

**VILLAGE OF POMONA
PLANNING BOARD MEETING**

**May 14, 2026
7:30 PM**

- 1. Call to order**
- 2. Roll Call**
- 3. Pledge of Allegiance**
- 4. Public hearing 34 North Ridge rd - HOW**
- 5. Old Business**
- 6. Motion to adjourn**

Village of Pomona

100 Ladentown Road, Pomona, NY 10970
Telephone: 845-354-0545
Website: www.pomonavillage.com

APPLICATION CHECKLIST FOR:

**TECHNICAL ADVISORY COMMITTEE
PLANNING BOARD
VILLAGE BOARD OF TRUSTEES
ZONING BOARD OF APPEALS**

****All Application Requests require a digital submission emailed to:
jenna.antoine@pomonavillage.com**

APPLICATION FOR ZONING BOARD OF APPEALS

Submit: 15 copies of application

Submit: 15 copies of EAF (*short form*)

Submit: 15 copies of Plot Plan drawn to scale

Submit: 15 copies of architectural and elevations

Submit: 15 copies of narrative summary

Submit: 15 copies of decision or order upon which appeal is based and Notice of Appeals to Building Inspector

Submit: 15 copies of any details that will help the Board judge the application

Submit: Filing Fee: \$200 for existing residence and \$375 for new construction

Submit: Escrow of \$1,500 per lot – Escrows to be replenished as necessary

APPLICATION TO APPEAR BEFORE TECHNICAL ADVISORY COMMITTEE (TAC) (Informal)

Submit: 5 copies of application

Submit: 5 copies of plan & EAF (*short form*)

Submit: 5 copies of narrative summary

Submit: Filing Fee: \$250 per appearance

Submit: Escrow: \$1,500 per lot

APPLICATION TO APPEAR BEFORE PLANNING BOARD

Submit: 14 copies of application

Submit: 14 copies of plan & EAF (*short form*)

Submit: 14 copies of narrative summary

Submit: Application Fee: \$600 per lot + \$250 per appearance after first meeting

Submit: Escrow of \$1,500 per lot – Escrows to be replenished as necessary

APPLICATION TO APPEAR BEFORE BOARD OF TRUSTEES

Submit: 7 copies of application

Submit: 7 copies of plan

Submit: 7 copies of EAF (*short form*).

Submit: 7 copies of narrative summary

APPLICATION REVIEW FORM

PART I

Name of Municipality Pomona Date 07/17/2025

Please check all that apply:

<input checked="" type="checkbox"/> Planning Board	<input type="checkbox"/> Municipal Board
<input type="checkbox"/> Zoning Board of Appeals* <i>(*Fill out Parts I & II of this form)</i>	<input type="checkbox"/> Historical Board
	<input type="checkbox"/> Architectural Board
<input type="checkbox"/> Subdivision _____ # of Lots _____	<input type="checkbox"/> Pre-preliminary/Sketch
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Preliminary
<input type="checkbox"/> Special Permit	<input type="checkbox"/> Final
<input type="checkbox"/> Conditional Use	
<input type="checkbox"/> Zoning Code Amendment	
<input type="checkbox"/> Zone Change	
<input type="checkbox"/> Variance	

Project Name: Chabad of the Heights

Tax Map Designation:

Section 25.05 Block 2 Lot(s) 13
Section _____ Block _____ Lot(s) _____

Location: On the West side of Cheesecote Lane,
223 feet South West of Cheesecote Lane in the
town/village of Pomona.

Street Address: 34 North Ridge Road

Acreage of Parcel 1.04 Zoning District Pomona

School District East Ramapo CSD Postal District Pomona

Fire District Moleston Ambulance District Haverstraw

Water District Town of Haverstraw Sewer District 1

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

We request the special permit for a Neighborhood House of Worship that will replace the current, temporary religious facility at 34 North Ridge Road. The board previously issued a special permit to the Congregation for a House of Worship on the site on or about January 29th, 2023. The building was unfortunately destroyed last year as the result of a fire. The proposed Neighborhood House of Worship will serve the same community members and be in approximately the same area as the religious facility that was destroyed in the fire.

APPLICATION REVIEW FORM

If subdivision:

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

If site plan:

- 1) Existing square footage _____
- 2) Total square footage _____
- 3) Number of dwelling units _____

If special permit, list special permit use and what the property will be used for.

We propose construction of a Neighborhood House of Worship and accessory parking lots at 34 North Ridge Road, Pomona.

Environmental Constraints:

Are there **slopes greater than 25%**? If yes, please indicate the amount and show the gross and net area. No

Are there **streams** on the site? If yes, please provide the names. No

Are there **wetlands** on the site? If yes, please provide the names and type. No

Project History: Has this project ever been reviewed before? Yes

If so, provide a narrative, including the list case number, name, date, and the board(s) you appeared before, and the status of any previous approvals.

ZBA on July 16h 2025 regarding a violation for the temporary tent at 34 North Ridge

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

N/a

APPLICATION REVIEW FORM

Contact Information:

Applicant: Congregation Chabad of the Heights Phone # _____

Address 34 North Ridge Road Pomona NY 10970
Street Name & Number (Post Office) State Zip code

Property Owner: Eliezer Steinmentz Phone # _____

Address 103 Overlook Road Pomona NY 10970
Street Name & Number (Post Office) State Zip code

Engineer/Architect/Surveyor: Todd Rosenblum Phone # (845) 364-0337

Address 221 Quaker Road Pomona NY 10970
Street Name & Number (Post Office) State Zip code

Attorney: Daniel M Richmond Phone # _____

Address 81 Main Street Suite 415 White Plains NY 10601
Street Name & Number (Post Office) State Zip code

Contact Person: Mark Moseson Phone # (845) 494-9996

Address 9 Cheesecote Lane Pomona NY 10970
Street Name & Number (Post Office) State Zip code

General Municipal Law Review:

This property is within 500 feet of:
(Check all that apply) Not applicable

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 L, M, N, AND NN.

- | | |
|---|---|
| <input type="checkbox"/> State or County Road | <input type="checkbox"/> State or County Park |
| <input type="checkbox"/> Long Path | <input type="checkbox"/> County Stream |
| <input type="checkbox"/> Municipal Boundary | <input type="checkbox"/> County Facility |

List name(s) of facility checked above. _____

Referral Agencies: *(Please make sure that the appropriate agencies as needed received copies of your application and plans for their review.)*

- | | |
|--|--|
| <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 _____ | |
| <input type="checkbox"/> Other _____ | |

****All applicants must send copies of their applications and plans to:**
 Orange and Rockland, Regional manager, 75 West Route 59, Spring Valley, NY 10997.

APPLICATION REVIEW FORM

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 Town/Village of Pomona 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 N/a
- c. If stockholder, number of shares N/a
- d. If officer or partner, nature of office and name of partnership N/a
- 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. N/a
- 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 Town/Village of N/a.

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 Town/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 town/village and each such consultant for the cost of such consultant services upon receipt of the bill.

APPLICATION REVIEW FORM

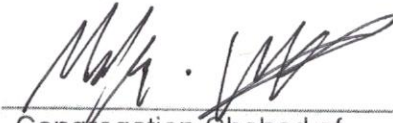
5. Application Fee(s)

I, Congregation Chabad of the Heights, have paid to the Town/Village Clerk and/or Treasurer, the required fee for this application. (The fee is subject to the Schedule of Fees of the municipality). I shall review a copy of the zoning Local Law and Land Development Regulations, and be ready and prepared to review this application when scheduled. The Municipal Board, Planning Board, or Zoning Board of Appeals in the review of any application described above, may refer the subject application to an engineering, planning, environmental, or other technical consultant as such Board shall deem reasonably necessary to enable it to review the application as required by law.

***The following paragraph is optional to add if your municipality establishes escrow accounts:*

(I agree to establish an escrow account with the Town/Village of Pomona from which these consultants' fees will be paid. The escrow account will not draw interest, and will be replenished upon notification by the Town/Village. Any additional sums needed to pay the Town's/Village's consultants shall be paid prior to final action on the application. The Town/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 Town/Village.)

Applicant's Signature

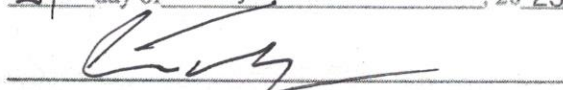


Print Applicant's Name

Congregation Chabad of the Heights

SWORN to before me this

24 day of July, 2025



Notary Public

Courtney K Sparks
Notary Public, State of New York
Reg. No. 01SP0022004
Qualified in Orange County
Commission Expires March 12, 2028

I have received from _____ the sum of _____ on this date

Reviewed by the _____ on _____
Municipal Clerk/Treasurer

Action Taken: _____

APPLICATION REVIEW FORM

Affidavit of Ownership/Owner's Consent

State of New York)
County of Rockland) SS.:
Town/Village of Pomona)

I, Eliezer Steinmentz being duly sworn, hereby
depose and say that I reside at: 103 Overlook Road, Pomona NY 10970

in the county of Rockland in the state of New York

I am the (*) owner in fee simple of premises located at:
34 North Ridge, Pomona NY 10970

described in a certain deed of said premises recorded in the Rockland County Clerk's
Office in Liber 2021 of conveyances, page 26897 or as Instrument ID # _____

Said premises have been in my/its possession since 06/2021 Said premises are also
known and designated on the Town of Pomona Tax Map as:
section 25.05 block 2 lot(s) 13

I hereby authorize the within application on my behalf, and that the statements of fact
contained in said application are true, and agree to be bound by the determination of the
board.

Owner Eliezer Steinmentz
Mailing Address 103 Overlook Road
Pomona NY 10970

SWORN to before this
24 day of July, 2025

[Signature]
Notary Public

Courtney K Sparks
Notary Public, State of New York
Reg. No. 01SP0022004
Qualified in Orange County
Commission Expires March 12, 2028

* *If owner is a corporation or LLC, fill in the office held by deponent and name of corporation or LLC, and provide a list of all directors, officers, and stockholders owning more than 5% of any class of stock and all members having greater than 5% beneficial interest.*

APPLICATION REVIEW FORM


Owners of Nearby Properties:

That the following are all of the owners of property 500 feet (distance) from the premises as to which this application is being taken.

SECTION/BLOCK/LOT	NAME	ADDRESS
19.17-1-60	Rahman Mohamad	1 Cheesecote Lane
25-05-2-16	Eckhaus Mordechai	4 Cheesecote Lane
19.17-1-61	Tarsinov Taliat	30 N. Ridge Road
25.05-2-7	Edmonds Fred	4 N. Ridge Road
25.05-2-6	Watford Wendell	6 N. Ridge Road
19.17-1-72	Sorotzkin Naama	8 N. Ridge Road
25.05-2-14	Jacob Stanley	32 N. Ridge Road
19.17-1-59	Kugel Shlomo	41 N. Ridge Road
25.05-2-12	Arnovich Fred	81 Overlook Road
25.06-1-1	Tsour Rafael	82 Overlook Road
25.06-1-2	Seewald Nechoma	84 Overlook Road
25.05-2-15	Richardson Rigobert	85 Overlook Road
25.06-1-3	Pomona Properties 101 LLC	86 Overlook Road

(use additional paper if needed) 

SWORN to before this
24 day of July, 2025



 Notary Public

Courtney K Sparks
 Notary Public, State of New York
 Reg. No. 01SP0022004
 Qualified in Orange County
 Commission Expires March 12, 2028

APPLICATION REVIEW FORM

PART II*

Application before the Zoning Board of Appeals

Application, petition, or request is hereby submitted for:

- () Area Variance from the requirement of Section _____;
() Use Variance from the requirement of Section _____;
(X) Special permit per the requirements of Section _____;
() Review of an administrative decision of the Building Inspector;
() An order to issue a Certificate of Occupancy;
() An order to issue a Building Permit;
() 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 synagogue

Previous Appeal:

- a. A previous appeal X has, or ___ has not, been made with respect to this property.
b. Such appeal was in the form of:
___ An AREA Variance; or
___ A USE Variance; or
X Appeal from decision of Town Official or Officer; or
___ Interpretation of the Zoning Ordinance or Map; or
X Other See attached resolutions for extension and final site plan approval.
c. The previous appeal described above was appeal number ZBA _____,
dated July 16, 2025 and was In Progress (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.

APPLICATION REVIEW FORM

A. AREA VARIANCE *(This section to be completed only for an AREA variance. Use additional pages, if needed.)* Not applicable

This application seeks a variance from the provisions of Article _____, Section(s) _____. Specifically, the applicant seeks a variance from the requirements from:

Dimension*	Column	Required	Provided

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

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: _____

APPLICATION REVIEW FORM

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

B. USE VARIANCE *(This section to be completed only for a USE variance. Use additional pages, if needed.)* Not applicable

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: _____

APPLICATION REVIEW FORM

9. The current income from the property is: _____

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

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:

C. APPEAL OF DECISION OF BUILDING INSPECTOR *(This section to be completed for an appeal, only. Use additional pages, if needed.)* Not applicable

1. Name and position of official making the decision:

2. Nature of decision:

3. The decision described above is hereby appealed because:

D. INTERPRETATION OF ZONING CODE *(This section to be completed for an interpretation, only. Use additional pages, if needed.)*

1. Section(s) to be interpreted: _____

2. An interpretation of the Zoning Code is requested because:

[Appform.doc revised March 2015]

Full Environmental Assessment Form
Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. 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; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either “Yes” or “No”. If the answer to the initial question is “Yes”, complete the sub-questions that follow. If the answer to the initial question is “No”, proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

Name of Action or Project:		
Project Location (describe, and attach a general location map):		
Brief Description of Proposed Action (include purpose or need):		
Name of Applicant/Sponsor:		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Project Contact (if not same as sponsor; give name and title/role):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:
Property Owner (if not same as sponsor):		Telephone:
		E-Mail:
Address:		
City/PO:	State:	Zip Code:

B. Government Approvals

B. Government Approvals, Funding, or Sponsorship. (“Funding” includes grants, loans, tax relief, and any other forms of financial assistance.)

Government Entity	If Yes: Identify Agency and Approval(s) Required	Application Date (Actual or projected)
a. City Counsel, Town Board, or Village Board of Trustees <input type="checkbox"/> Yes <input type="checkbox"/> No		
b. City, Town or Village Planning Board or Commission <input type="checkbox"/> Yes <input type="checkbox"/> No		
c. City, Town or Village Zoning Board of Appeals <input type="checkbox"/> Yes <input type="checkbox"/> No		
d. Other local agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
e. County agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
f. Regional agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
g. State agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
h. Federal agencies <input type="checkbox"/> Yes <input type="checkbox"/> No		
i. Coastal Resources. <ul style="list-style-type: none"> <li data-bbox="121 829 1485 861">i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway? <input type="checkbox"/> Yes <input type="checkbox"/> No <li data-bbox="121 892 1485 924">ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program? <input type="checkbox"/> Yes <input type="checkbox"/> No <li data-bbox="121 924 1485 955">iii. Is the project site within a Coastal Erosion Hazard Area? <input type="checkbox"/> Yes <input type="checkbox"/> No 		

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? Yes No

- **If Yes**, complete sections C, F and G.
- **If No**, proceed to question C.2 and complete all remaining sections and questions in Part 1

C.2. Adopted land use plans.

a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? Yes No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? Yes No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway; Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) Yes No

If Yes, identify the plan(s):

c. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, or an adopted municipal farmland protection plan? Yes No

If Yes, identify the plan(s):

C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. Yes No
If Yes, what is the zoning classification(s) including any applicable overlay district?

b. Is the use permitted or allowed by a special or conditional use permit? Yes No

c. Is a zoning change requested as part of the proposed action? Yes No

If Yes,

i. What is the proposed new zoning for the site? _____

C.4. Existing community services.

a. In what school district is the project site located? _____

b. What police or other public protection forces serve the project site?

c. Which fire protection and emergency medical services serve the project site?

d. What parks serve the project site?

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)?

b. a. Total acreage of the site of the proposed action? _____ acres
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

c. Is the proposed action an expansion of an existing project or use? Yes No
i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % _____ Units: _____

d. Is the proposed action a subdivision, or does it include a subdivision? Yes No
If Yes,

i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)

ii. Is a cluster/conservation layout proposed? Yes No

iii. Number of lots proposed? _____

iv. Minimum and maximum proposed lot sizes? Minimum _____ Maximum _____

e. Will the proposed action be constructed in multiple phases? Yes No

i. If No, anticipated period of construction: _____ months

ii. If Yes:

- Total number of phases anticipated _____
- Anticipated commencement date of phase 1 (including demolition) _____ month _____ year
- Anticipated completion date of final phase _____ month _____ year

• Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases: _____

f. Does the project include new residential uses? Yes No
 If Yes, show numbers of units proposed.

	<u>One Family</u>	<u>Two Family</u>	<u>Three Family</u>	<u>Multiple Family (four or more)</u>
Initial Phase	_____	_____	_____	_____
At completion	_____	_____	_____	_____
of all phases	_____	_____	_____	_____

g. Does the proposed action include new non-residential construction (including expansions)? Yes No
 If Yes,

i. Total number of structures _____

ii. Dimensions (in feet) of largest proposed structure: _____ height; _____ width; and _____ length

iii. Approximate extent of building space to be heated or cooled: _____ square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage? Yes No
 If Yes,

i. Purpose of the impoundment: _____

ii. If a water impoundment, the principal source of the water: Ground water Surface water streams Other specify: _____

iii. If other than water, identify the type of impounded/contained liquids and their source.

iv. Approximate size of the proposed impoundment. Volume: _____ million gallons; surface area: _____ acres

v. Dimensions of the proposed dam or impounding structure: _____ height; _____ length

vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete):

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both? Yes No
 (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)
 If Yes:

i. What is the purpose of the excavation or dredging? _____

ii. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?

- Volume (specify tons or cubic yards): _____
- Over what duration of time? _____

iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.

iv. Will there be onsite dewatering or processing of excavated materials? Yes No
 If yes, describe. _____

v. What is the total area to be dredged or excavated? _____ acres

vi. What is the maximum area to be worked at any one time? _____ acres

vii. What would be the maximum depth of excavation or dredging? _____ feet

viii. Will the excavation require blasting? Yes No

ix. Summarize site reclamation goals and plan: _____

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area? Yes No
 If Yes:

i. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description): _____

ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres:

iii. Will the proposed action cause or result in disturbance to bottom sediments? Yes No

If Yes, describe: _____

iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? Yes No

If Yes:

- acres of aquatic vegetation proposed to be removed: _____
- expected acreage of aquatic vegetation remaining after project completion: _____
- purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): _____
- proposed method of plant removal: _____
- if chemical/herbicide treatment will be used, specify product(s): _____

v. Describe any proposed reclamation/mitigation following disturbance: _____

c. Will the proposed action use, or create a new demand for water? Yes No

If Yes:

i. Total anticipated water usage/demand per day: _____ gallons/day

ii. Will the proposed action obtain water from an existing public water supply? Yes No

If Yes:

- Name of district or service area: _____
- Does the existing public water supply have capacity to serve the proposal? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No
- Do existing lines serve the project site? Yes No

iii. Will line extension within an existing district be necessary to supply the project? Yes No

If Yes:

- Describe extensions or capacity expansions proposed to serve this project: _____
- Source(s) of supply for the district: _____

iv. Is a new water supply district or service area proposed to be formed to serve the project site? Yes No

If Yes:

- Applicant/sponsor for new district: _____
- Date application submitted or anticipated: _____
- Proposed source(s) of supply for new district: _____

v. If a public water supply will not be used, describe plans to provide water supply for the project: _____

vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: _____ gallons/minute.

d. Will the proposed action generate liquid wastes? Yes No

If Yes:

i. Total anticipated liquid waste generation per day: _____ gallons/day

ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each): _____

iii. Will the proposed action use any existing public wastewater treatment facilities? Yes No

If Yes:

- Name of wastewater treatment plant to be used: _____
- Name of district: _____
- Does the existing wastewater treatment plant have capacity to serve the project? Yes No
- Is the project site in the existing district? Yes No
- Is expansion of the district needed? Yes No

• Do existing sewer lines serve the project site? Yes No
 • Will a line extension within an existing district be necessary to serve the project? Yes No
 If Yes:
 • Describe extensions or capacity expansions proposed to serve this project: _____

iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? Yes No
 If Yes:
 • Applicant/sponsor for new district: _____
 • Date application submitted or anticipated: _____
 • What is the receiving water for the wastewater discharge? _____

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge or describe subsurface disposal plans):

vi. Describe any plans or designs to capture, recycle or reuse liquid waste: _____

e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction? Yes No
 If Yes:
 i. How much impervious surface will the project create in relation to total size of project parcel?
 _____ Square feet or _____ acres (impervious surface)
 _____ Square feet or _____ acres (parcel size)
 ii. Describe types of new point sources. _____

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)?

 • If to surface waters, identify receiving water bodies or wetlands: _____

 • Will stormwater runoff flow to adjacent properties? Yes No

iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater? Yes No

f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations? Yes No
 If Yes, identify:
 i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)

 ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)

 iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)

g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit? Yes No
 If Yes:
 i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year) Yes No
 ii. In addition to emissions as calculated in the application, the project will generate:
 • _____ Tons/year (short tons) of Carbon Dioxide (CO₂)
 • _____ Tons/year (short tons) of Nitrous Oxide (N₂O)
 • _____ Tons/year (short tons) of Perfluorocarbons (PFCs)
 • _____ Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
 • _____ Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflouorocarbons (HFCs)
 • _____ Tons/year (short tons) of Hazardous Air Pollutants (HAPs)

h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? Yes No

If Yes:

i. Estimate methane generation in tons/year (metric): _____

ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): _____

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? Yes No

If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): _____

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? Yes No

If Yes:

i. When is the peak traffic expected (Check all that apply): Morning Evening Weekend
 Randomly between hours of _____ to _____.

ii. For commercial activities only, projected number of truck trips/day and type (e.g., semi trailers and dump trucks): _____

iii. Parking spaces: Existing _____ Proposed _____ Net increase/decrease _____

iv. Does the proposed action include any shared use parking? Yes No

v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: _____

vi. Are public/private transportation service(s) or facilities available within 1/2 mile of the proposed site? Yes No

vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? Yes No

viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? Yes No

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? Yes No

N/A

If Yes:

i. Estimate annual electricity demand during operation of the proposed action: _____

ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): _____

iii. Will the proposed action require a new, or an upgrade, to an existing substation? Yes No

l. Hours of operation. Answer all items which apply.

<p><i>i.</i> During Construction:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____ 	<p><i>ii.</i> During Operations:</p> <ul style="list-style-type: none"> • Monday - Friday: _____ • Saturday: _____ • Sunday: _____ • Holidays: _____
---	--

<p>m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>i. Provide details including sources, time of day and duration:</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>n. Will the proposed action have outdoor lighting? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures:</p> <p>_____</p> <p>_____</p>	
<p>ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Describe: _____</p> <p>_____</p>	
<p>o. Does the proposed action have the potential to produce odors for more than one hour per day? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: _____</p> <p>_____</p> <p>_____</p>	
<p>p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p>i. Product(s) to be stored _____</p> <p>ii. Volume(s) _____ per unit time _____ (e.g., month, year)</p> <p>iii. Generally, describe the proposed storage facilities: _____</p> <p>_____</p>	
<p>q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes: N/A</p> <p>i. Describe proposed treatment(s):</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>ii. Will the proposed action use Integrated Pest Management Practices? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes: N/A</p> <p>i. Describe any solid waste(s) to be generated during construction or operation of the facility:</p> <ul style="list-style-type: none"> • Construction: _____ tons per _____ (unit of time) • Operation : _____ tons per _____ (unit of time) <p>ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:</p> <ul style="list-style-type: none"> • Construction: _____ _____ • Operation: _____ _____ <p>iii. Proposed disposal methods/facilities for solid waste generated on-site:</p> <ul style="list-style-type: none"> • Construction: _____ _____ • Operation: _____ _____ 	

s. Does the proposed action include construction or modification of a solid waste management facility? Yes No
 If Yes:
 i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): _____
 ii. Anticipated rate of disposal/processing:
 • _____ Tons/month, if transfer or other non-combustion/thermal treatment, or
 • _____ Tons/hour, if combustion or thermal treatment
 iii. If landfill, anticipated site life: _____ years

t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste? Yes No
 If Yes:
 i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility: _____

 ii. Generally describe processes or activities involving hazardous wastes or constituents: _____

 iii. Specify amount to be handled or generated _____ tons/month
 iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents: _____

 v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility? Yes No
 If Yes: provide name and location of facility: _____

 If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility:

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.
 i. Check all uses that occur on, adjoining and near the project site.
 Urban Industrial Commercial Residential (suburban) Rural (non-farm)
 Forest Agriculture Aquatic Other (specify): _____
 ii. If mix of uses, generally describe:

b. Land uses and covertypes on the project site.

