE ZONING BOARD OF APPEALS  
FOR AN AREA VARIANCE

1. Applicant hereby appeals to the City of Glen Cove Zoning Board of Appeals from the decision of the Building Department Director in denying a building permit for:

MAINTAIN EXISTING STAIRS & DECK

2. Applicant's Name, Address and phone number are:

TAYLOR LEVY (516) 945-5407

94 GLENLAWN AVE, SEA CLIFF, NY 11579

3. If the Applicant is NOT the owner of record, the Applicant is (circle one):

a. contract vendee (attached copy of contract)

OR

b. the tenant (attach copy of lease)

OR

c. prospective tenant (attach copy of conditional lease or binding letter of intent)

4. The address of the property which is the subject of this Application is:

53 VALENTINE AVENUE

Nassau County Land & Tax Map designation is:

Section: 21 Block: U Lot: 441

City of Glen Cove Zoning District is: R-4B

5. Applicant became the owner of the subject property on 7/14/2009

by deed dated \_\_\_\_\_ recorded in Liber 2528 Page 0530

6. State whether the subject premises is located within 500 feet of the boundary line of any Village or Town, of any County or State Park, of any County or State parkway, thruway, expressway, road or highway, of any County stream or drainage channel, of any County or State owned land on which a public building or institution is situated, or of any farm operation located in an agricultural district.

Yes  No

7. The Petitioner requests the following relief from the Board of Appeals:

MAINTAIN EXISTING STAIRS AND DECK  
WITH 2.3' SIDE YARD

8. The Applicant seeks variance(s) from [or challenges interpretation of] the following section(s) of the Zoning Chapter 280-59.1:

8. MINIMUM SIDE YARD: 10' EACH

9. a. State how the granting of the relief requested will benefit the applicant and why it is necessary.

THE STAIR IN QUESTION IS THE ONLY  
MEANS OF ACCESS TO THE SECOND FLOOR  
APARTMENT.

b. State why the requested variance(s) will not cause an undesirable change in the character of the neighborhood or a detriment to nearby properties if the application is granted.

THE STAIR HAS EXISTED SINCE 2014  
AND REPLACED A SPIRAL STAIR THAT WAS  
DAMAGED IN A STORM.

c. State why the benefit sought cannot be achieved by some method feasible for the Applicant to pursue other than an area variance.

THERE IS NO OTHER LOCATION FOR THE STAIR GIVEN THE EXISTING DRIVEWAY & FIRST FLOOR FENESTRATION.

d. Describe the difference between the proposed dimensions and the Code requirement for each variance.

THE CODE REQUIRES 10' SIDE YARD SETBACK. STAIRS ARE 2.3' FROM PROPERTY LINE.

e. Explain why the requested relief will not have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district.

THE STAIR REPLACES A DAMAGED SPIRAL STAIR THAT WAS IN THE SAME LOCATION AND CANNOT BE SEEN FROM THE STREET.

10. Has the subject premises been the subject of prior applications for variances, special use permits and/or subdivisions?

Yes  No

If 'Yes', please describe and provide written decisions, if any, on those prior applications.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. State the names and phone numbers of any of the following licensed professionals who may appear at the public hearing representing the Applicant:

a. Attorney: \_\_\_\_\_

b. Architect: JAMES O'GRADY

c. Engineer: (P.E.): \_\_\_\_\_

d. Certified Planner: \_\_\_\_\_

12. If the Applicant is a corporation, the Petitioner has adopted a resolution (copy attached) authorizing the following corporate officer to act on its behalf:

\_\_\_\_\_ Name \_\_\_\_\_ Title \_\_\_\_\_

13. The approximate dimensions in linear feet of the subject premises (lot) are as follows:

a. Width: 49.62'  
b. Depth: 317.12'  
c. Size of lot (in acres): .35

14. Are there current violations and/or criminal charges which relate to this Application pending against the subject premises and/or the Applicant?

Yes  No

If 'Yes', please describe.