Land use or Covertypes	Current Acreage	Acreage After Project Completion	Change (Acres +/-)
• Roads, buildings, and other paved or impervious surfaces	0.2		
• Forested			
• Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)			
• Agricultural (includes active orchards, field, greenhouse etc.)			
• Surface water features (lakes, ponds, streams, rivers, etc.)			
• Wetlands (freshwater or tidal)			
• Non-vegetated (bare rock, earth or fill)			
• Other Describe: _____ _____			

c. Is the project site presently used by members of the community for public recreation? Yes No
i. If Yes: explain: _____

d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? Yes No
If Yes,
i. Identify Facilities:

e. Does the project site contain an existing dam? Yes No
If Yes:
i. Dimensions of the dam and impoundment:

- Dam height: _____ feet
- Dam length: _____ feet
- Surface area: _____ acres
- Volume impounded: _____ gallons OR acre-feet

ii. Dam's existing hazard classification: _____
iii. Provide date and summarize results of last inspection:

f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility? Yes No
If Yes:
i. Has the facility been formally closed? Yes No

- If yes, cite sources/documentation: _____

ii. Describe the location of the project site relative to the boundaries of the solid waste management facility:

g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? Yes No
If Yes:
i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred:

h. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes No
If Yes:
i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes No
 Yes – Spills Incidents database Provide DEC ID number(s): _____
 Yes – Environmental Site Remediation database Provide DEC ID number(s): _____
 Neither database
ii. If site has been subject of RCRA corrective activities, describe control measures: _____

iii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Yes No
If yes, provide DEC ID number(s): _____
iv. If yes to (i), (ii) or (iii) above, describe current status of site(s):

v. Is the project site subject to an institutional control limiting property uses? Yes No

- If yes, DEC site ID number: _____
- Describe the type of institutional control (e.g., deed restriction or easement): _____
- Describe any use limitations: _____
- Describe any engineering controls: _____
- Will the project affect the institutional or engineering controls in place? Yes No
- Explain: _____

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? _____ feet

b. Are there bedrock outcroppings on the project site? Yes No
 If Yes, what proportion of the site is comprised of bedrock outcroppings? _____%

c. Predominant soil type(s) present on project site: _____ %
 _____ %
 _____ %

d. What is the average depth to the water table on the project site? Average: _____ feet

e. Drainage status of project site soils: Well Drained: _____ % of site
 Moderately Well Drained: _____ % of site
 Poorly Drained _____ % of site

f. Approximate proportion of proposed action site with slopes: 0-10%: _____ % of site
 10-15%: _____ % of site
 15% or greater: _____ % of site

g. Are there any unique geologic features on the project site? Yes No
 If Yes, describe: _____

h. Surface water features.

i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? Yes No

ii. Do any wetlands or other waterbodies adjoin the project site? Yes No
 If Yes to either *i* or *ii*, continue. If No, skip to E.2.i.

iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency? Yes No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

- Streams: Name _____ Classification _____
- Lakes or Ponds: Name _____ Classification _____
- Wetlands: Name _____ Approximate Size _____
- Wetland No. (if regulated by DEC) _____

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies? Yes No
 If yes, name of impaired water body/bodies and basis for listing as impaired: _____

i. Is the project site in a designated Floodway? Yes No

j. Is the project site in the 100-year Floodplain? Yes No

k. Is the project site in the 500-year Floodplain? Yes No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer? Yes No
 If Yes:
 i. Name of aquifer: _____

m. Identify the predominant wildlife species that occupy or use the project site: _____ _____ _____	
n. Does the project site contain a designated significant natural community? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <i>i.</i> Describe the habitat/community (composition, function, and basis for designation): _____ _____ <i>ii.</i> Source(s) of description or evaluation: _____ <i>iii.</i> Extent of community/habitat: <ul style="list-style-type: none"> • Currently: _____ acres • Following completion of project as proposed: _____ acres • Gain or loss (indicate + or -): _____ acres 	
o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <i>i.</i> Species and listing (endangered or threatened): _____ _____ _____	
p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <i>i.</i> Species and listing: _____ _____	
q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishing? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give a brief description of how the proposed action may affect that use: _____ _____	
E.3. Designated Public Resources On or Near Project Site	
a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide county plus district name/number: _____	
b. Are agricultural lands consisting of highly productive soils present? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>i.</i> If Yes: acreage(s) on project site? _____ <i>ii.</i> Source(s) of soil rating(s): _____	
c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <i>i.</i> Nature of the natural landmark: <input type="checkbox"/> Biological Community <input type="checkbox"/> Geological Feature <i>ii.</i> Provide brief description of landmark, including values behind designation and approximate size/extent: _____ _____ _____	
d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: <i>i.</i> CEA name: _____ <i>ii.</i> Basis for designation: _____ <i>iii.</i> Designating agency and date: _____	

<p>e. 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 type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Nature of historic/archaeological resource: <input type="checkbox"/> Archaeological Site <input type="checkbox"/> Historic Building or District</p> <p style="margin-left: 20px;">ii. Name: _____</p> <p style="margin-left: 20px;">iii. Brief description of attributes on which listing is based: _____</p>
<p>f. 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 type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>g. Have additional archaeological or historic site(s) or resources been identified on the project site? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Describe possible resource(s): _____</p> <p style="margin-left: 20px;">ii. Basis for identification: _____</p>
<p>h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Identify resource: _____</p> <p style="margin-left: 20px;">ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): _____</p> <p style="margin-left: 20px;">iii. Distance between project and resource: _____ miles.</p>
<p>i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 666? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes:</p> <p style="margin-left: 20px;">i. Identify the name of the river and its designation: _____</p> <p style="margin-left: 20px;">ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

F. Additional Information

Attach any additional information which may be needed to clarify your project.

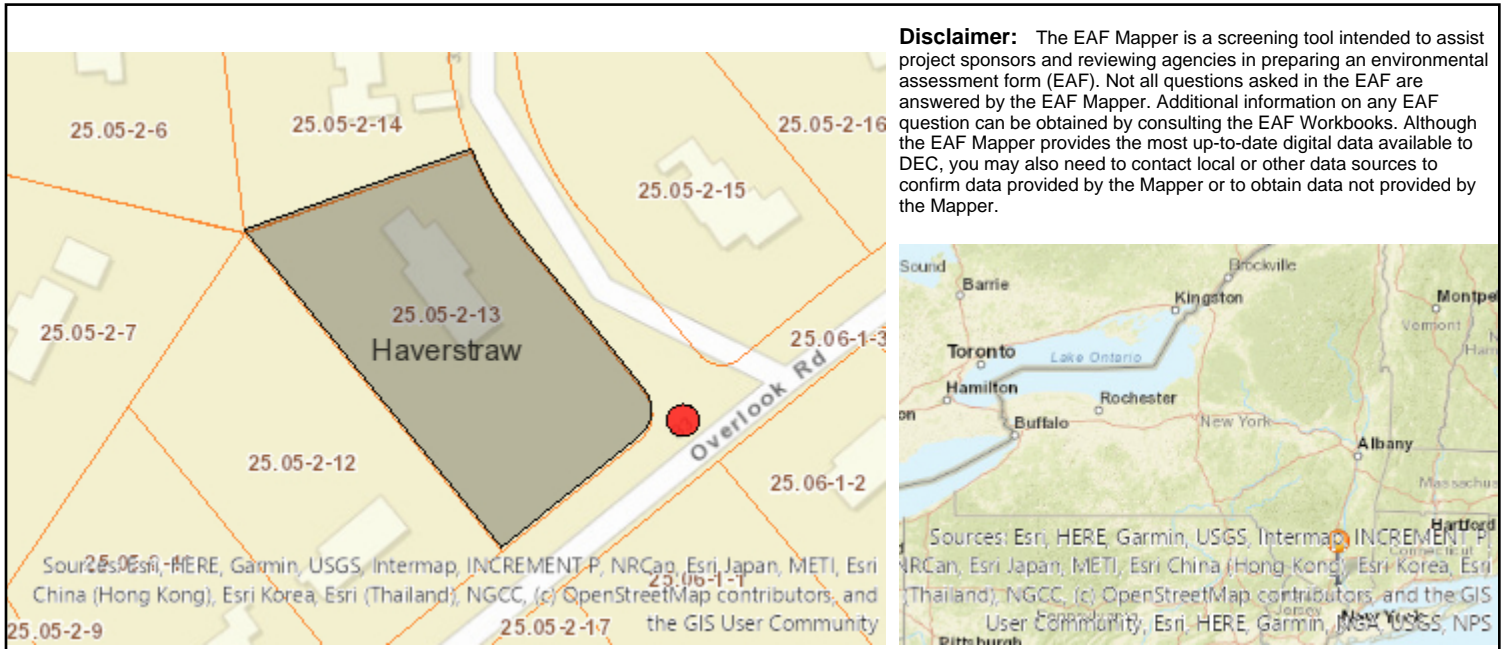
If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification

I certify that the information provided is true to the best of my knowledge.

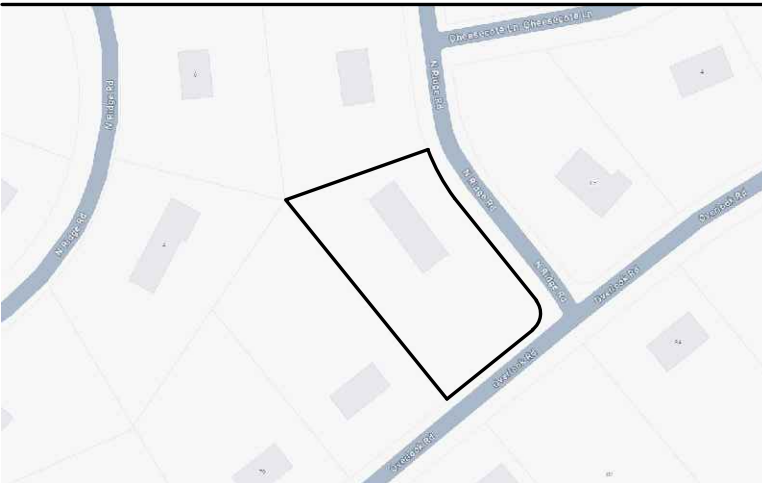
Applicant/Sponsor Name _____ Date _____

Signature Stuart Strow Title _____



B.i.i [Coastal or Waterfront Area]	No
B.i.ii [Local Waterfront Revitalization Area]	No
C.2.b. [Special Planning District]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h [DEC Spills or Remediation Site - Potential Contamination History]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Listed]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.1.h.iii [Within 2,000' of DEC Remediation Site]	No
E.2.g [Unique Geologic Features]	No
E.2.h.i [Surface Water Features]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.h.ii [Surface Water Features]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.h.iii [Surface Water Features]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.2.h.v [Impaired Water Bodies]	No
E.2.i. [Floodway]	No
E.2.j. [100 Year Floodplain]	No
E.2.k. [500 Year Floodplain]	No
E.2.l. [Aquifers]	Yes
E.2.l. [Aquifer Names]	Sole Source Aquifer Names:Ramapo SSA
E.2.n. [Natural Communities]	No

E.2.o. [Endangered or Threatened Species]	No
E.2.p. [Rare Plants or Animals]	No
E.3.a. [Agricultural District]	No
E.3.c. [National Natural Landmark]	No
E.3.d [Critical Environmental Area]	No
E.3.e. [National or State Register of Historic Places or State Eligible Sites]	Digital mapping data are not available or are incomplete. Refer to EAF Workbook.
E.3.f. [Archeological Sites]	Yes
E.3.i. [Designated River Corridor]	No



PROJECT LOCATION

GENERAL NOTES

- THIS IS LOT 25.05 IN BLOCK 2 OF SECTION 13 AS SHOWN ON THE TOWN OF HAVERSTRAW TAX MAP.
- AREA OF PARCEL..... 1.04 ACRES (45,477 SF)
- ZONE R-40
- USE NEIGHBORHOOD HOUSE OF WORSHIP
- RECORD OWNER ELIEZER STEINMETZ
34 N. RIDGE ROAD
POMONA, NY 10970
- APPLICANT SAME
- FIRE DISTRICT MOLESTON FIRE DISTRICT
- SCHOOL DISTRICT EAST RAMAPO SCHOOL DISTRICT
- WATER DISTRICT VEOLIA
- WATER SUPPLY VEOLIA
- SEWER DISTRICT HAVERSTRAW JOINT REGIONAL

BULK TABLE

ZONE: R-40 USE: NEIGHBORHOOD HOUSE OF WORSHIP

	MINIMUM LOT AREA SF	LOT WIDTH FT	LOT FRONTAGE FT	LOT DEPTH FT	FRONT YARD FT	TOTAL SIDE YARD FT	SIDE YARD FT	REAR YARD FT	BUFFER FT	BLDG. COV. %	FLOOR AREA RATIO (FAR)	MAXIMUM HEIGHT FT	LOT COVERAGE %	PARKING
REQUIRED	32,670	150	100	140	25	50	25	25	5	15	0.25	35	50	15
PROVIDED	45,477	259.2	401.4	183.3	27	N/A	66	63	5	11.4	0.195	35	46.5	28

LOT COVERAGE CALCULATIONS:
IMPERVIOUS SURFACE / LOT AREA = LOT COVERAGE

PROPOSED BUILDING = 5,161 S.F.
PARKING LOTS = 14,950 S.F.
SIDEWALKS = 1,019 S.F.

TOTAL IMPERVIOUS SURFACE = 21,130 S.F.

LOT COVERAGE = (21,130 S.F. / 45,477 S.F.) X 100 = **46.5%**

FLOOR AREA RATIO CALCULATIONS:
GROSS FLOOR AREA / LOT AREA = F.A.R.

GROSS FLOOR AREA = 8,836 S.F.

F.A.R. = (8,836 S.F.) / (45,477 S.F.) = 0.195

NOTE: GROSS FLOOR AREA PROVIDED BY ARCHITECT

BUILDING COVERAGE CALCULATIONS:
BUILDING FOOTPRINT / LOT AREA = LOT COVERAGE

PROPOSED BUILDING = 5,161 S.F.

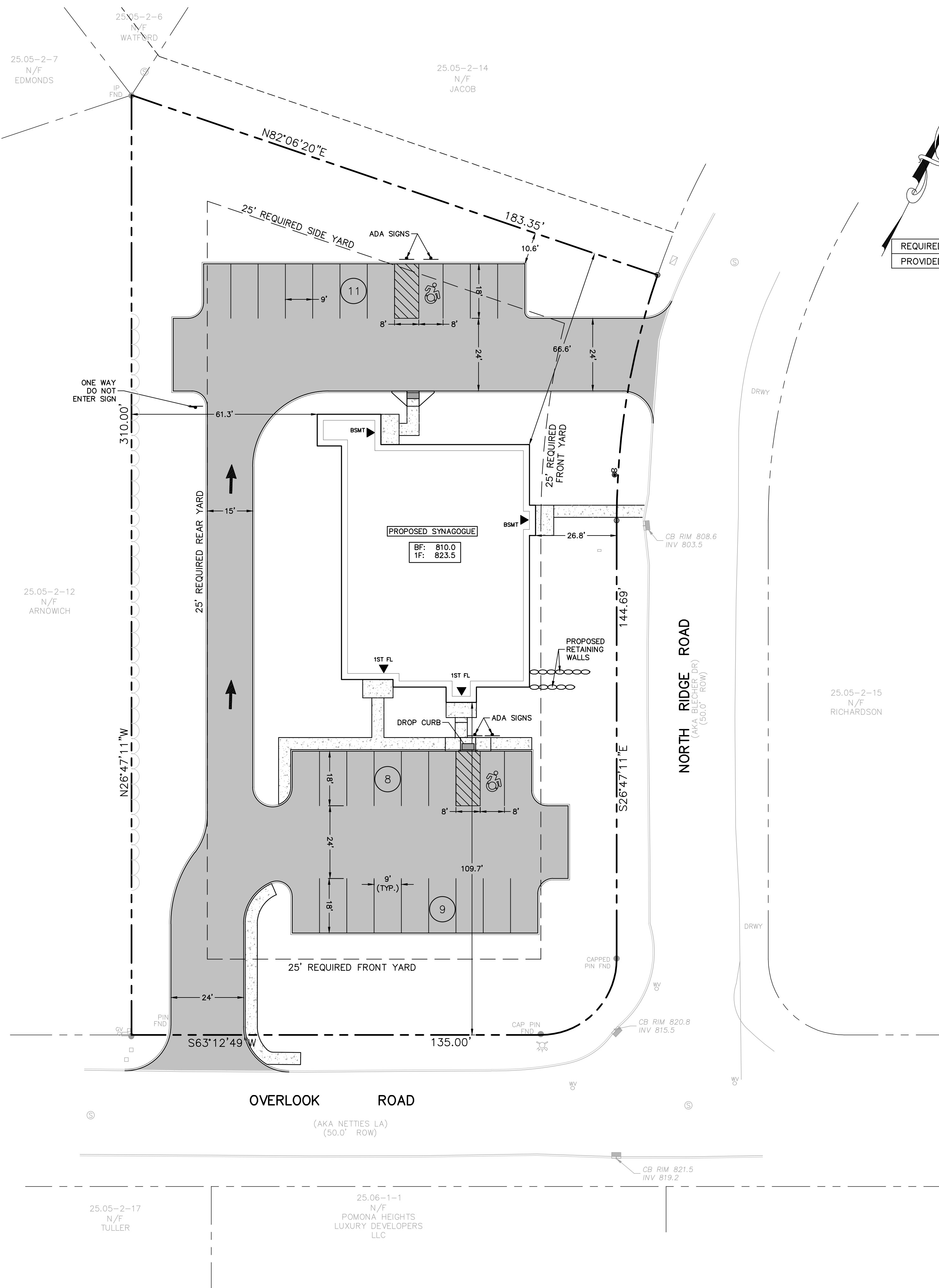
BUILDING COVERAGE = (5,161 S.F. / 45,477 S.F.) X 100 = **11.4%**

BUILDING HEIGHT CALCULATIONS:
AVERAGE ELEVATION OF FINISHED GRADE = 811.0
ROOF ELEVATION = 846.0
BUILDING HEIGHT = (846.0 - 811.0) = 35 FEET

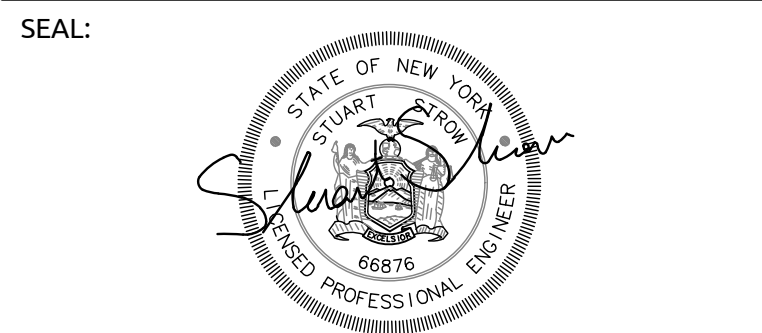
NOTE: BUILDING HEIGHT MEASURED ALONG FRONTAGE ON NORTH RIDGE ROAD AND OVERLOOK ROAD

PARKING CALCULATION

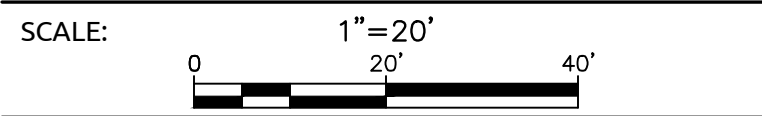
USE	REQUIRED	PROVIDED
NEIGHBORHOOD HOUSE OF WORSHIP	MINIMUM OF TEN SPACES, OR ONE SPACE FOR EVERY 200 SQUARE FEET OF FLOOR AREA OF THE MAIN SANCTUARY OR HALL WHERE SERVICES ARE CONDUCTED, WHICHEVER IS GREATER	28 SPACES
	MAIN SANCTUARY FLOOR AREA = 2,989 SF (2,989 SF)/200 = 15 SPACES	
	PARKING SPACES REQUIRED = 15	



REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-BSMT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24

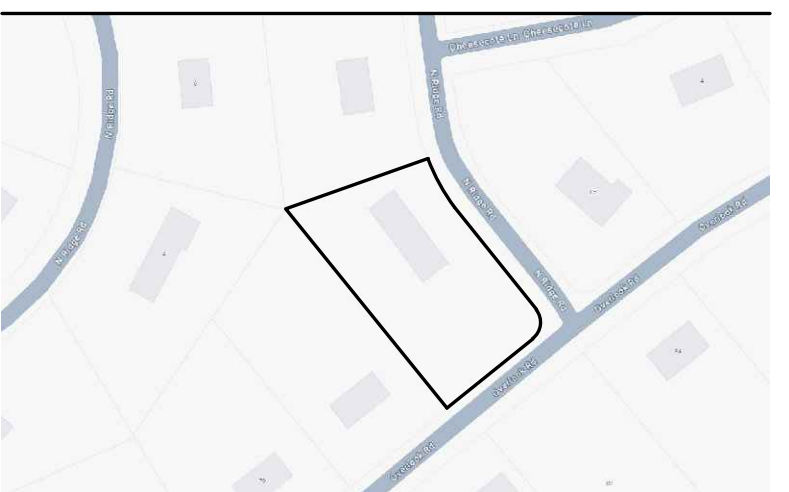


DISCLAIMER:
UNAUTHORIZED ALTERATION OR ADDITIONS TO THESE PLANS IS A VIOLATION OF THE N.Y.S. EDUCATION LAW, ARTICLE 145, SECTION 7209, SUBSECTION 2.

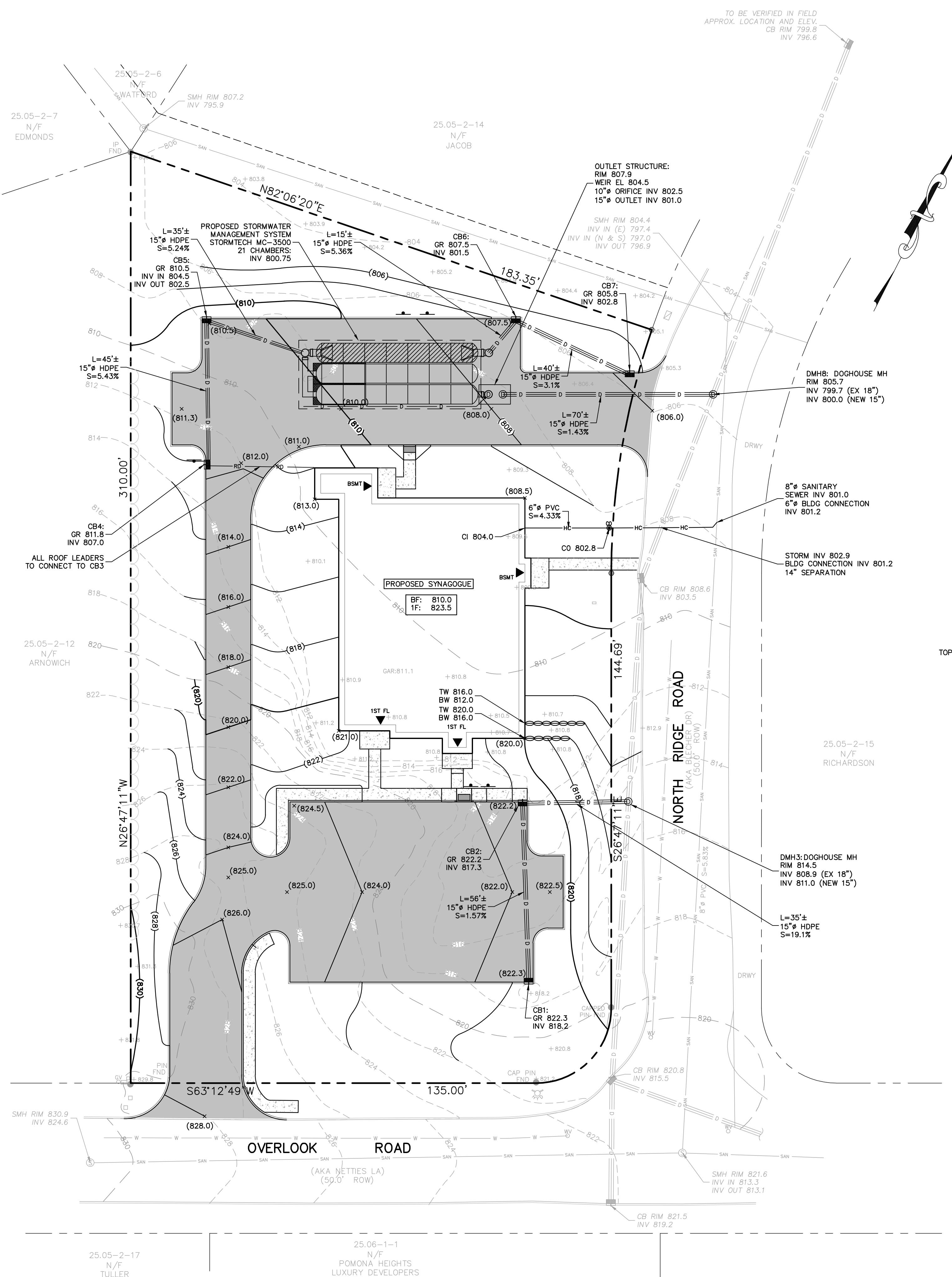


SHEET TITLE:
LAYOUT PLAN

DRAWN BY:	AG/MS	CHECKED BY:	SS
DATE:	5.7.26	PROJECT NO:	2414
SHEET NUMBER:			



PROJECT LOCATION

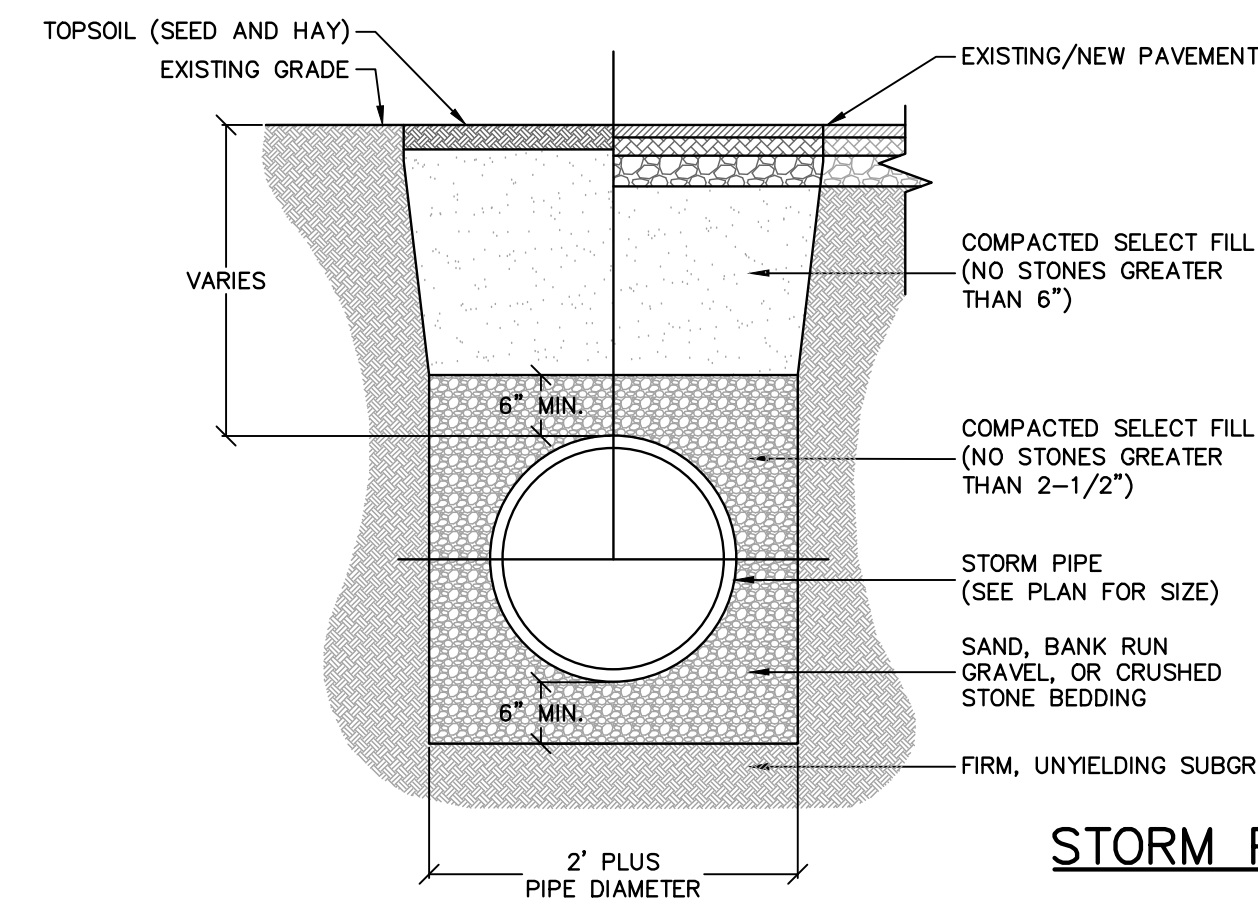


CONSTRUCTION NOTES:

1. CONTRACTOR SHALL FIELD LOCATE ALL EXISTING UTILITIES AND VERIFY ALL LOCATIONS, ELEVATIONS, INVERTS, ETC. PRIOR TO ANY CONSTRUCTION AND NOTIFY THE DESIGN ENGINEER OF ANY DISCREPANCIES ON THIS PLAN.
2. CONTRACTOR SHALL CONTACT ALL UTILITY COMPANIES AND HAVE ALL UTILITIES FIELD LOCATED BY RESPECTIVE UTILITY COMPANY AND SHALL ASSUME FULL RESPONSIBILITY AND SHALL BE SOLELY RESPONSIBLE FOR MAINTAINING CONTINUOUS UTILITY SERVICE AND REPAIRS TO ANY DAMAGE.
3. PROJECT SAFETY AND TRAFFIC MAINTENANCE ARE THE SOLE RESPONSIBILITY OF THE CONTRACTOR.
4. CONTRACTOR TO COORDINATE WITH ALL COMPANIES TO ASSURE ADEQUATE SUPPLY AND SCHEDULING OF NEW SERVICE, WHERE REQUIRED, TO FIT THE CONSTRUCTION SCHEDULING AND SEQUENCE TO ASSURE NO DAMAGE OR DISTURBANCE TO EXISTING SERVICES. IF THE CONTRACTOR DAMAGES ANY MATERIALS WHICH ARE TO REMAIN IN PLACE, THE DAMAGED MATERIALS SHALL BE REPAIRED OR REPLACED IN A MANNER SATISFACTORY TO THE ENGINEER AT THE EXPENSE OF THE CONTRACTOR.
5. THE CONTRACTOR IS RESPONSIBLE TO NOTIFY THE OWNER AND ENGINEER OF ANY UNANTICIPATED UTILITIES ENCOUNTERED AND MAINTAIN THE UTILITIES IN WORKING ORDER UNTIL THEIR DISPOSITION IS RESOLVED.
6. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE RELOCATION, PROTECTION AND/OR TEMPORARY SUPPORT OF ANY UTILITIES ENCOUNTERED WITHIN THE WORK AREA.
7. THE CONTRACTOR SHALL COORDINATE DIRECTLY WITH EACH AFFECTED UTILITY COMPANY, SHALL APPLY FOR AND OBTAIN THE NECESSARY PERMITS AND APPROVALS, AND SHALL INITIATE AND COORDINATE ALL INSPECTIONS NECESSARY FOR FINAL APPROVAL AND ACCEPTANCE BY THE SUBJECT UTILITY COMPANY.
8. CONTRACTOR IS RESPONSIBLE FOR MAINTAINING CONTINUOUS SERVICE OF ALL EXISTING UTILITIES WITHIN THE WORK AREA AT ALL TIMES. CONTRACTOR SHALL COORDINATE ANY REPAIR, RELOCATION OR REMOVAL OF EXISTING UTILITIES WITH EACH RESPECTIVE UTILITY COMPANY AND PROVISIONS MUST BE PROVIDED FOR TEMPORARY SERVICE OF ANY RESPECTIVE UTILITY SERVICE AFFECTED BY THE CONSTRUCTION IN THE EVENT OF ANY DISRUPTION TO THE EXISTING UTILITY. SHUT-DOWNS SHALL BE AT THE DISCRETION OF THE RESPECTIVE UTILITY COMPANIES AND COORDINATED WITH THE MUNICIPALITY AND THE ENGINEER FOR PUBLIC NOTICE IF NECESSARY. TEMPORARY SERVICE SHALL BE PROVIDED AND MAINTAINED AT NO ADDITIONAL COST.
9. ALL STORM DRAINAGE PIPE TO BE HIGH DENSITY POLYETHYLENE PIPE (HDPE) WITH SMOOTH INTERIOR UNLESS OTHERWISE SPECIFIED.
10. ALL ROOF LEADERS ARE TO BE CONNECTED TO THE ON-SITE STORMWATER SYSTEM. ROOF DOWNSPOUTS AND RECEIVING LEADER SIZES SHALL BE SPECIFIED BY THE BUILDING MECHANICAL ENGINEER. FINAL LOCATIONS OF ROOF LEADERS ARE TO BE FINALIZED BY CONTRACTOR. ROOF LEADER PIPES SHALL BE SDR-35 PVC.
11. WATER SERVICE LINE AND SEWER CONNECTION SHALL BE PLACED IN SEPARATE TRENCHES WITH A MINIMUM HORIZONTAL DISTANCE OF TEN FEET BETWEEN THEM.
12. SANITARY SEWER PIPE SHALL BE SDR-35 PVC.
13. WATER MAIN PIPE, VALVES, FITTINGS, THRUST RESTRAINT, TAPPING SLEEVES, HYDRANTS, ETC SHALL CONFORM WITH VEOLIA STANDARD SPECIFICATIONS.
14. ALL TRAFFIC CONTROL DEVICES SHALL BE IN ACCORDANCE WITH THE NEW YORK STATE MANUAL OF UNIFORM TRAFFIC CONTROL DEVICES.
15. ALL DIMENSIONS ARE MEASURED TO THE ROUGH UNLESS OTHERWISE NOTED. ELEVATIONS AND DIMENSIONS SHOWN ARE FOR GENERAL REFERENCE ONLY. THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS, CONDITIONS, AND ELEVATIONS IN THE FIELD PRIOR TO THE USE OF SUCH INFORMATION IN BIDDING OR CONSTRUCTION. THE CONTRACTOR SHALL TAKE ALL FIELD MEASUREMENTS NECESSARY TO ASSURE PROPER FIT OF FINISHED WORK AND SHALL ASSUME FULL RESPONSIBILITY FOR THEIR ACCURACY. NOTIFY THE ENGINEER IMMEDIATELY OF ANY DIMENSIONAL DISCREPANCIES.
16. THE CONTRACTOR SHALL PERFORM ALL WORK WITH CARE SO THAT ANY MATERIALS WHICH ARE TO REMAIN IN PLACE WILL NOT BE DAMAGED. IF THE CONTRACTOR DAMAGES ANY MATERIALS WHICH ARE TO REMAIN IN PLACE, THE DAMAGED MATERIALS SHALL BE REPAIRED OR REPLACED IN A MANNER SATISFACTORY TO THE ENGINEER AT THE EXPENSE OF THE CONTRACTOR.
17. THE SITE SHALL BE KEPT CLEAN AT ALL TIMES. UPON COMPLETION OF WORK, ALL EXCESS MATERIAL, DEBRIS, ETC. SHALL BE REMOVED AND PROPERLY DISPOSED OF AND THE WORK AREA SHALL BE LEFT CLEAN TO THE OWNER'S SATISFACTION.

MOSQUITO CONTROL NOTES

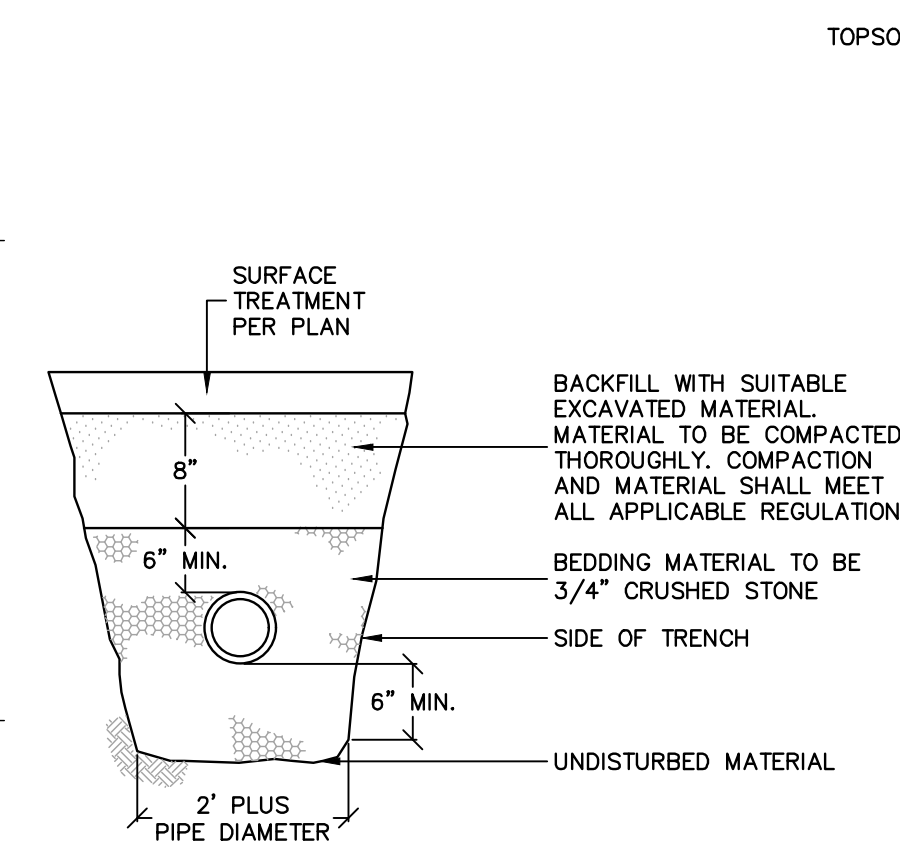
1. ALL STORMWATER FACILITIES ON THIS SITE HAVE BEEN DESIGNED TO REMOVE ALL STANDING WATER WITHIN FIVE DAYS OF A RAIN EVENT.
2. ALL STORMWATER FACILITIES SHALL BE INSPECTED AFTER SIGNIFICANT RAINFALLS AND AT LEAST ONCE PER MONTH.
3. IF, UPON INSPECTION, WATER REMAINS IN THE STORMWATER FACILITIES LONGER THAN FIVE DAYS AFTER A RAIN EVENT, ONE OF THE FOLLOWING MEASURES WILL BE TAKEN:
 - A) THE WATER WILL BE MECHANICALLY REMOVED (I.E. BY VACUUM); OR
 - B) THE WATER WILL BE MECHANICALLY AGITATED TO PREVENT MOSQUITO BREEDING; OR
 - C) THE WATER WILL BE TREATED WITH MOSQUITO LARVICIDE IN ACCORDANCE WITH NYSDEC AND ROCKLAND COUNTY HEALTH DEPARTMENT GUIDELINES, REGULATIONS AND PROCEDURES.
4. MOSQUITO BREEDING SUPPRESSION MEASURES MUST BE IMPLEMENTED BETWEEN APRIL 1 AND OCTOBER 31.
5. LARVICIDE TO BE APPLIED SHALL BE "MOSQUITO DUNKS" AS MANUFACTURED BY SUMMIT CHEMICAL CO., BALTIMORE, MD. OR ROCKLAND COUNTY DEPARTMENT OF HEALTH APPROVED EQUAL. LARVICIDE SHALL BE APPLIED IN ACCORDANCE WITH MANUFACTURER'S SPECIFICATIONS.
6. THE LONG TERM MAINTENANCE OF THE ON-SITE STORMWATER SYSTEM SHALL BE THE RESPONSIBILITY OF THE PROPERTY OWNER.



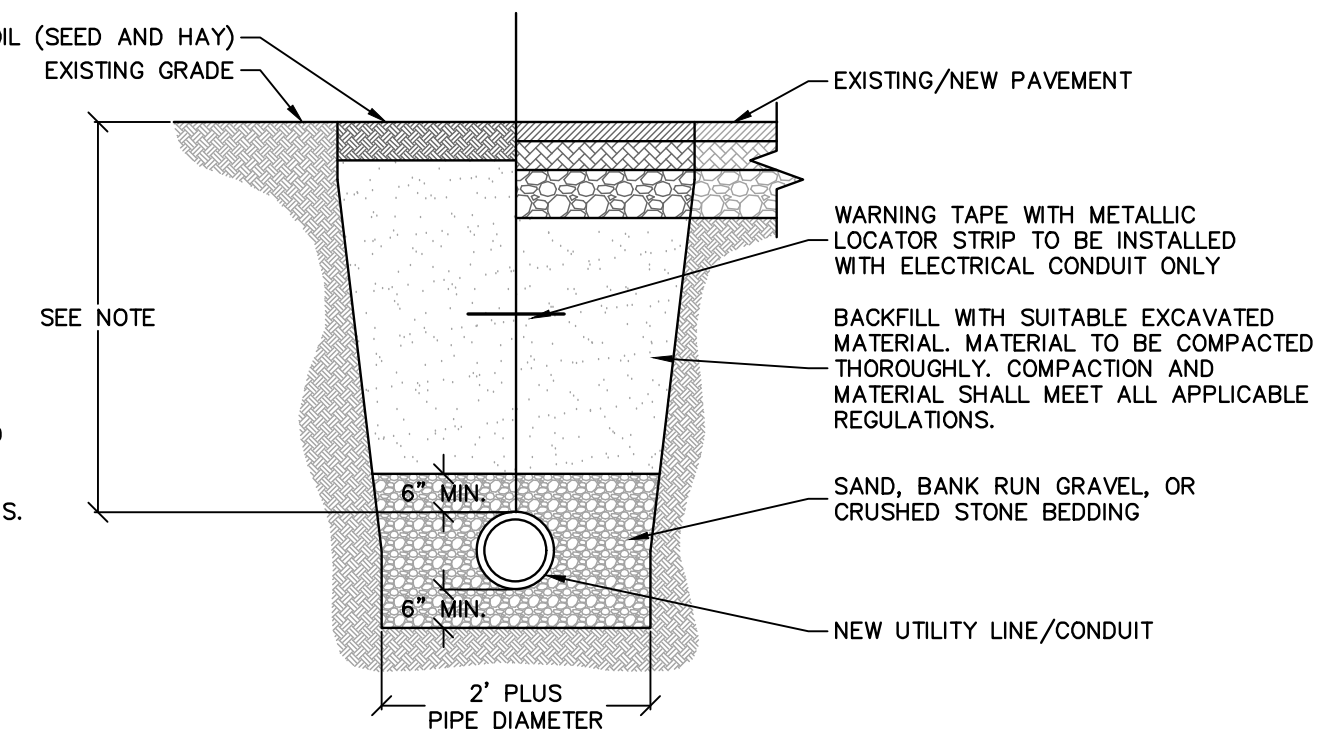
STORM PIPE TRENCH DETAIL
N.T.S.

NOTES:

1. ALL PIPE SYSTEM INSTALLATIONS SHALL MEET ALL APPLICABLE STANDARDS AND SPECIFICATIONS.
2. ALL HDPE PIPE SYSTEMS SHALL BE INSTALLED IN ACCORDANCE WITH ASTM D2321, "STANDARD PRACTICE FOR UNDERGROUND INSTALLATION OF THERMOPLASTIC PIPE FOR SEWERS AND OTHER RAVITY FLOW APPLICATIONS" (LATEST EDITION).
3. ALL ROP PIPE SYSTEMS SHALL BE INSTALLED IN ACCORDANCE WITH ASTM C76-15, "STANDARD SPECIFICATION FOR REINFORCED CONCRETE CULVERT, STORM DRAIN, AND SEWER PIPE" (LATEST EDITION). FOR NON HDPE OR ROP PIPE INSTALLATIONS, CONTRACTOR SHALL INSTALL PIPE IN ACCORDANCE WITH ALL APPLICABLE STANDARDS AND SPECIFICATIONS.
4. WHERE THE TRENCH BOTTOM IS UNSTABLE, CONTRACTOR SHALL PROVIDE SUITABLE BACKFILL MATERIAL AS REQUIRED BY ENGINEER OR PER GEOTECH RECOMMENDATIONS.
5. MINIMUM COVER IN TRAFFIC AREAS IS 12" UP TO 48" DIAMETER PIPE AND 24" FOR 54" - 60" DIAMETER PIPE TO BOTTOM OF FLEXIBLE PAVEMENT OR TOP OF RIGID PAVEMENT.
6. CONTRACTOR SHALL INSTALL SUITABLE MATERIAL FOR INITIAL AND FINAL BACKFILL. BACKFILL COMPACTION SHOULD MEET ALL APPLICABLE STANDARDS AND SPECIFICATIONS.



SEWER LATERAL TRENCH DETAIL
N.T.S.



UTILITY TRENCH DETAIL
N.T.S.

NOTES:

1. MINIMUM PIPE COVER SHALL BE AS FOLLOWS:
2. ELECTRIC SERVICE - PER APPLICABLE UTILITY AUTHORITY/COMPANY
3. GAS SERVICE - PER APPLICABLE UTILITY AUTHORITY/COMPANY
4. WATER SERVICE - 4' MINIMUM

REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-BSMT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24

SEAL:



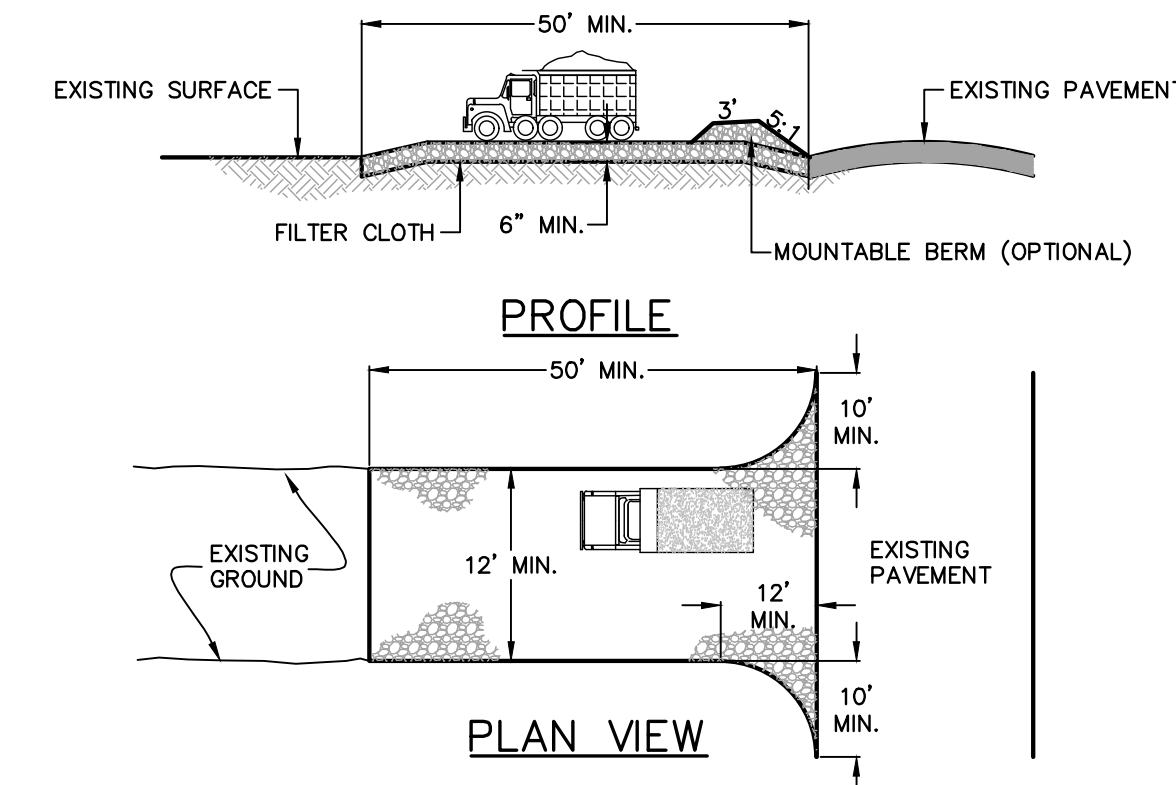
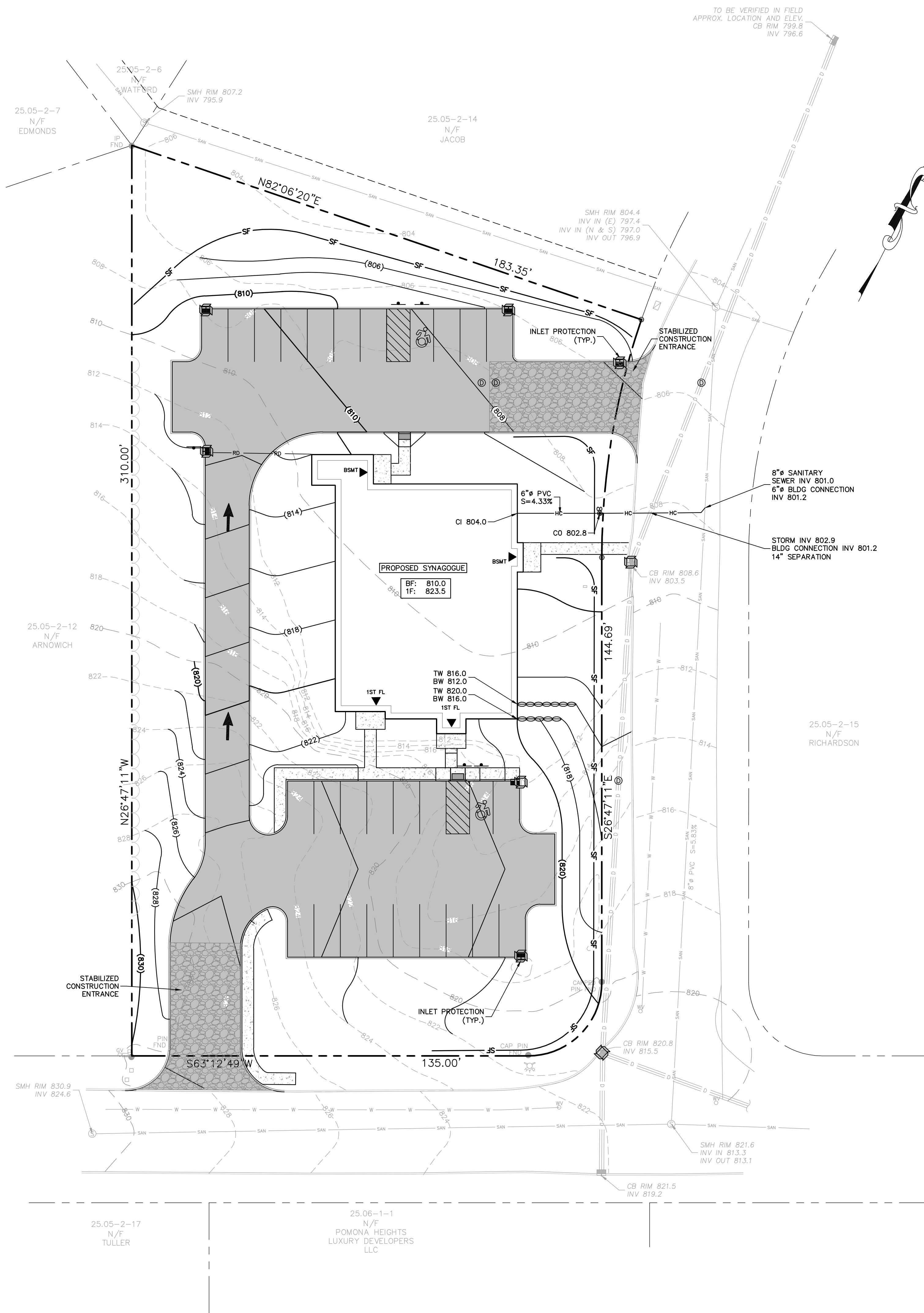
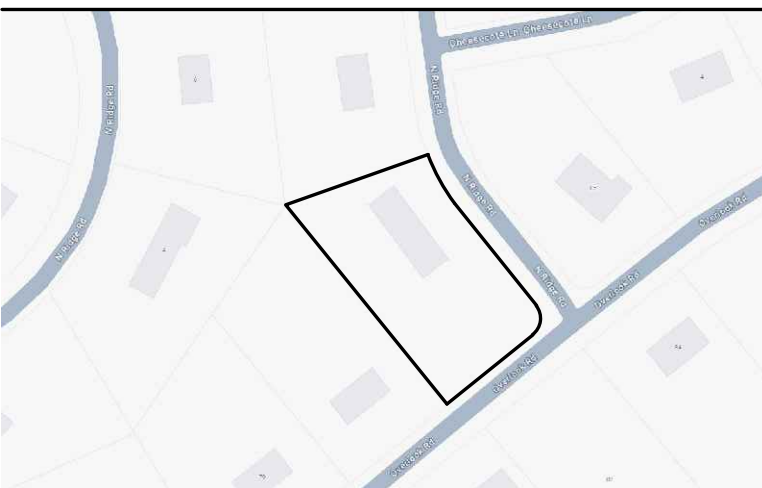
DISCLAIMER:
UNAUTHORIZED ALTERATION OR ADDITIONS TO THESE PLANS IS A VIOLATION OF THE N.Y.S. EDUCATION LAW, ARTICLE 145, SECTION 7209, SUBSECTION 2.