\_\_\_\_\_  
\_\_\_\_\_

15. Does the Applicant seek to legalize a use of land and/or structures and buildings which already exist?

Yes  No

16. The Applicant represents that Applicant has received a copy of the Board's Rules of Procedure and acknowledges that Applicant has complied with said Rules in all respects as the same apply to this Application.

**I HAVE READ THE FOREGOING APPLICATION AND UNDERSTAND THAT ANY FALSE STATEMENT MADE THEREIN IS PUNISHABLE AS A CLASS 'A' MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW.**

Date:

9/21/20

  
Applicant's Signature

**DISCLOSURE AFFIDAVIT**

In the Matter of the Application of

TAYLOR LEVY  
Name of Applicant(s) (Exactly as name appears on deed, lease and/or contract)

for a variance, modification, revocation of declaration of restrictions, or (state other relief requested) which requires the favorable exercise of discretion by the Board mentioned below\*

Affidavit of Certification by applicant pursuant to the provisions of Sec. 809 of the General Municipal Law

BEFORE: Board of Appeals of the City of Glen Cove

Refer to the presable before completing this form.

Every applicant before the Board of Zoning Appeals, including an owner, lessee, agent and contract vendee must execute this Disclosure Affidavit.

STATE OF NEW YORK }  
COUNTY OF NASSAU } ss.:

TAYLOR LEVY, being duly sworn,  
Name (Exactly as name appears on deed, lease and/or contract), deposes and say(s):  
\* Strike out inapplicable phrases, letters or words and fill in where necessary.

Your deponent(s) is (are) (an agent of) (an officer of) the applicant(s) in the above entitled proceeding (and) (who) is (are) the owner(s) in fee, (contract vendee) (lessee) or (describe other category) of the premises referred to in the application and is (are) interested in the outcome thereof (except as otherwise stated) and there are no other persons interested either in the fee ownership or as holder of an encumbrance upon the property.

Your deponent's home address is as follows: 94 CLEVELAND AVE, SEA CLIFF, NY  
(street) (town/city) (state) (zip)  
11579

**TO BE COMPLETED BY BUSINESS - IF NOT APPLICABLE, PLEASE LEAVE BLANK**

Your deponent is an officer, \_\_\_\_\_ (office title)  
of \_\_\_\_\_ (name of corporation/company)  
a corporation duly organized and existing under and by virtue of the laws of the State of New York, with its principal place of business at: \_\_\_\_\_ (street) (town/city) (state) (zip)

All officers, directors and shareholders and their addresses are as follows:

OFFICERS:	ADDRESS:
_____	_____
_____	_____
DIRECTORS:	ADDRESS:
_____	_____
_____	_____
_____	_____

APPLICABLE TO BUSINESSES ONLY  
(continued)

SHAREHOLDERS:

ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your deponent is a (General) Partner of \_\_\_\_\_  
a co-partnership (Limited Partnership) having a principal place of business at \_\_\_\_\_

comprising the following named (General) Partners, whose addresses are set opposite each partner's names:

NAME:	HOME ADDRESS:
_____	_____
_____	_____
_____	_____

TO BE ANSWERED BY ALL

Are any state officer(s) or any Officer(s) or employee(s) of the County of Nassau or of the City of Glen Cove or a Political Party Officer(s), interested in the favorable exercise of discretion of the Board of Zoning Appeals in the above-entitled proceeding?

\*     NO     YES  
(initial required)

(If yes, please complete below)

NAME	POSITION	ADDRESS	NATURE & EXTENT OF INTEREST
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Taylor Levy  
PRINT NAME (Exactly as it appears on deed, lease and/or contract)

[Signature]  
Signature

PRINT NAME (if more than one owner or applicant)

Signature

Sworn to before me this  
21 day of September, 2020  
[Signature]  
Notary Public

ALLISON VIEYRA  
NOTARY PUBLIC - STATE OF NEW YORK  
NO.01VI6013886  
QUALIFIED IN NASSAU COUNTY  
MY COMMISSION EXPIRES JAN. 19, 2023