PROJECT:
CHABAD OF THE HEIGHTS
34 NORTH RIDGE ROAD

SCALE: 1"=20'
0 20' 40'

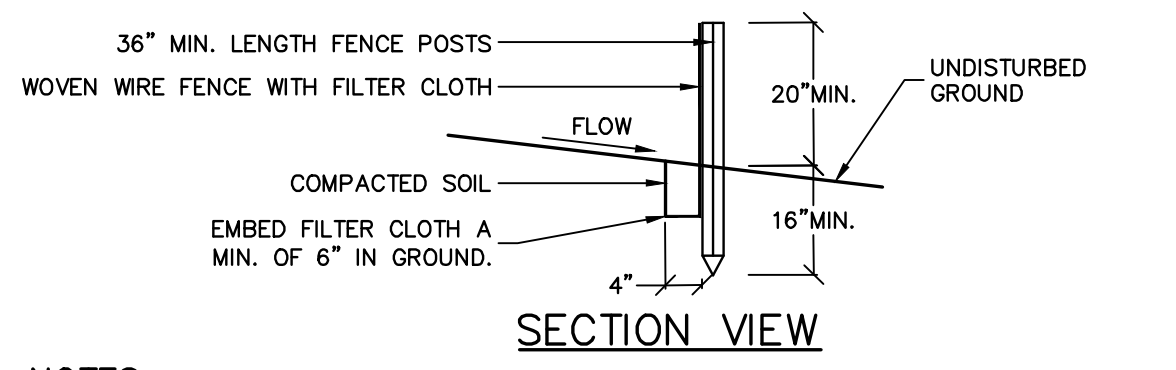
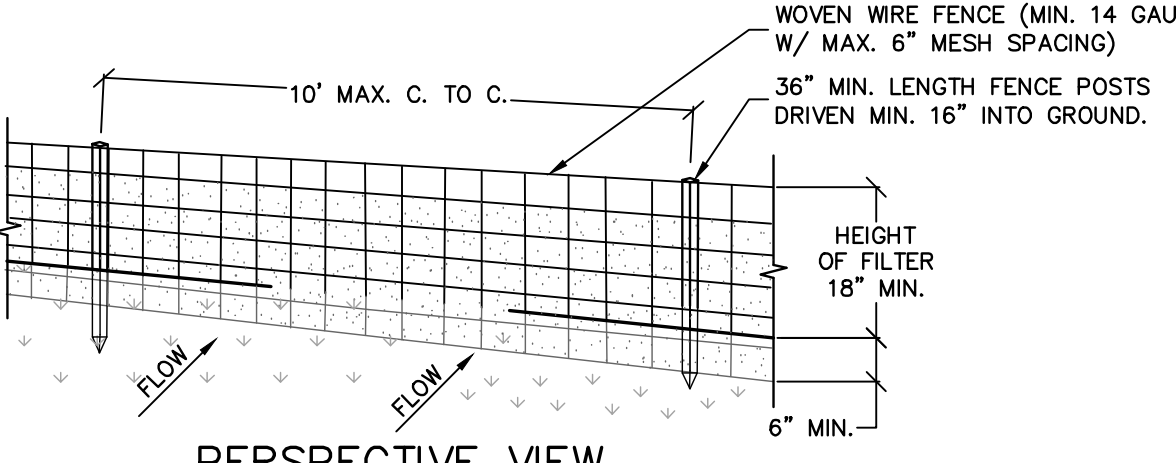
SHEET TITLE:
GRADING AND UTILITY PLAN

DRAWN BY: AG/MS CHECKED BY: SS
DATE: 5.7.26 PROJECT NO: 2414
SHEET NUMBER:



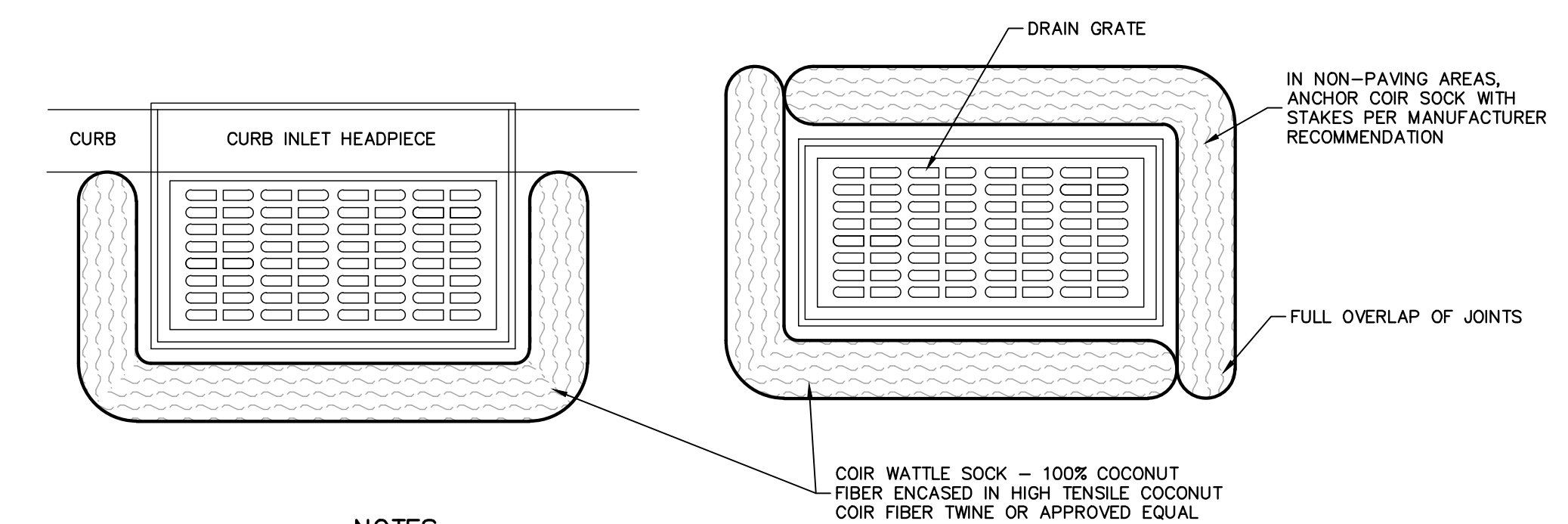
- NOTES:**
1. STONE SIZE - USE 1-4 INCH STONE, OR RECLAIMED OR RECYCLED CONCRETE EQUIVALENT.
 2. LENGTH - NOT LESS THAN 50' (EXCEPT ON A SINGLE RESIDENCE LOT WHERE A 30 FOOT MINIMUM LENGTH WOULD APPLY).
 3. THICKNESS - NOT LESS THAN SIX (6) INCHES.
 4. WIDTH - TWELVE (12) FOOT MINIMUM, BUT NOT LESS THAN THE FULL WIDTH AT POINTS WHERE INGRESS AND EGRESS OCCURS. TWENTY - FOUR (24) FOOT IF SINGLE ENTRANCE SITE.
 5. GEOTEXTILE - WILL BE PLACED OVER THE ENTIRE AREA PRIOR TO PLACING OF STONE.
 6. SURFACE WATER - ALL SURFACE WATER FLOWING OR DIVERTED TOWARD CONSTRUCTION ENTRANCES SHALL BE PIPED BENEATH THE ENTRANCE. IF PIPING IS IMPRACTICAL, A MOUNTABLE BERM WITH 5:1 SLOPES WILL BE PERMITTED.
 7. MAINTENANCE - THE ENTRANCE SHALL BE MAINTAINED IN A CONDITION WHICH WILL PREVENT TRACKING OR FLOWING OF SEDIMENT SPILLED, DROPPED, WASHED OR TRACED ONTO PUBLIC RIGHTS-OF-WAY. ALL SEDIMENT SPILLED, DROPPED, WASHED OR TRACED ONTO PUBLIC RIGHTS-OF-WAY MUST BE REMOVED IMMEDIATELY.
 8. WHEN WASHING IS REQUIRED, IT SHALL BE DONE ON AN AREA STABILIZED WITH STONE AND WHICH DRAINS INTO AN APPROVED SEDIMENT TRAPPING DEVICE.
 9. PERIODIC INSPECTION AND NEEDED MAINTENANCE SHALL BE PROVIDED AFTER EACH RAIN.

STABILIZED CONSTRUCTION ENTRANCE DETAIL
N.T.S.



- NOTES:**
1. WOVEN WIRE FENCE TO BE FASTENED SECURELY TO FENCE POSTS WITH WIRE TIES OR STAPLES. POSTS SHALL BE STEEL EITHER "I" OR "U" TYPE OR HARDWOOD.
 2. FILTER CLOTH TO BE TO BE FASTENED SECURELY TO WOVEN WIRE FENCE WITH TIES SPACED EVERY 24" AT TOP AND MID SECTION. FENCE SHALL BE WOVEN WIRE, 12 1/2 GAUGE, 6" MAXIMUM MESH OPENING.
 3. WHEN TWO SECTIONS OF FILTER CLOTH ADJOIN EACH OTHER THEY SHALL BE OVER-LAPPED BY SIX INCHES AND FOLDED. FILTER CLOTH SHALL BE EITHER FILTER X, MIRAFI 100X, STABLUKA 1140N, OR APPROVED EQUIVALENT.
 4. PREFABRICATED UNITS SHALL BE GEOTAB, ENVIROFENCE, OR APPROVED EQUIVALENT.
 5. MAINTENANCE SHALL BE PERFORMED AS NEEDED AND MATERIAL REMOVED WHEN "BULGES" DEVELOP IN THE SILT FENCE.

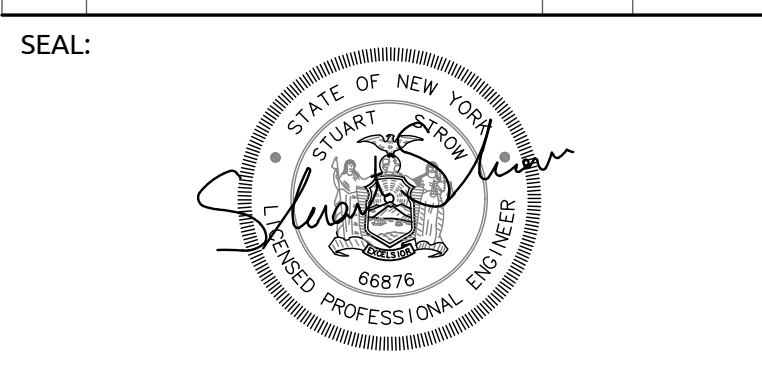
SILT FENCE
N.T.S.



- NOTES:**
1. MAINTENANCE SHALL BE PERFORMED AFTER EACH STORM EVENT AND PER MANUFACTURERS SPECIFICATIONS.
 2. CURB INLET PROTECTION SOCK SHALL BE FLUSH WITH CURB FACE OR TAPERED ALONG GUTTER LINE.

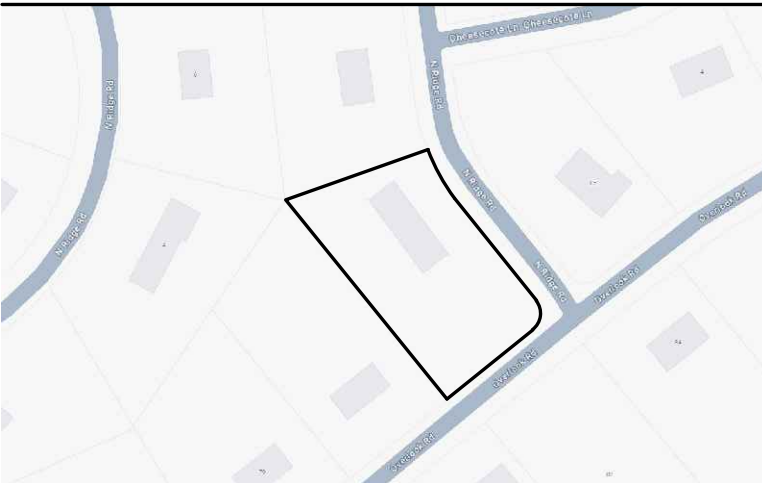
ORGANIC FILTER INLET PROTECTION DETAIL
N.T.S.

REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-BSMT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24

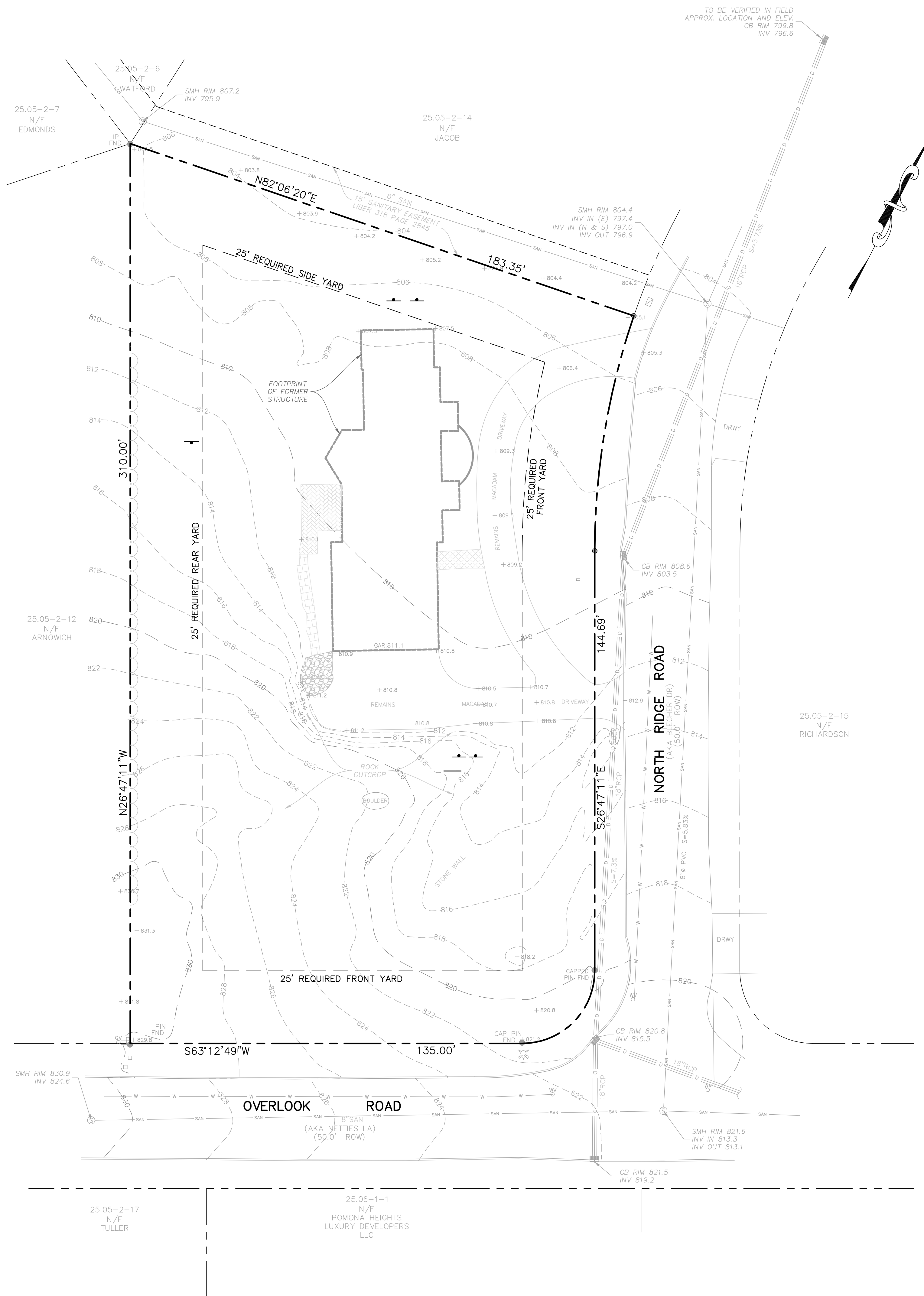


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PROJECT:
CHABAD OF THE HEIGHTS
34 NORTH RIDGE ROAD
VILLAGE OF POMONA
ROCKLAND COUNTY, NEW YORK



PROJECT LOCATION



REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-BSMT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24

SEAL:

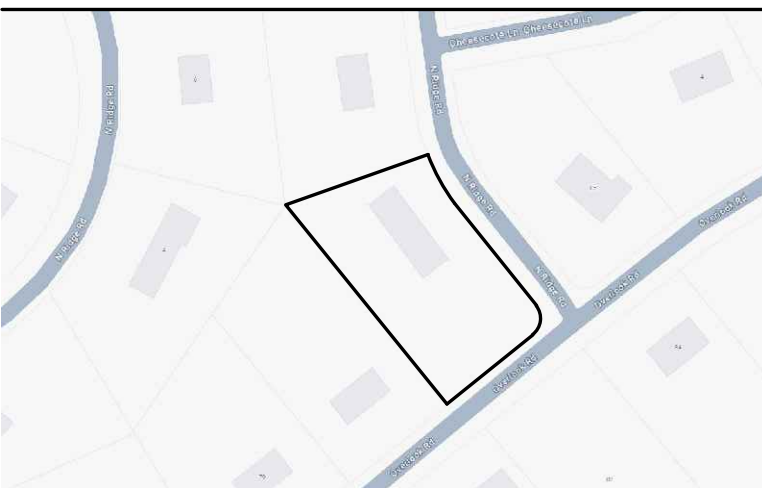
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OF THE N.Y.S. EDUCATION LAW, ARTICLE 145, SECTION 1209, SUBSECTION 2.

PROJECT:
CHABAD OF THE HEIGHTS
34 NORTH RIDGE ROAD

SCALE:

SHEET TITLE:
**EXISTING
CONDITIONS**

DRAWN BY: AG/MS CHECKED BY: SS
DATE: 5.7.26 PROJECT NO: 2414
SHEET NUMBER:



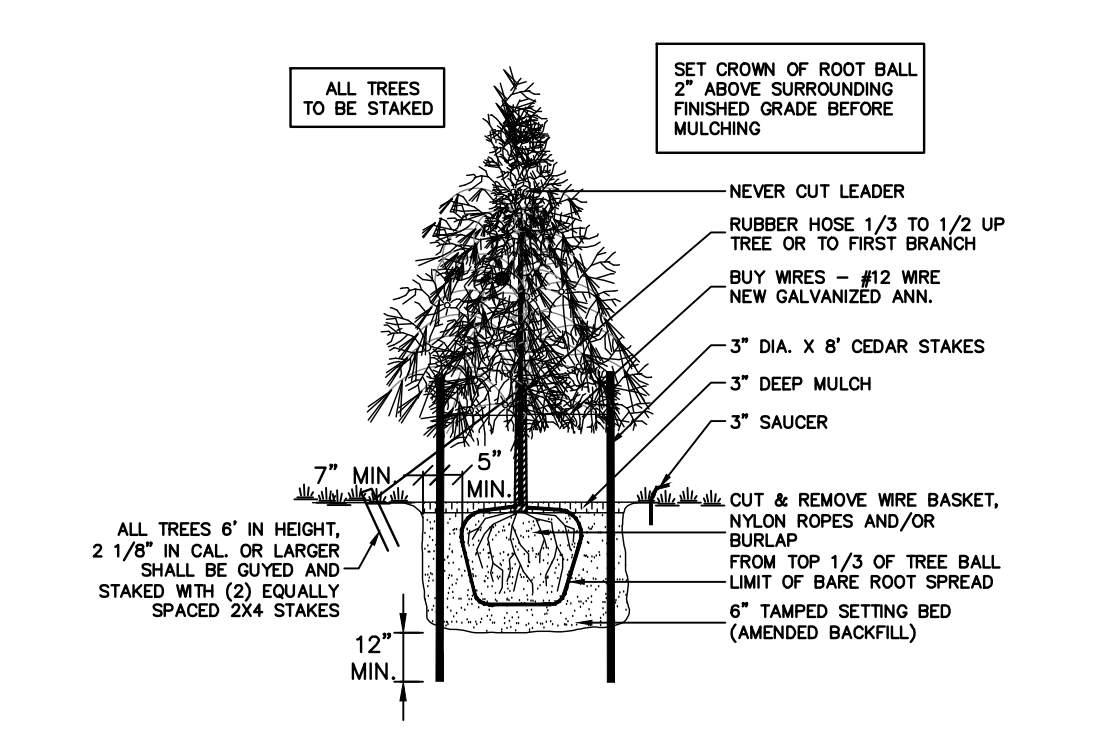
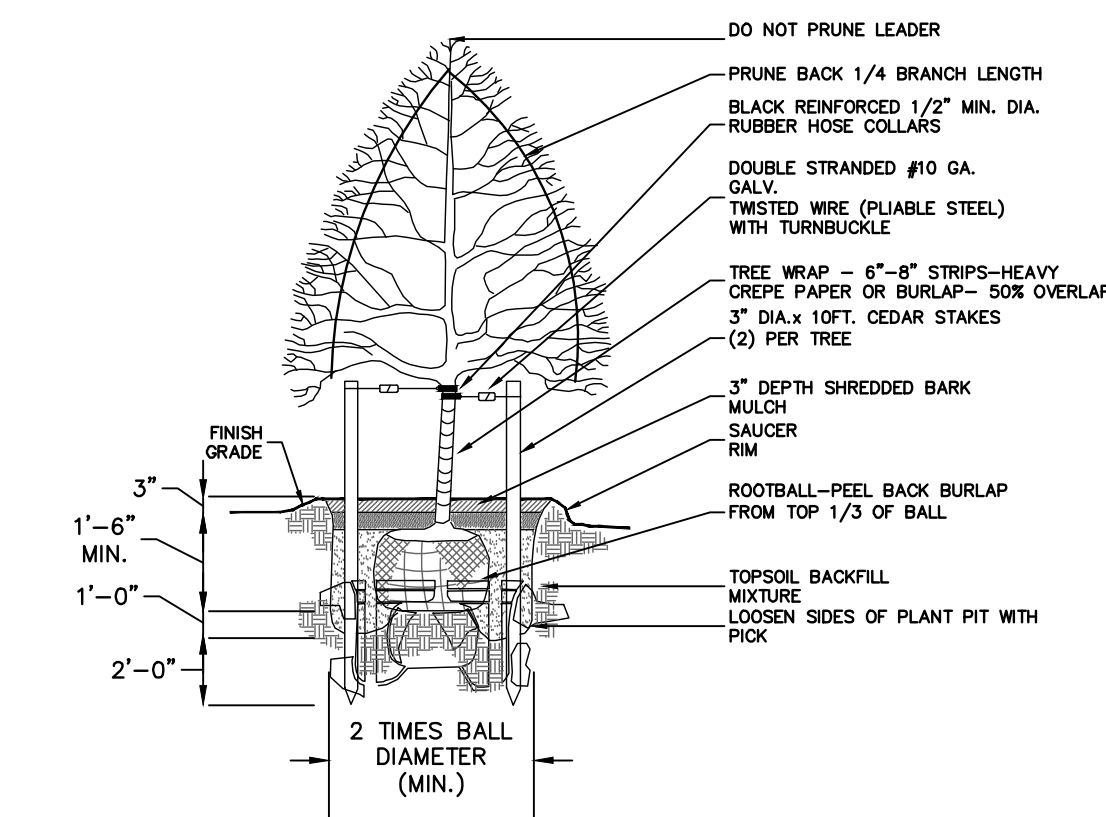
PROJECT LOCATION

STANDARD LANDSCAPE NOTES:

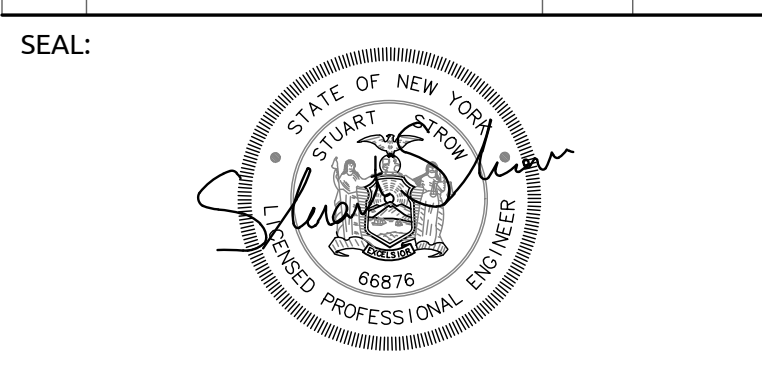
- MULCH ALL PLANT BED AND TREES WITH 4" DEPTH OF SUGAR CANE OR LICORICE ROOT MULCH.
- STAKE ALL TREES WITH 2 CEDAR STAKES, RUBBER HOSE AROUND TREE (6"-0" ABOVE GRADE) AND TWISTED #10 GAUGE GALVANIZED WIRE.
- PLANT PIT SHALL BE 12" WIDER AND 6" DEEPER THAN THE ROOT BALL. REMOVE ALL EXISTING SOIL AND BACKFILL WITH MIXTURE OF ONE PART PEAT-HUMUS TO 4 PARTS TOPSOIL. ADD 3 YEAR "EESEY" GROW FERTILIZER PACKETS (OR EQUAL) - 1 PER INCH OF TREE CALIPER OR PER 12" HEIGHT OF SHRUB.
- GUARANTEE ALL PLANTS AND WORKMANSHIP FOR TWO PLANTING SEASONS.
- ALL PLANTING SHALL BE PLACED UNDER THE DIRECTION OF AN APPROPRIATE LICENSED DESIGN PROFESSIONAL. NOTIFY 48 HOURS PRIOR TO PLANTING.
- PROVIDE THE VILLAGE OF CHESTNUT RIDGE BUILDING INSPECTOR WITH A COPY OF THE STATE CERTIFICATE OF SOURCE FOR ALL PLANT MATERIAL.
- ALL PLANT MATERIAL SHALL BE NURSERY GROWN AND SHALL CONFORM TO THE AMERICAN ASSOCIATION OF NURSERY MEN'S STANDARDS.
- PROVIDE 4" MINIMUM TOPSOIL ON ALL DISTURBED AREAS OF SITE TO BE GRASSED OR LANDSCAPE.
- PERENNIAL PLANTING BEDS TO BE INSTALLED WITH PLANT SELECTION AT THE OWNERS DISCRETION AND MAINTAINED ANNUALLY.
- PROPOSED PERMANENT SEED SHALL BE THE FOLLOWING SEED MIX: 40% JAMESTOWN CHEWINGS FESCUE, 40% BARON KENTUCKY BLUEGRASS, AND 20% YORKTOWN PERENNIAL RYE OR APPROVED EQUIVALENT AT 5 LBS. PER 1000 SF.
- ALL DISTURBED AREAS SHALL BE SEEDS AS INDICATED IN NOTE 10 ABOVE, AND MAINTAINED AS GRASS UNLESS OTHERWISE INDICATED.

PLANTING SCHEDULE

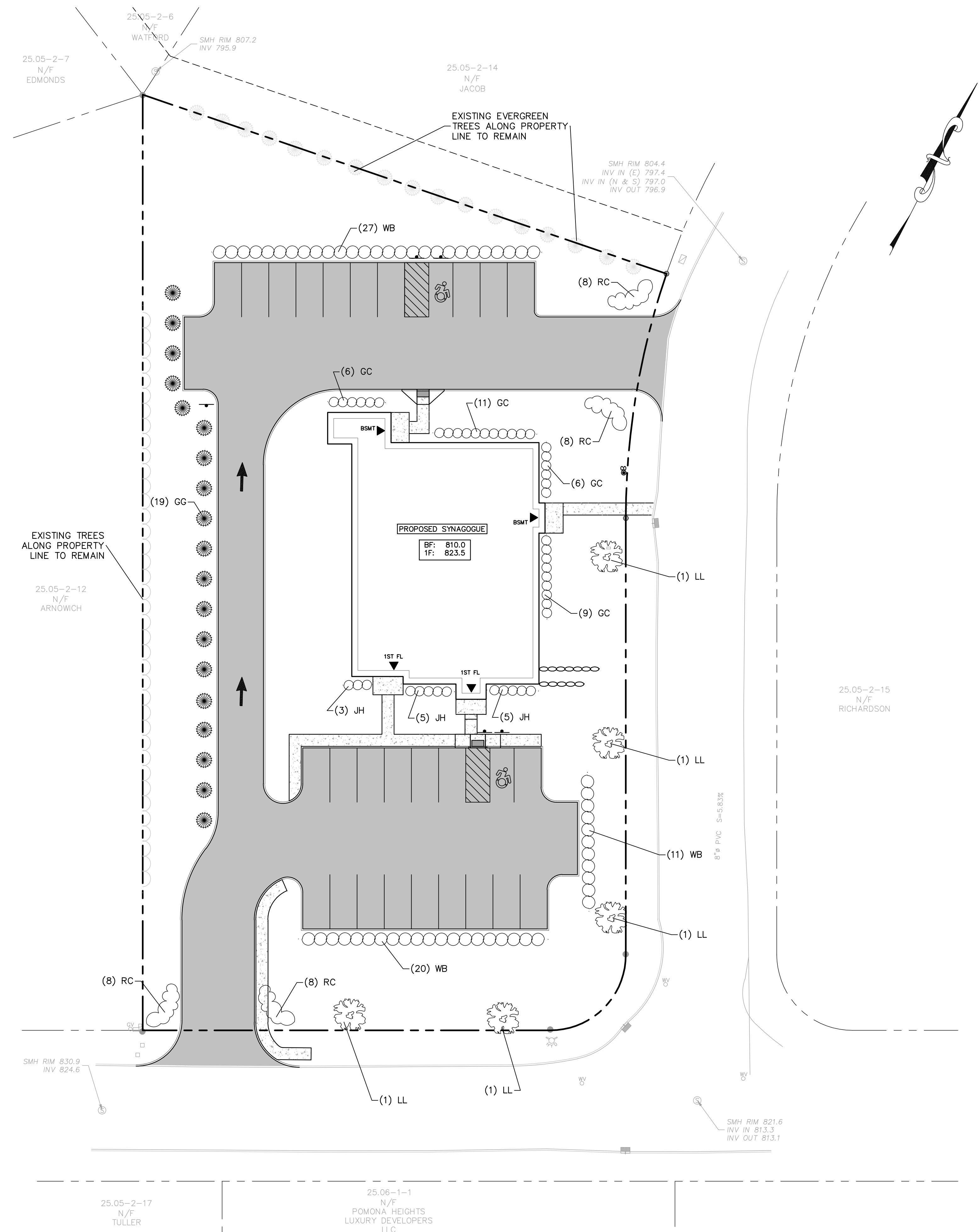
SYMBOL	PLANT NAME	QUANTITY	SIZE & REMARKS
GG	THUJA STANDISHII XPLICATA "GREEN GIANT"	19	4'-5" HT; 3' O.C.
GC	ILEX CLABRA "COMPACTA" COMPACT INKBERRY	32	24"-36" HT. CONTAINER
JH	ILEX CRENATA "BEEHIVE" BEEHIVE JAPANESE HOLLY	13	15"-18" HT. B&B
WB	BUXUS MICROPHYLLA "WINTERGREEN" BOXWOOD	47	15"-18" HT. B&B
LL	TILIA CORDATA GREENSPIRE GREENSPIRE LINDEN	5	2-1/2"-3" CALIPER B&B
RC	COTONEASTER DAMMERI ROYAL BEAUTY ROYAL BEAUTY COTONEASTER	32	15"-18" SPR. B&B

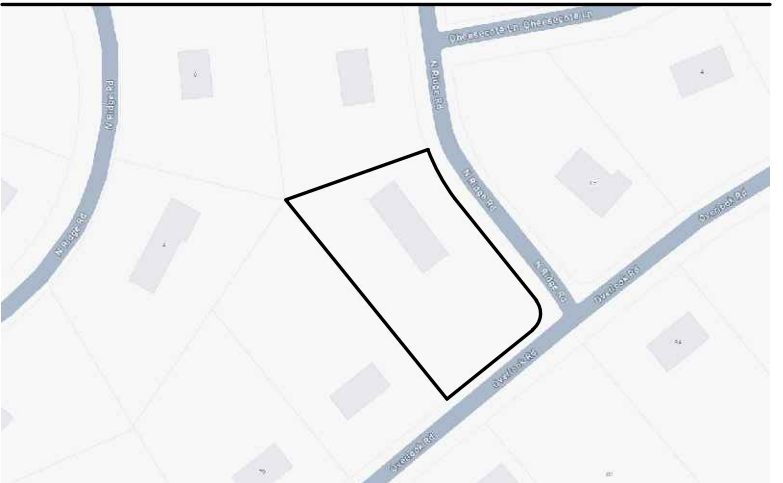


REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-BSMT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24

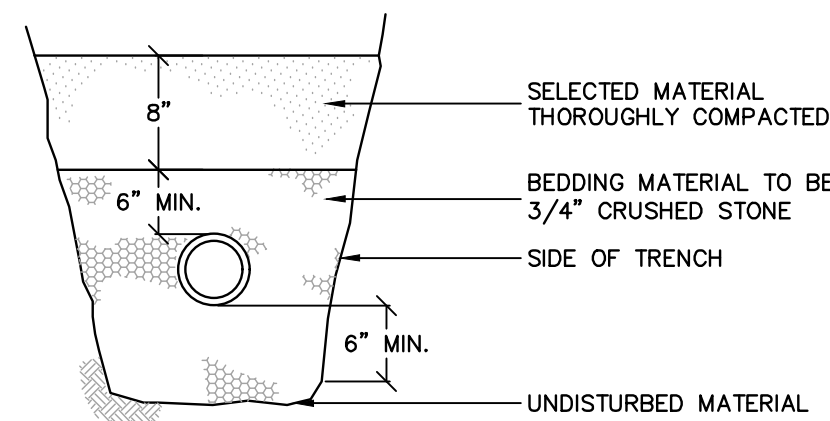


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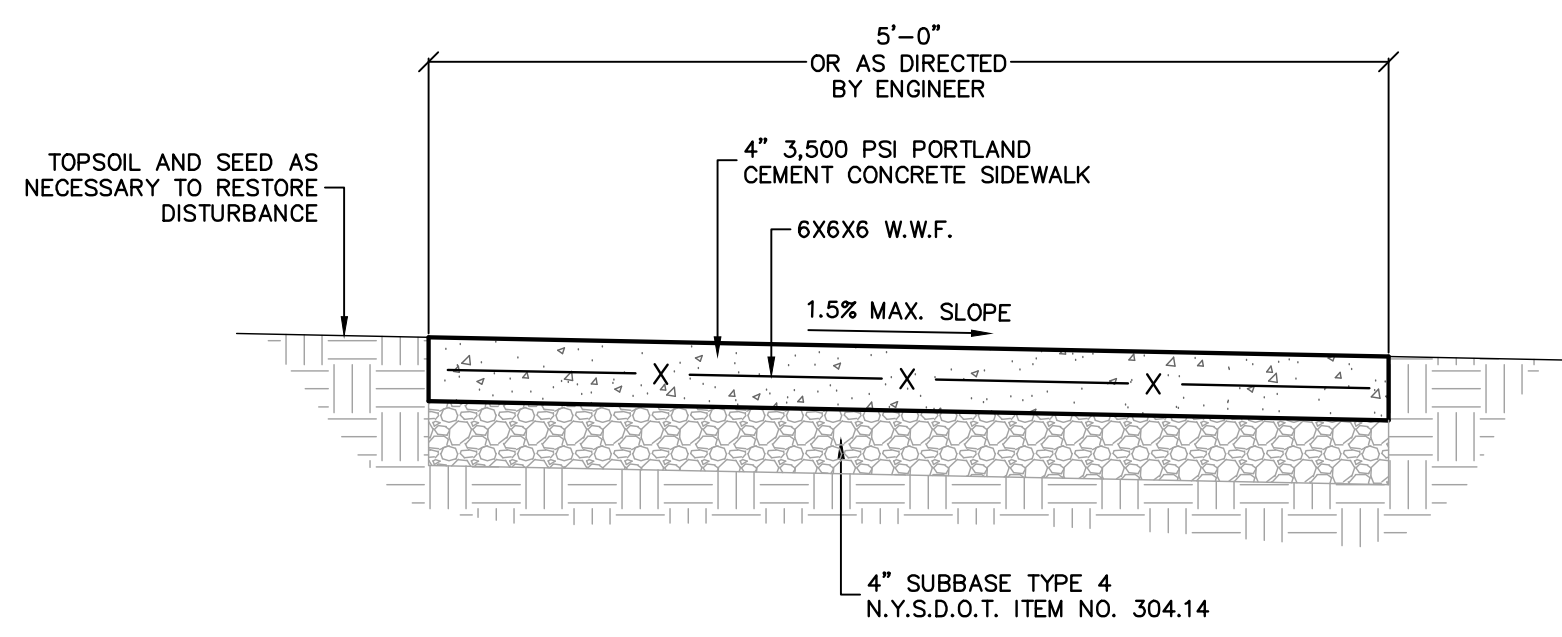




PROJECT LOCATION



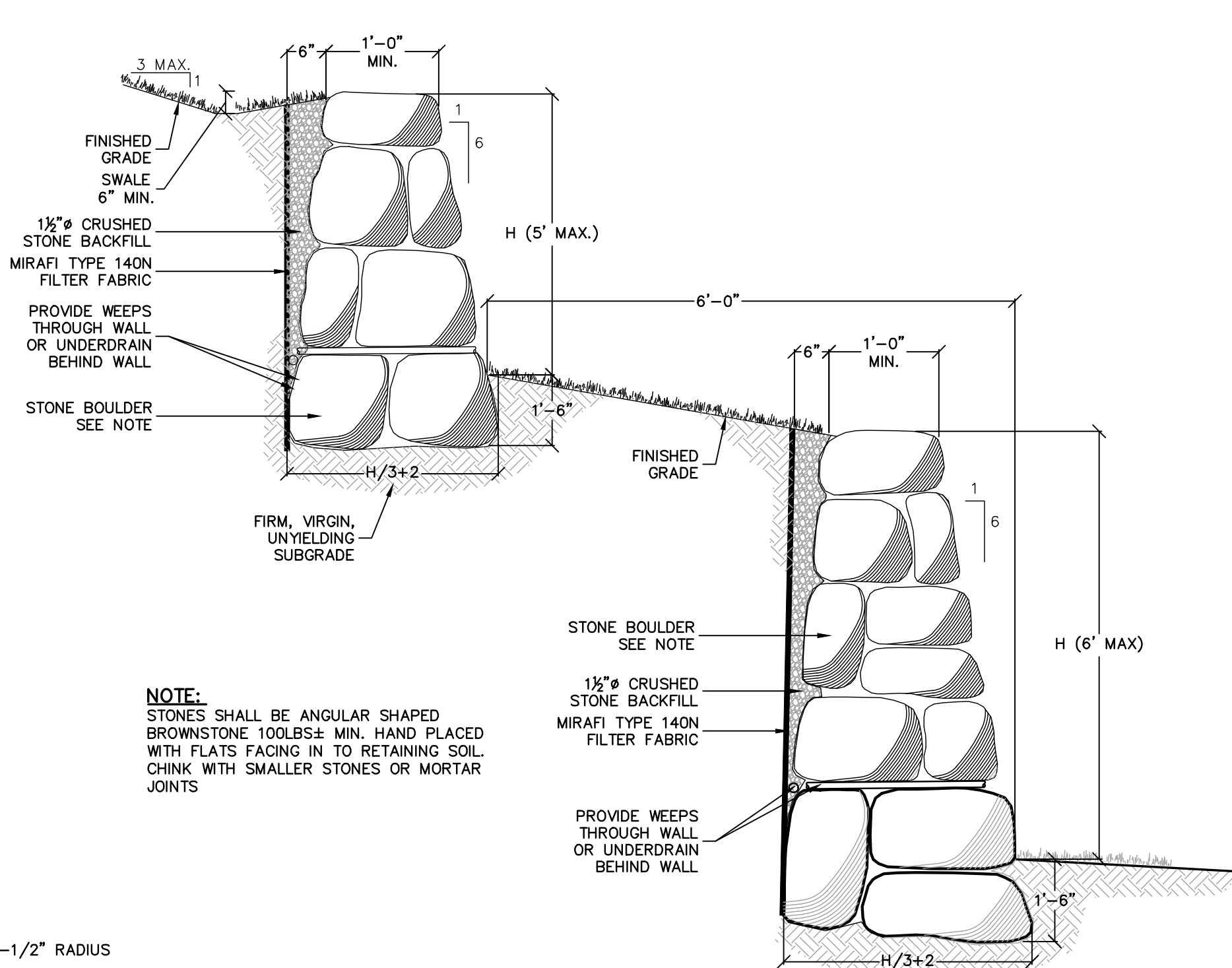
SECTION B-B



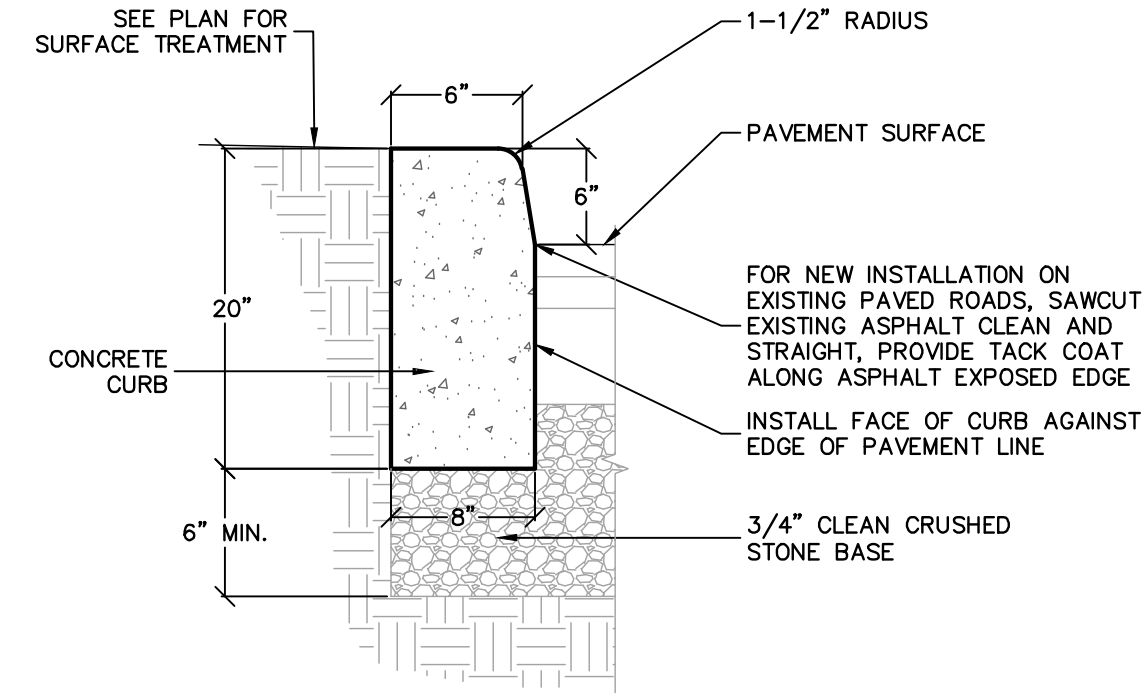
CONCRETE SIDEWALK NOTES

1. ALL WORK SHALL CONFORM TO NYS STANDARD SPECIFICATIONS CONSTRUCTION AND MATERIALS, AS AMENDED.
2. FULL DEPTH TRANSVERSE EXPANSION JOINTS SHALL BE PLACED EVERY 10 FEET TO FULL DEPTH OF CURB.
3. CONCRETE SURFACE SHALL BE SCORED AND TOOLED EVERY 5 FEET.
4. ALL EDGES SHALL BE FINISHED WITH AN EDGING TOOL WITH A RADIUS OF 1/4 INCH.
5. A 1/2 INCH BITUMINOUS JOINT FILLER SHALL BE PLACED AT ALL JOINTS BETWEEN SIDEWALK, CURB, PAVEMENT, BUILDING STRUCTURES ETC.
6. THE CONCRETE SHALL BE FINISHED TO PRODUCE A SMOOTH FINISH AND THEN LIGHTLY BROOMED TO A UNIFORM TEXTURE.
7. A CLEAR MEMBRANE CURING COMPOUND OR EQUAL SHALL BE USED UPON COMPLETION OF FINISHING.
8. ALL SIDEWALKS SHALL ADHERE TO ADA GUIDELINES.
9. CONCRETE DEPTH SHALL BE 4\"/>

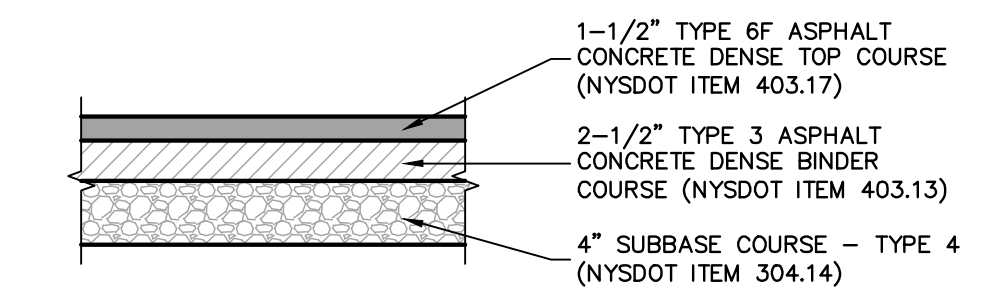
CONCRETE SIDEWALK DETAIL
N.T.S.



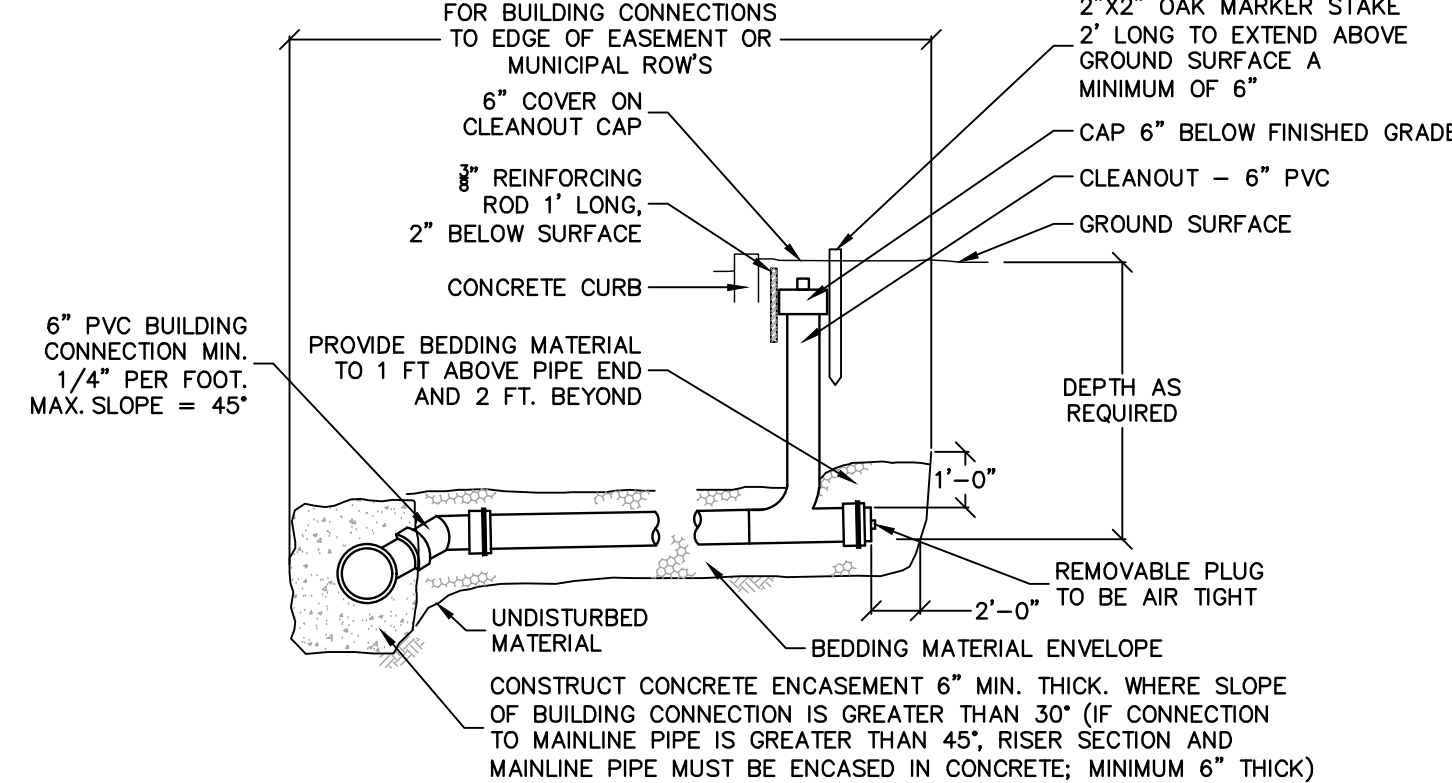
TERRACED STONE WALL CROSS SECTION
N.T.S.



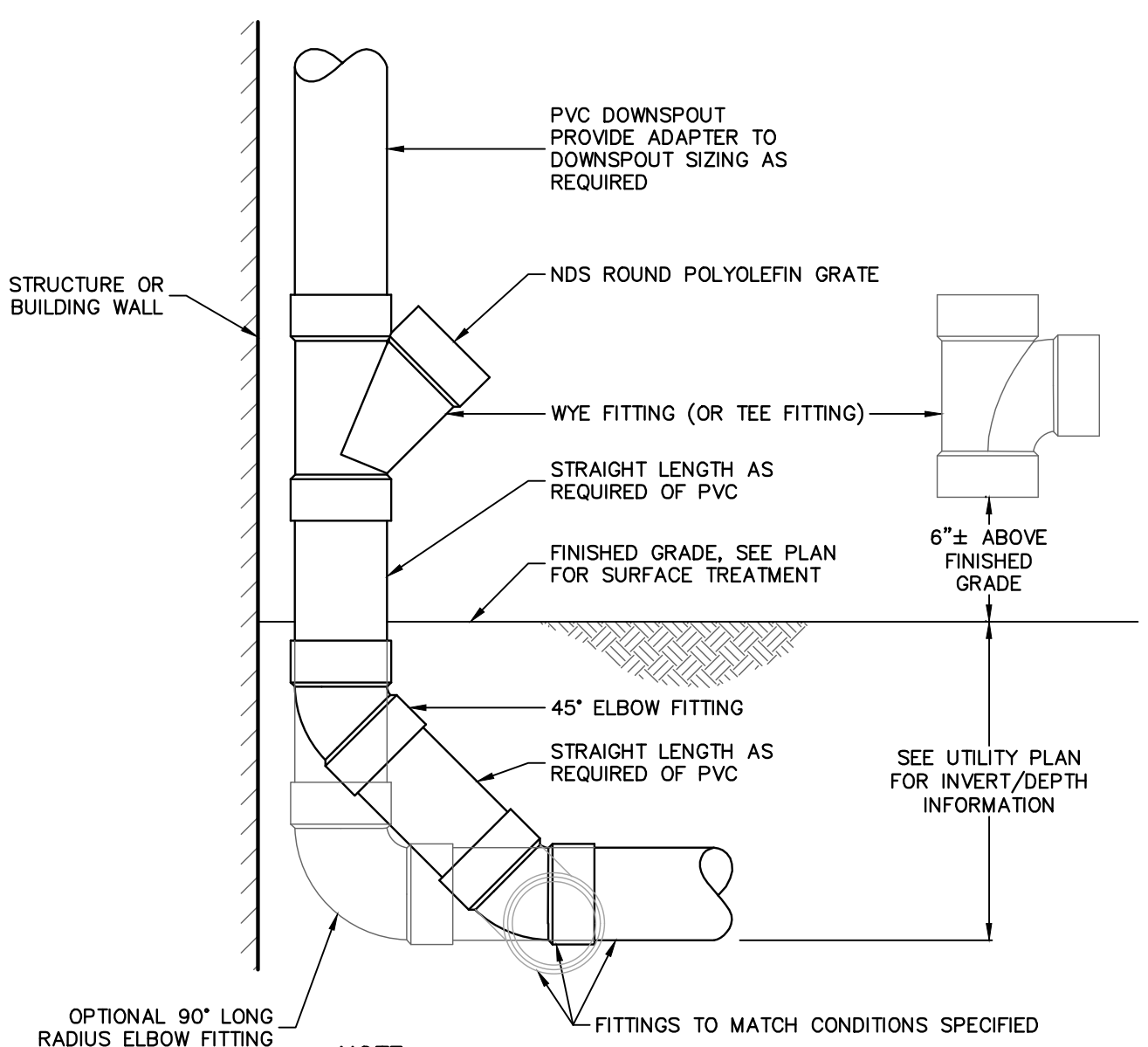
CURB DETAIL
N.T.S.



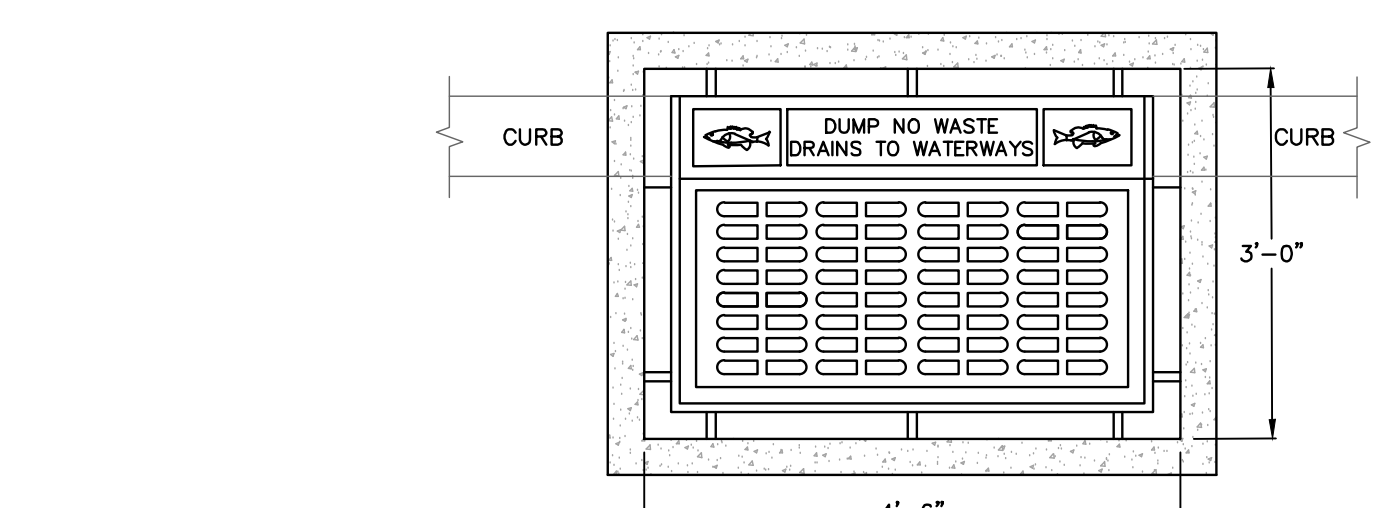
DRIVEWAY PAVEMENT SECTION
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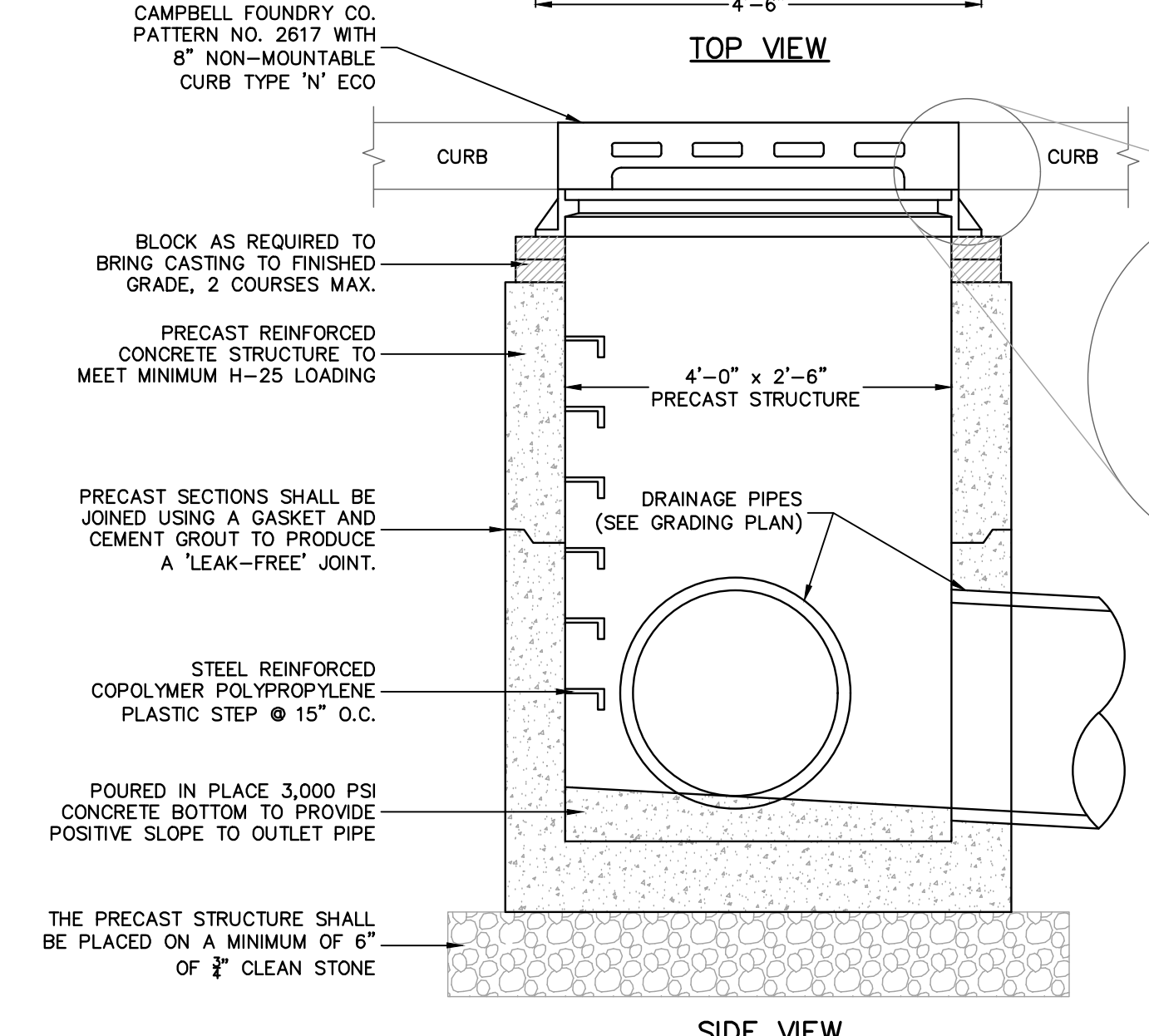
PLAN BUILDING CONNECTION DETAILS
N.T.S.



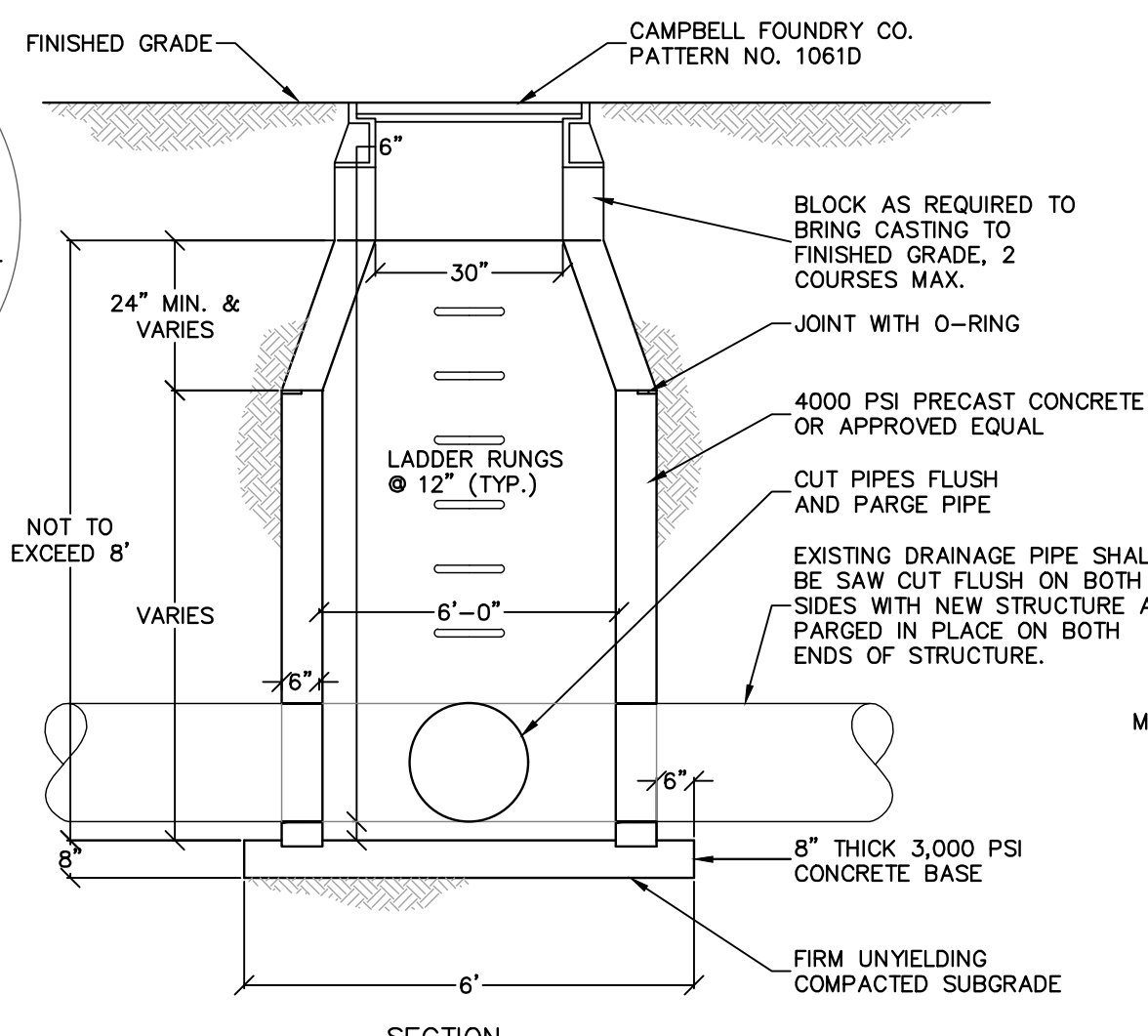
ROOF LEADER CLEANOUT DETAIL
N.T.S.



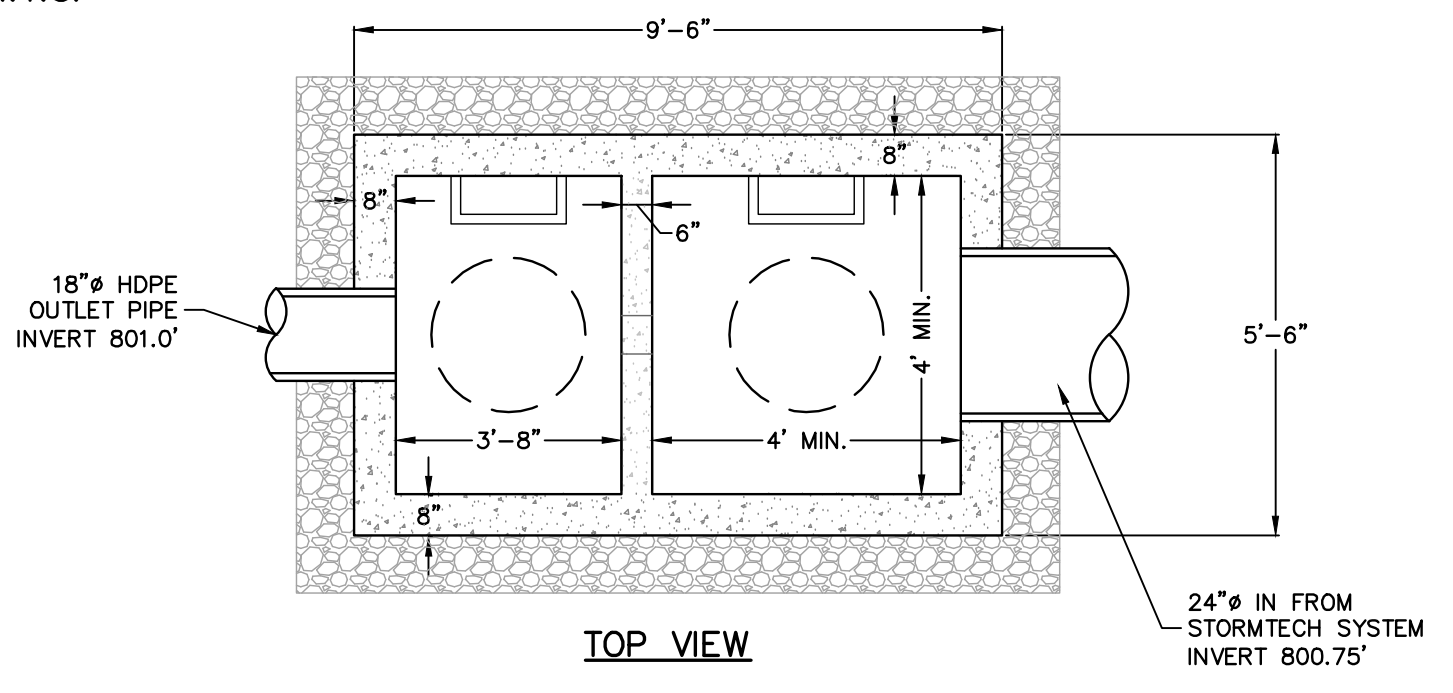
CATCH BASIN CURB INLET DETAIL
N.T.S.



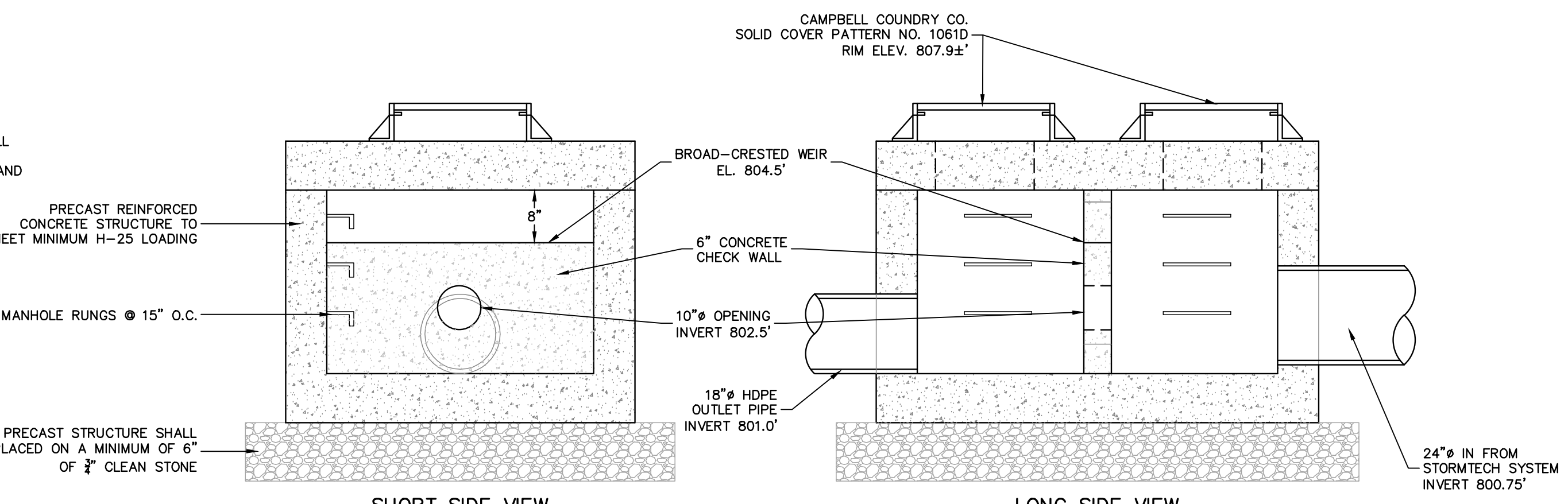
- NOTES:**
1. STRUCTURE TO BE CONSTRUCTED OF REINFORCED PRECAST CONCRETE.
 2. ALL JOINTS TO BE WATER-TIGHT.
 3. SUBGRADE BENEATH STRUCTURE SHALL BE LEVELED AND COMPACTED AS NECESSARY PRIOR TO INSTALLING STRUCTURE.



DOGHOUSE STORM MANHOLE DETAIL
N.T.S.

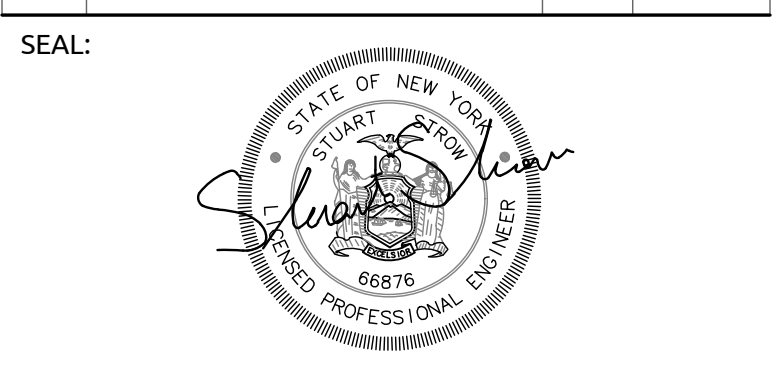


UNDERGROUND OUTLET STRUCTURE DETAIL
N.T.S.

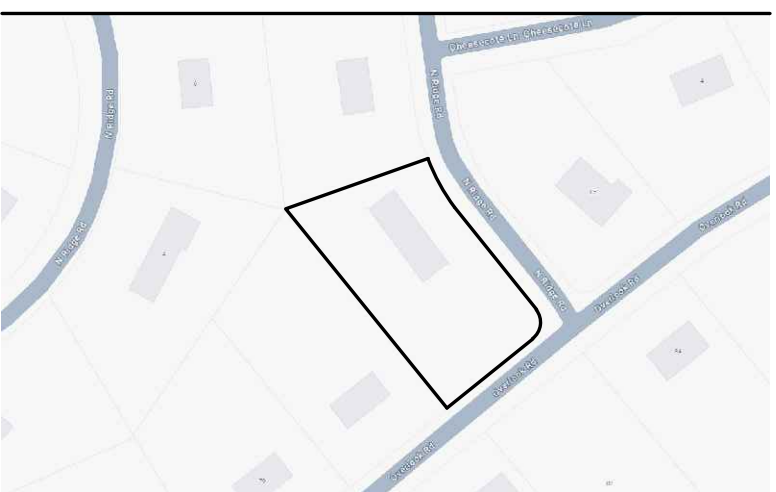


UNDERGROUND OUTLET STRUCTURE DETAIL
N.T.S.

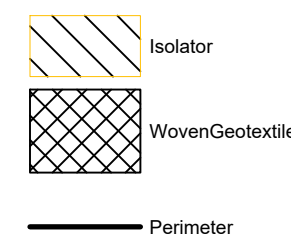
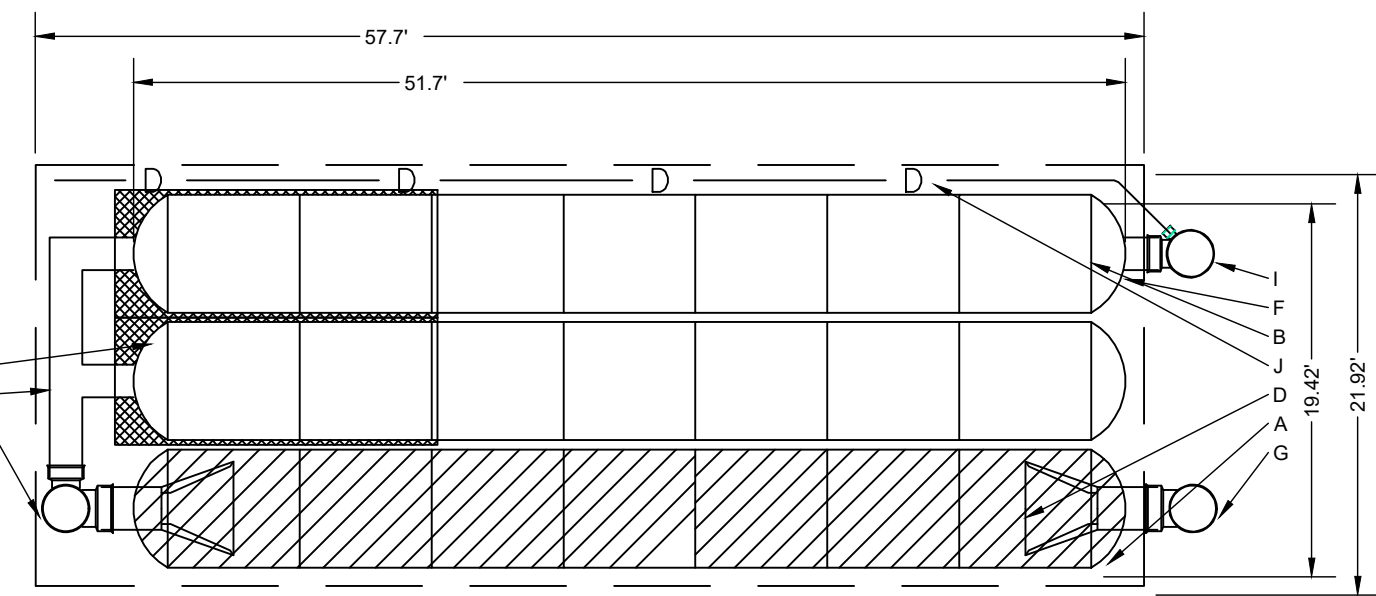
REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-B5MT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24



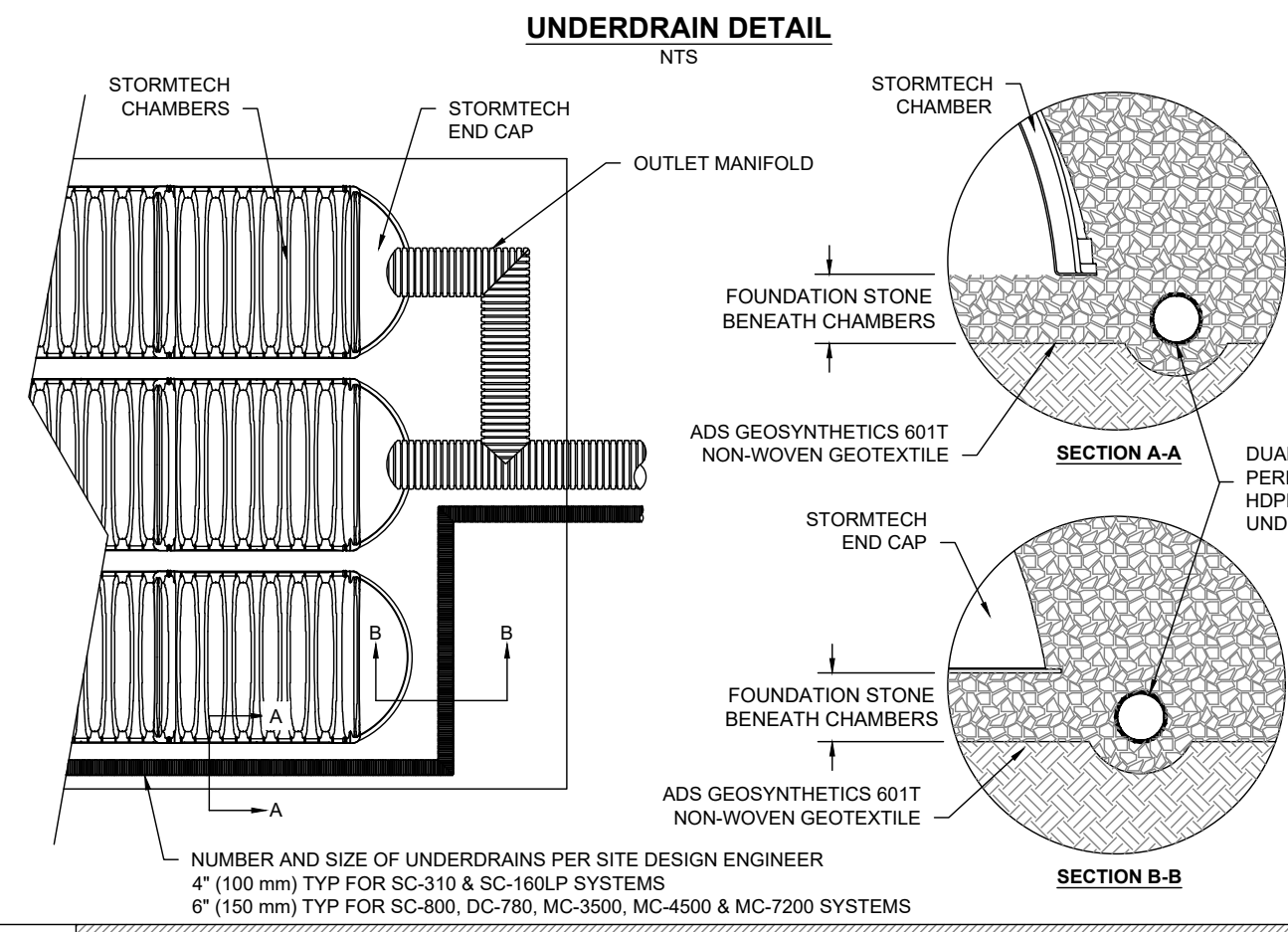
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PROPOSED LAYOUT	CONCEPTUAL ELEVATIONS	PART TYPE	ITEM ON LAYOUT	DESCRIPTION	INVERT	MAX FLOW
21 STORMTECH MC-3500 CHAMBERS	MAXIMUM ALLOWABLE GRADE (TOP OF UNPAVED)	12.55				
6 STORMTECH MC-3500 END CAPS	MINIMUM ALLOWABLE GRADE (UNPAVED WITH TRAFFIC)	6.50				
12 STONE ABOVE (A)	MINIMUM ALLOWABLE GRADE (UNPAVED NO TRAFFIC)	6.00				
9 STONE BELOW (B)	MINIMUM ALLOWABLE GRADE (TOP OF RIGID CONCRETE PAVEMENT)	6.00				
40 STONE VOID	MINIMUM ALLOWABLE GRADE (BASE OF FLEXIBLE PAVEMENT)	6.00				
4595 INSTALLED SYSTEM VOLUME (CF)	TOP OF STONE	5.50				
(PERIMETER STONE INCLUDED)	TOP OF MC-3500 CHAMBER	4.20				
1265 COVER STONE INCLUDED	18" X 18" TOP MANIFOLD INVERT	2.22				
159.2 SYSTEM AREA (SF)	24" ISOLATOR ROW PLUS INVERT	0.90				
	18" BOTTOM CONNECTION INVERT	0.75				
	BOTTOM OF MC-3500 CHAMBER	0.00				
	UNDERDRAIN INVERT	0.00				
	BOTTOM OF STONE	0.00				
					11.0 CFS IN	
					4.0 CFS OUT	

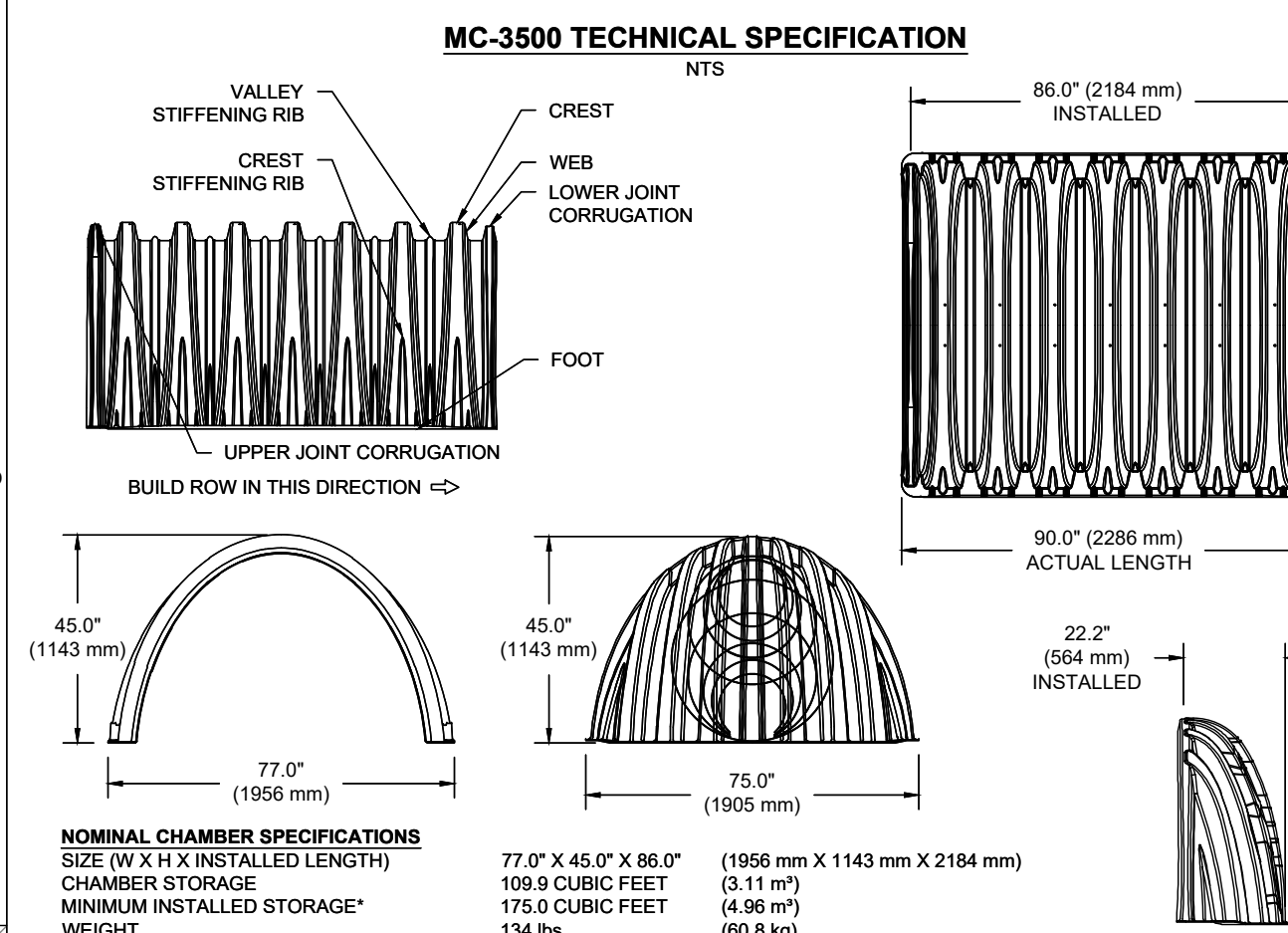


NOTES:
1. THE SITE DESIGN ENGINEER MUST REVIEW ELEVATIONS AND IF NECESSARY ADJUST GRADINGS TO ENSURE THE CHAMBER COVER REQUIREMENTS ARE MET.
2. NOT FOR CONSTRUCTION: THIS LAYOUT IS FOR CONCEPT & THE REQUIRED STORAGE VOLUME CAN BE ACHIEVED ON SITE.



NUMBER AND SIZE OF UNDERDRAINS PER SITE DESIGN ENGINEER
4" (100 mm) TYP FOR SC-310 & SC-160LP SYSTEMS
6" (150 mm) TYP FOR SC-800, DC-780, MC-3500, MC-4500 & MC-7200 SYSTEMS

DESCRIPTION



NOMINAL CHAMBER SPECIFICATIONS
SIZE (W X H X INSTALLED LENGTH)
CHAMBER STORAGE
MINIMUM INSTALLED STORAGE*
WEIGHT

77"0" X 45"0" X 86"0"	(1956 mm X 1143 mm X 2184 mm)
109.9 CUBIC FEET	(3.11 m ³)
175.0 CUBIC FEET	(4.96 m ³)
134 lbs.	(60.8 kg)

NOMINAL END CAP SPECIFICATIONS
SIZE (W X H X INSTALLED LENGTH)
END CAP STORAGE
MINIMUM INSTALLED STORAGE*
WEIGHT

75"0" X 45"0" X 22"2"	(1905 mm X 1143 mm X 564 mm)
14.9 CUBIC FEET	(0.42 m ³)
45.1 CUBIC FEET	(1.28 m ³)
49 lbs.	(22.2 kg)

*ASSUMES 12" (305 mm) STONE ABOVE, 9" (229 mm) STONE FOUNDATION, 6" SPACING BETWEEN CHAMBERS, 8" (152 mm) STONE PERIMETER IN FRONT OF END CAPS AND 40% STONE POROSITY

STUBS AT BOTTOM OF END CAP FOR PART NUMBERS ENDING WITH "B" STUBS AT TOP OF END CAP FOR PART NUMBERS ENDING WITH "T" END CAPS WITH A WELDED CROWN PLATE END WITH "C" END CAPS WITH A PREFABRICATED WELDED STUB END WITH "W"

PART #	STUB	B	C
MC3500EPP06T	6" (150 mm)	33.21" (844 mm)	0.66" (17 mm)
MC3500EPP06B	---	31.16" (791 mm)	---
MC3500EPP08T	8" (200 mm)	---	0.81" (21 mm)
MC3500EPP08B	---	29.04" (738 mm)	---
MC3500EPP10T	10" (250 mm)	---	0.93" (24 mm)
MC3500EPP10B	---	26.36" (670 mm)	---
MC3500EPP12T	12" (300 mm)	---	1.35" (34 mm)
MC3500EPP12B	---	23.39" (594 mm)	---
MC3500EPP15T	15" (375 mm)	---	1.50" (38 mm)
MC3500EPP15B	---	20.03" (509 mm)	---
MC3500EPP18T	18" (450 mm)	---	1.77" (45 mm)
MC3500EPP18TW	---	---	---
MC3500EPP18TB	---	14.48" (368 mm)	---
MC3500EPP18TBW	---	---	---
MC3500EPP24T	24" (600 mm)	---	2.06" (52 mm)
MC3500EPP24B	---	---	2.75" (70 mm)
MC3500EPP24BW	---	---	---
MC3500EPP28B	30" (750 mm)	---	---

NOTE: ALL DIMENSIONS ARE NOMINAL

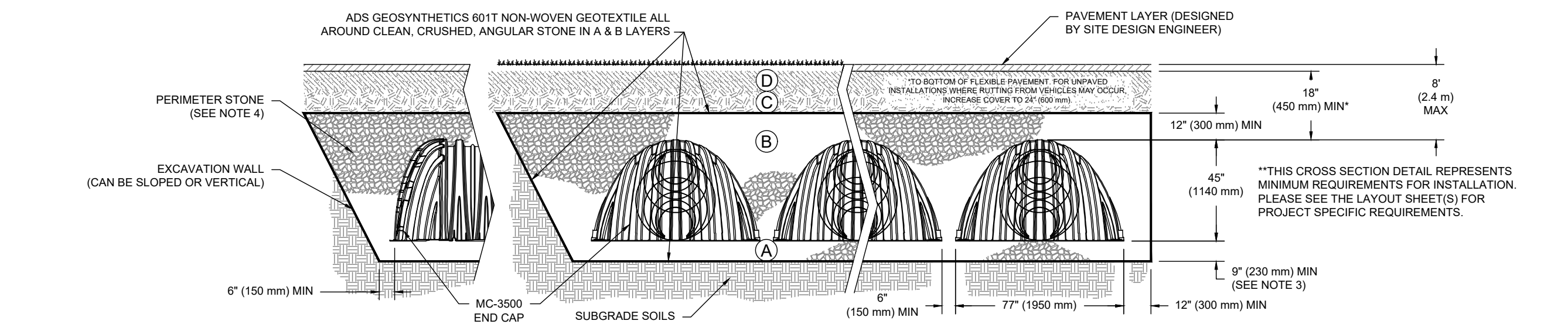
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DESCRIPTION

ACCEPTABLE FILL MATERIALS: STORMTECH MC-3500 CHAMBER SYSTEMS

MATERIAL LOCATION	DESCRIPTION	AASHTO MATERIAL CLASSIFICATIONS	COMPACTION / DENSITY REQUIREMENT	
D	FINAL FILL: FILL MATERIAL FOR LAYER 'D' STARTS FROM THE TOP OF THE 'C' LAYER TO THE BOTTOM OF FLEXIBLE PAVEMENT OR UNPAVED FINISHED GRADE ABOVE. NOTE THAT PAVEMENT SUBBASE MAY BE PART OF THE 'D' LAYER.	ANY SOIL/ROCK MATERIALS, NATIVE SOILS, OR PER ENGINEER'S PLANS. CHECK PLANS FOR PAVEMENT SUBGRADE REQUIREMENTS.	N/A	
C	INITIAL FILL: FILL MATERIAL FOR LAYER 'C' STARTS FROM THE TOP OF THE EMBEDMENT STONE ('B' LAYER) TO 24" (600 mm) ABOVE THE TOP OF THE CHAMBER. NOTE THAT PAVEMENT SUBBASE MAY BE A PART OF THE 'C' LAYER.	GRANULAR WELL-GRADED SOIL/AGGREGATE MIXTURES, <35% FINES OR PROCESSED AGGREGATE. MOST PAVEMENT SUBBASE MATERIALS CAN BE USED IN LIEU OF THIS LAYER.	AASHTO M145 ¹ A-1, A-2, A-3 OR AASHTO M43 ² 3, 357, 4, 467, 5, 56, 57, 6, 67, 68, 7, 78, 8, 89, 9, 10	BEGIN COMPACTIONS AFTER 24" (600 mm) OF MATERIAL OVER THE CHAMBERS IS REACHED. COMPACT ADDITIONAL LAYERS IN 12" (300 mm) MAX LIFTS TO A MIN. 95% PROCTOR DENSITY FOR WELL GRADED MATERIAL AND 95% RELATIVE DENSITY FOR PROCESSED AGGREGATE MATERIALS.
B	EMBEDMENT STONE: FILL SURROUNDING THE CHAMBERS FROM THE FOUNDATION STONE ('A' LAYER) TO THE 'C' LAYER ABOVE.	CLEAN, CRUSHED, ANGULAR STONE OR RECYCLED CONCRETE ³	AASHTO M43 ² 3, 357, 4, 467, 5, 56, 57	NO COMPACTION REQUIRED.
A	FOUNDATION STONE: FILL BELOW CHAMBERS FROM THE SUBGRADE UP TO THE FOOT (BOTTOM) OF THE CHAMBER	CLEAN, CRUSHED, ANGULAR STONE OR RECYCLED CONCRETE ³	AASHTO M43 ² 3, 357, 4, 467, 5, 56, 57	PLATE COMPACT OR ROLL TO ACHIEVE A FLAT SURFACE. ^{2,3}

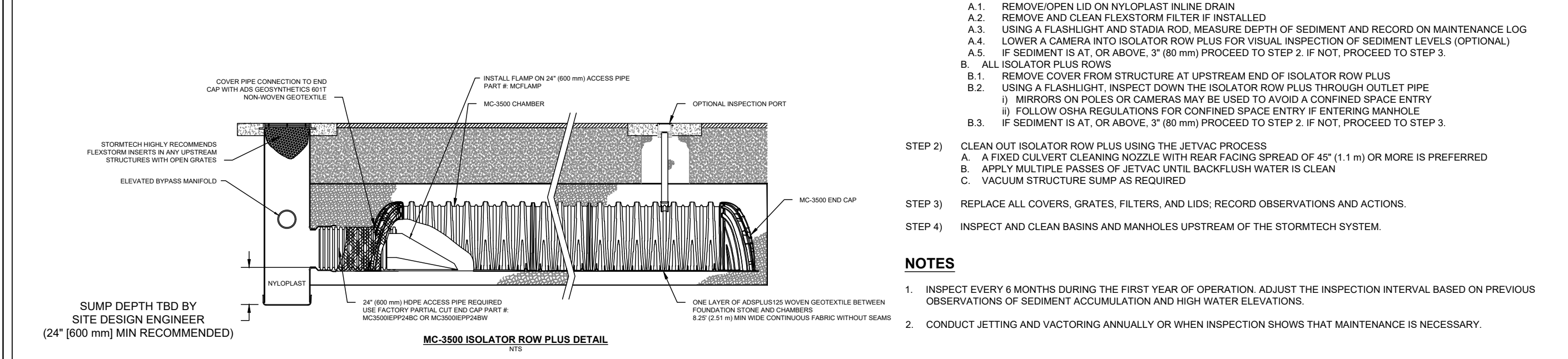
PLEASE NOTE:
1. THE LISTED AASHTO DESIGNATIONS ARE FOR GRADATIONS ONLY. THE STONE MUST ALSO BE CLEAN, CRUSHED, ANGULAR. FOR EXAMPLE, A SPECIFICATION FOR #4 STONE WOULD STATE: "CLEAN, CRUSHED, ANGULAR NO. 4 (AASHTO M43) STONE".
2. STORMTECH COMPACTION REQUIREMENTS ARE MET FOR 'A' LOCATION MATERIALS WHEN PLACED AND COMPACTED IN 9" (230 mm) (MAX) LIFTS USING TWO FULL COVERAGES WITH A VIBRATORY COMPACTOR.
3. WHERE INFILTRATION SURFACES MAY BE COMPROMISED BY COMPACTION, FOR STANDARD DESIGN LOAD CONDITIONS, A FLAT SURFACE MAY BE ACHIEVED BY RAKING OR DRAGGING WITHOUT COMPACTION EQUIPMENT. FOR SPECIAL LOAD DESIGNS, CONTACT STORMTECH FOR COMPACTION REQUIREMENTS.
4. ONCE LAYER 'C' IS PLACED, ANY SOIL/MATERIAL CAN BE PLACED IN LAYER 'D' UP TO THE FINISHED GRADE. MOST PAVEMENT SUBBASE SOILS CAN BE USED TO REPLACE THE MATERIAL REQUIREMENTS OF LAYER 'C' OR 'D' AT THE SITE DESIGN ENGINEER'S DISCRETION.
5. WHERE RECYCLED CONCRETE AGGREGATE IS USED IN LAYERS 'A' OR 'B' THE MATERIAL SHOULD ALSO MEET THE ACCEPTABILITY CRITERIA OUTLINED IN TECHNICAL NOTE 6.20 "RECYCLED CONCRETE STRUCTURAL BACKFILL".



NOTES:
1. CHAMBERS SHALL MEET THE REQUIREMENTS OF ASTM F2418, "STANDARD SPECIFICATION FOR POLYPROPYLENE (PP) CORRUGATED WALL STORMWATER COLLECTION CHAMBERS" CHAMBER CLASSIFICATION 45x76 DESIGNATION SS.
2. MC-3500 CHAMBERS SHALL BE DESIGNED IN ACCORDANCE WITH ASTM F2787 "STANDARD PRACTICE FOR STRUCTURAL DESIGN OF THERMOPLASTIC CORRUGATED WALL STORMWATER COLLECTION CHAMBERS".
3. THE SITE DESIGN ENGINEER IS RESPONSIBLE FOR ASSESSING THE BEARING RESISTANCE (ALLOWABLE BEARING CAPACITY) OF THE SUBGRADE SOILS AND THE DEPTH OF FOUNDATION STONE WITH CONSIDERATION FOR THE RANGE OF EXPECTED SOIL MOISTURE CONDITIONS. REFERENCE STORMTECH DESIGN MANUAL FOR BEARING CAPACITY GUIDANCE.
4. PERIMETER STONE MUST BE EXTENDED HORIZONTALLY TO THE EXCAVATION WALL FOR BOTH VERTICAL AND SLOPED EXCAVATION WALLS.
5. REQUIREMENTS FOR HANDLING AND INSTALLATION:
• TO MAINTAIN THE WIDTH OF CHAMBERS DURING SHIPPING AND HANDLING, CHAMBERS SHALL HAVE INTEGRAL, INTERLOCKING STACKING LUGS.
• TO ENSURE A SECURE JOINT DURING INSTALLATION AND BACKFILL, THE HEIGHT OF THE CHAMBER JOINT SHALL NOT BE LESS THAN 3".
• TO ENSURE THE INTEGRITY OF THE ARCH SHAPE DURING INSTALLATION, a) THE ARCH STIFFNESS CONSTANT SHALL BE GREATER THAN OR EQUAL TO 500 LBS/FT². THE ASC IS DEFINED IN SECTION 6.2.8 OF ASTM F2418. AND b) TO RESIST CHAMBER DEFORMATION DURING INSTALLATION AT ELEVATED TEMPERATURES (ABOVE 73° F / 23° C), CHAMBERS SHALL BE PRODUCED FROM REFLECTIVE GOLD OR YELLOW COLORS.

DESCRIPTION

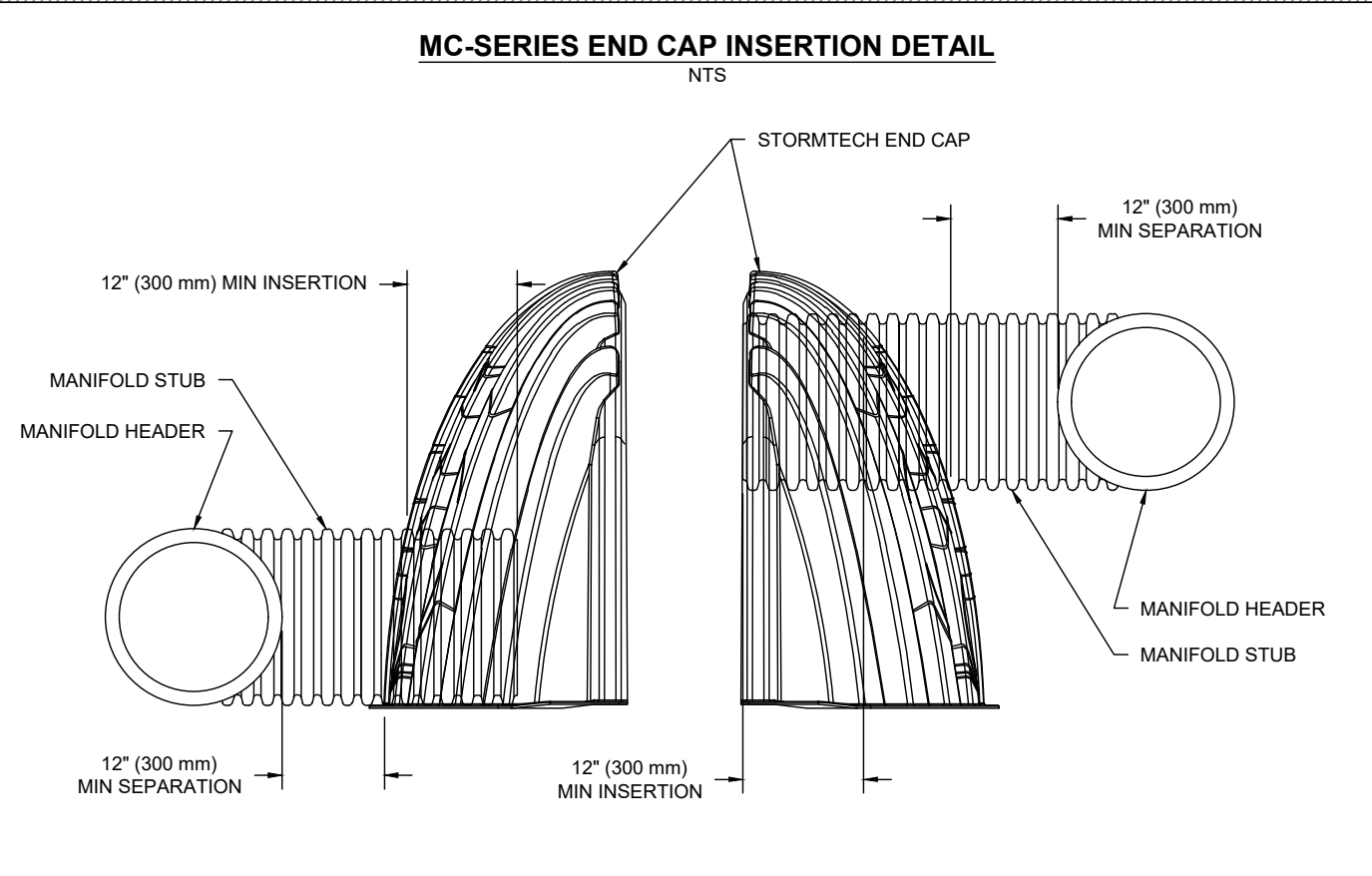
INSPECTION & MAINTENANCE



STEP 1) INSPECT ISOLATOR ROW PLUS FOR SEDIMENT
A. INSPECTION PORTS (IF PRESENT)
A.1. REMOVE/OPEN LID ON NYLOPLAST INLINE DRAIN
A.2. REMOVE AND CLEAN FLEXIFORM FILTER IF INSTALLED
A.3. USING A FLASHLIGHT AND STADIA ROD, MEASURE DEPTH OF SEDIMENT AND RECORD ON MAINTENANCE LOG
A.4. LOWER A CAMERA INTO ISOLATOR ROW PLUS FOR VISUAL INSPECTION OF SEDIMENT LEVELS (OPTIONAL)
A.5. IF SEDIMENT IS AT, OR ABOVE, 3" (80 mm) PROCEED TO STEP 2. IF NOT, PROCEED TO STEP 3.
B. ALL ISOLATOR ROW PLUS ROWS
B.1. REMOVE COVER FROM STRUCTURE AT UPSTREAM END OF ISOLATOR ROW PLUS
B.2. USING A FLASHLIGHT, INSPECT DOWN THE ISOLATOR ROW PLUS THROUGH OUTLET PIPE
i) MIRRORS ON POLES OR CAMERAS MAY BE USED TO AVOID A CONFINED SPACE ENTRY
ii) FOLLOW OSHA REGULATIONS FOR CONFINED SPACE ENTRY IF ENTERING MANHOLE
IF SEDIMENT IS AT, OR ABOVE, 3" (80 mm) PROCEED TO STEP 2. IF NOT, PROCEED TO STEP 3.
B.3. REPLACE ALL COVERS, GRATES, FILTERS, AND LIDS; RECORD OBSERVATIONS AND ACTIONS.
STEP 2) CLEAN OUT ISOLATOR ROW PLUS USING THE JETVAC PROCESS
A. A FIXED CULVERT CLEANING NOZZLE WITH REAR FACING SPREAD OF 42" (1.1 m) OR MORE IS PREFERRED
B. APPLY MULTIPLE PASSES OF JETVAC UNTIL BACKFLUSH WATER IS CLEAN
C. VACUUM STRUCTURE SUMP AS REQUIRED
STEP 3) REPLACE ALL COVERS, GRATES, FILTERS, AND LIDS; RECORD OBSERVATIONS AND ACTIONS.
STEP 4) INSPECT AND CLEAN BASINS AND MANHOLES UPSTREAM OF THE STORMTECH SYSTEM

NOTES:
1. INSPECT EVERY 6 MONTHS DURING THE FIRST YEAR OF OPERATION. ADJUST THE INSPECTION INTERVAL BASED ON PREVIOUS OBSERVATIONS OF SEDIMENT ACCUMULATION AND HIGH WATER ELEVATIONS.
2. CONDUCT JETTING AND VACUUMING ANNUALLY OR WHEN INSPECTION SHOWS THAT MAINTENANCE IS NECESSARY.

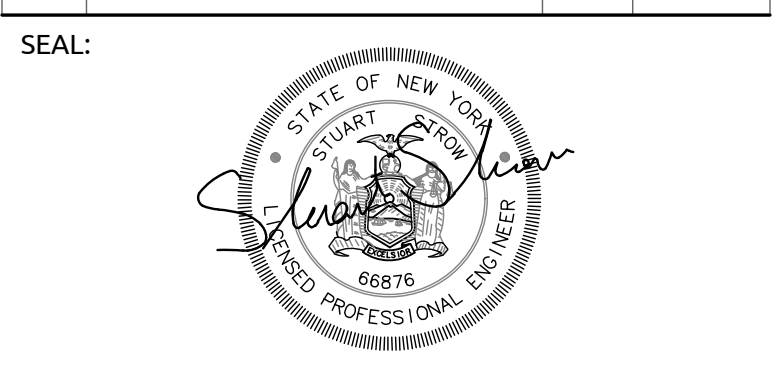
DESCRIPTION



NOTE: MANIFOLD STUB MUST BE LAID HORIZONTAL FOR A PROPER FIT IN END CAP OPENING.

DESCRIPTION

REV	DESCRIPTION	BY	DATE
5	FOR SITE PLAN APPROVAL	MS	5.7.26
4	ADDED WEST D'WAY; REMOVE SUB-B5MT	SS	4.1.26
3	FLOOR AREA REVISION	SS	12.30.25
2	ADDED LANDSCAPING PLAN	SS	12.01.25
1	AS PER TAC REVIEW COMMENTS	SS	10.13.25
	ORIGINAL SUBMITTAL	SS	8.14.24



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PROJECT:
CHABAD OF THE HEIGHTS
34 NORTH RIDGE ROAD

SCALE: N.T.S.

SHEET TITLE:
CONSTRUCTION
DETAILS
(2 OF 2)

DRAWN BY: AG/MS CHECKED BY: SS
DATE: 5.7.26 PROJECT NO: 2414

SHEET NUMBER:



CHABAD
OF THE
HEIGHTS



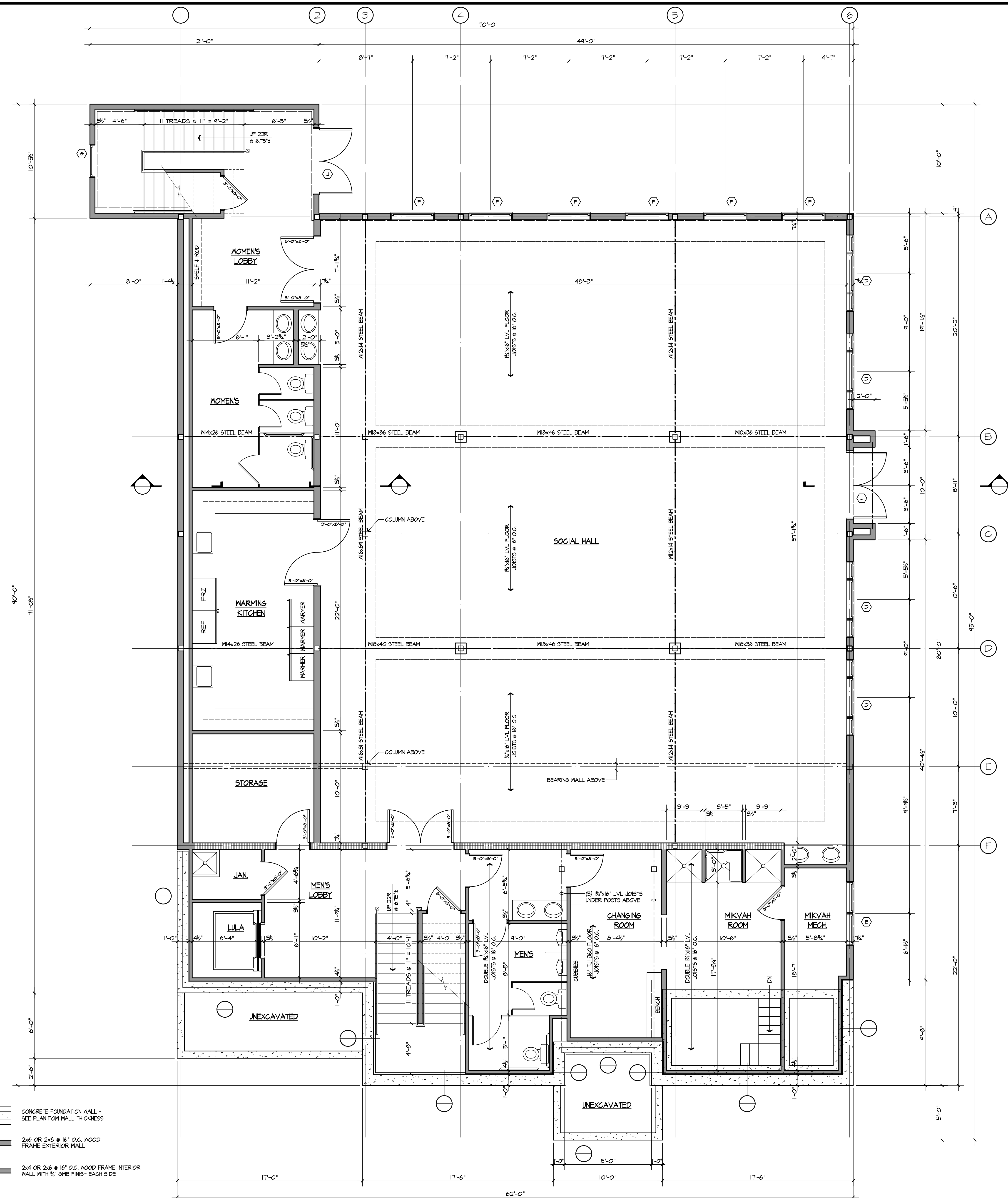


CHURCH
OF THE
HEIGHTS



CHABAD OF THE HEIGHTS
34 NORTH RIDGE ROAD, POMONA, NEW YORK

BASEMENT FLOOR PLAN



MALL TYPE LEGEND:

- CONCRETE FOUNDATION MALL - SEE PLAN FOR MALL THICKNESS
- 2x6 OR 2x8 @ 16" O.C. WOOD FRAME EXTERIOR WALL
- 2x4 OR 2x6 @ 16" O.C. WOOD FRAME INTERIOR WALL WITH N° GNB FINISH EACH SIDE
- 2x4 OR 2x6 @ 16" O.C. WOOD FRAME BEARING WALL WITH N° GNB FINISH EACH SIDE

NOTES: SEE PLAN FOR STUD SIZES.

DESIGN LOADS:

LEVEL	LIVE LOAD	DEAD LOAD
FIRST FLOOR	120 PSF	20 PSF
EQUIPMENT PLATFORM	100 PSF	15 PSF
ROOF	80 PSF	20 PSF

1 BASEMENT PLAN
SCALE: 1/4"=1'-0"
FLOOR AREA = 4382 SQUARE FEET

REVISIONS

NO.	DATE	DESCRIPTION

PROJECT NUMBER	2505-00
DATE	05/06/26
SCALE	AS NOTED
DRAWN BY	TR
CHECKED BY	

ROSENBLUM ARCHITECTURE
221 QUAKER ROAD
POMONA, NEW YORK 10970
(845) 364-0337
info@rsabarch.com

SHEET NUMBER
A1



CHABAD OF THE HEIGHTS
34 NORTH RIDGE ROAD, POMONA, NEW YORK

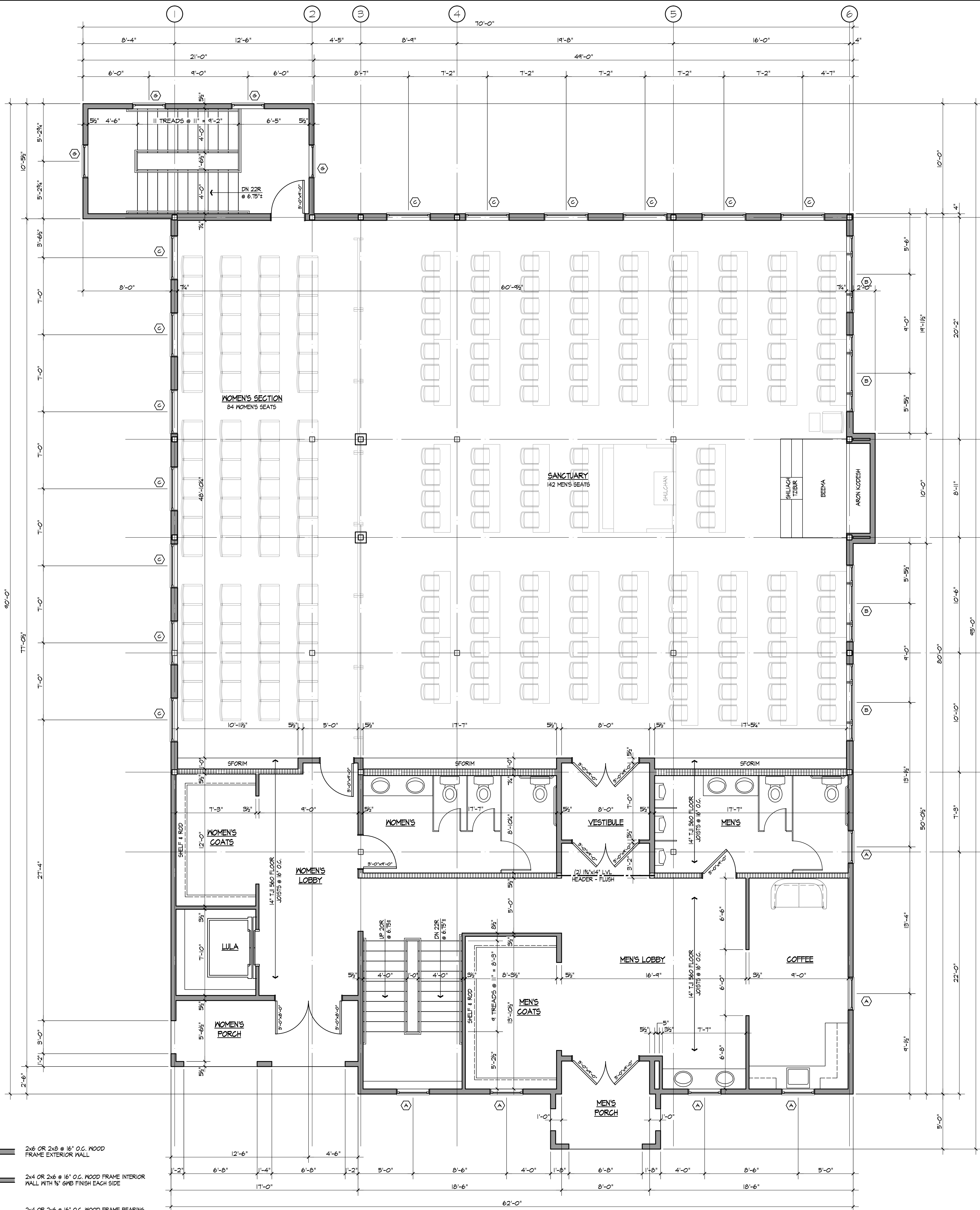
FIRST FLOOR PLAN

PROJECT NUMBER	2505-00
DATE	05/06/06
SCALE	AS NOTED
DESIGNER	TR

NO.	DATE	DESCRIPTION

ROSENBLUM ARCHITECTURE
221 QUAKER ROAD
POMONA, NEW YORK 10970
(845) 364-0337
info@rsapart.com

A2



DESIGN LOADS:

LEVEL	LIVE LOAD	DEAD LOAD
FIRST FLOOR	20 PSF	20 PSF
EQUIPMENT PLATFORM	100 PSF	15 PSF
ROOF	30 PSF	20 PSF

WALL TYPE LEGEND:

- 2x6 OR 2x8 @ 16" O.C. WOOD FRAME EXTERIOR WALL
- 2x4 OR 2x6 @ 16" O.C. WOOD FRAME INTERIOR WALL WITH 1/2" GYPSUM EACH SIDE
- 2x4 OR 2x6 @ 16" O.C. WOOD FRAME BEARING WALL WITH 1/2" GYPSUM EACH SIDE

NOTES: SEE PLAN FOR STUD SIZES.

1 FIRST FLOOR PLAN
SCALE: 1/4"=1'-0"

FLOOR AREA = 4,456 SQUARE FEET



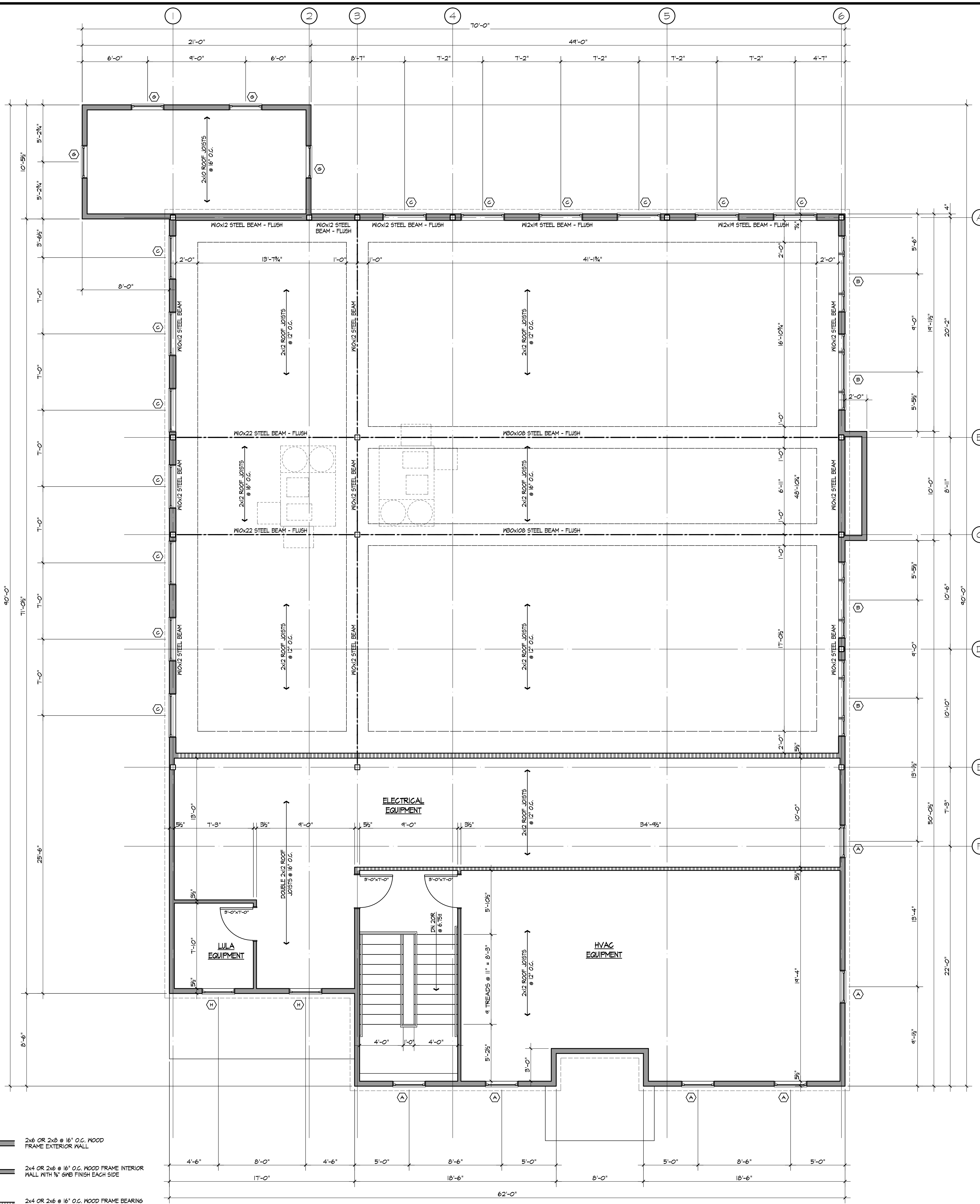
CHABAD OF THE HEIGHTS
 34 NORTH RIDGE ROAD, POMONA, NEW YORK
 EQUIPMENT PLATFORM & ROOF PLAN

PROJECT NUMBER	2505-00
DATE	05/06/26
SCALE	AS NOTED
DRAWN BY	TR
CHECKED BY	

NO.	DATE	DESCRIPTION

ROSENBLUM ARCHITECTURE
 221 QUAKER ROAD
 POMONA, NEW YORK 10770
 (845) 364-0337
 info@rsabarch.com

SHEET NUMBER
A3



DESIGN LOADS:

LEVEL	LIVE LOAD	DEAD LOAD
FIRST FLOOR	20 PSF	20 PSF
EQUIPMENT PLATFORM	100 PSF	15 PSF
ROOF	30 PSF	20 PSF

WALL TYPE LEGEND:

	2x6 OR 2x8 @ 16" O.C. WOOD FRAME EXTERIOR WALL
	2x4 OR 2x6 @ 16" O.C. WOOD FRAME INTERIOR WALL WITH 1/2" GYPSUM FINISH EACH SIDE
	2x4 OR 2x6 @ 16" O.C. WOOD FRAME BEARING WALL WITH 1/2" GYPSUM FINISH EACH SIDE

NOTES: SEE PLAN FOR STUD SIZES.

1 EQUIPMENT PLATFORM & ROOF FRAMING PLAN
 SCALE: 1/4"=1'-0"



CHABAD OF THE HEIGHTS
 34 NORTH RIDGE ROAD, POMONA, NEW YORK
 NORTH & SOUTH ELEVATIONS

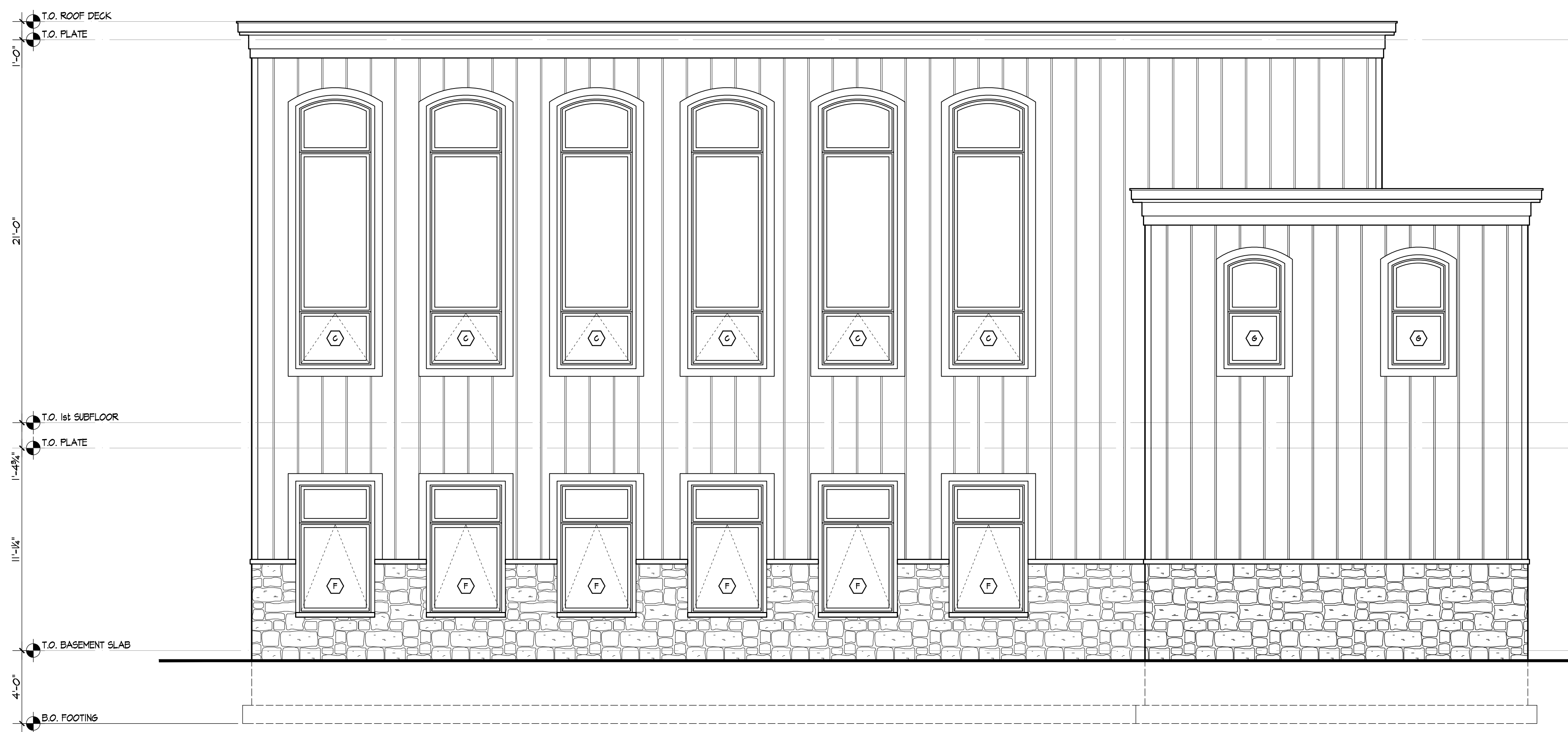
PROJECT	PROJECT NUMBER	DATE	SCALE	AS NOTED	DATE	BY
	2505-00	05/06/26	AS NOTED			

NO.	DATE	DESCRIPTION

ROSENBLUM ARCHITECTURE
 221 QUAKER ROAD
 POMONA, NEW YORK 10970
 (845) 364-0337
 info@rosenblumarch.com

SHEET NUMBER

A4



2 NORTH ELEVATION
 SCALE: 1/4"=1'-0"

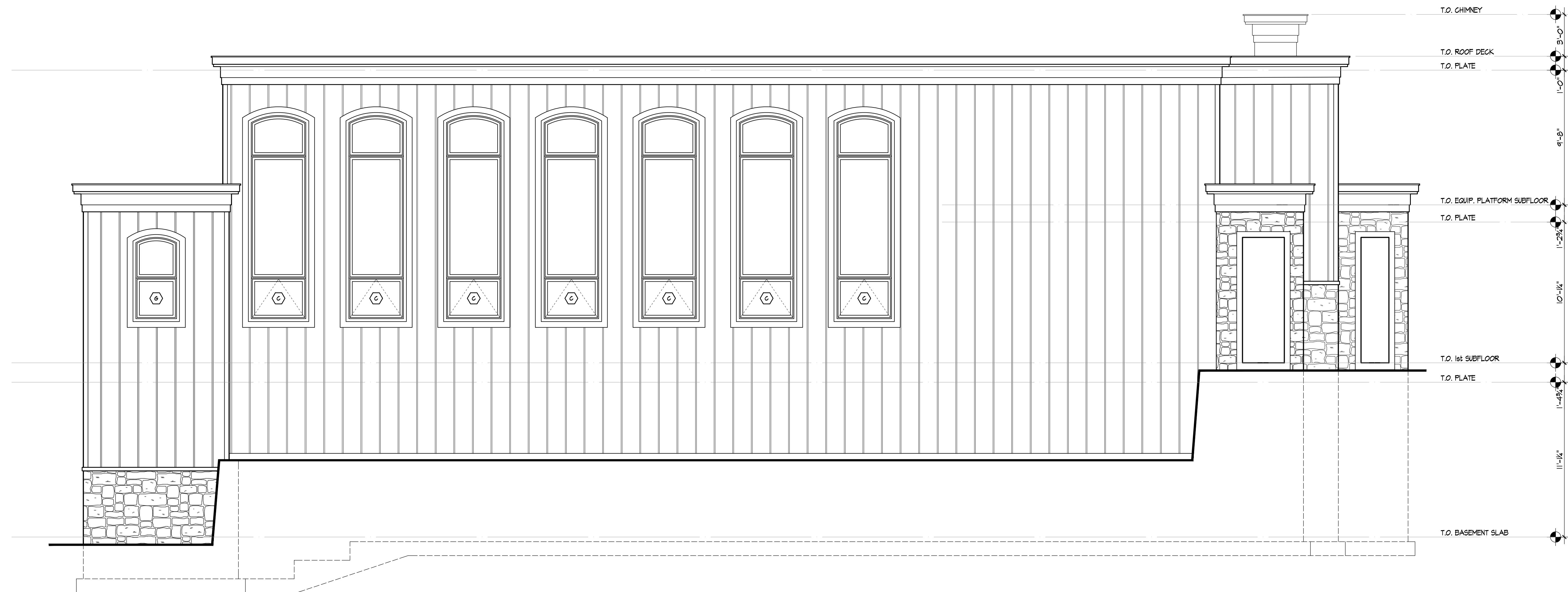


1 OVERLOOK ROAD (SOUTH) ELEVATION
 SCALE: 1/4"=1'-0"



CHABAD OF THE HEIGHTS
 34 NORTH RIDGE ROAD, POMONA, NEW YORK

EAST & WEST ELEVATIONS



2 WEST ELEVATION
 SCALE: 1/4"=1'-0"



1 NORTH RIDGE ROAD (EAST) ELEVATION
 SCALE: 1/4"=1'-0"

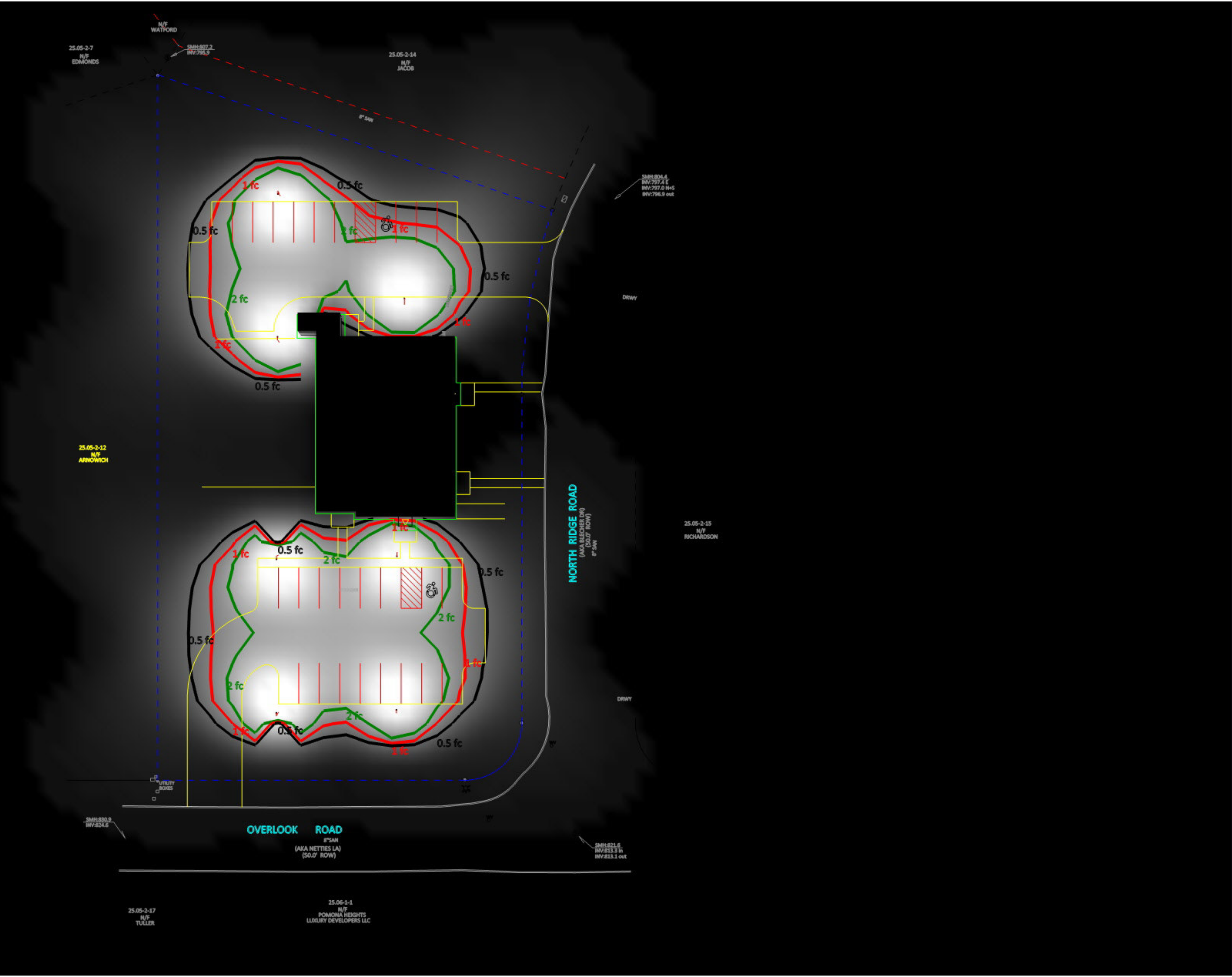
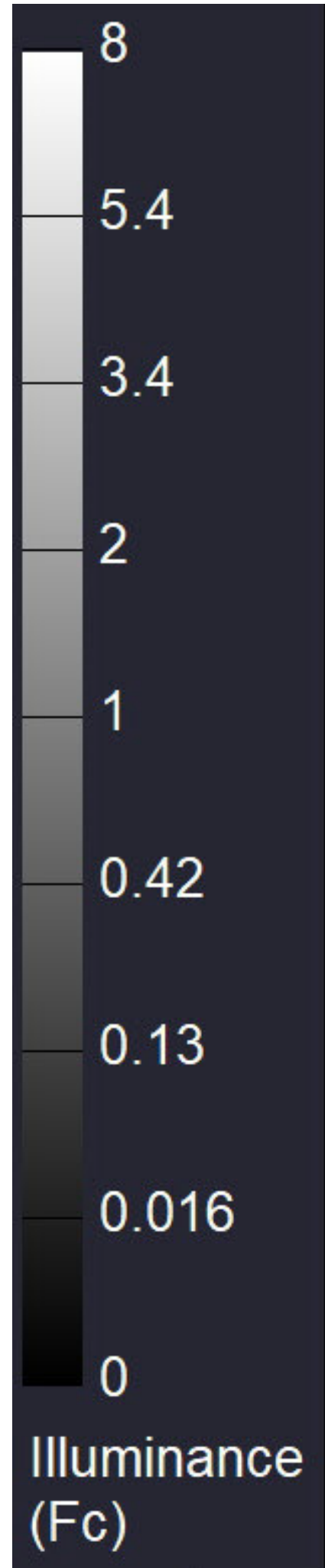
REVISIONS		NO.	DATE	DESCRIPTION

PROJECT	CHABAD OF THE HEIGHTS
PROJECT NUMBER	2505-00
DATE	05/06/26
SCALE	AS NOTED
DESIGNED BY	TR
CHECKED BY	

ROSENBLUM ARCHITECTURE
 221 QUAKER ROAD
 POMONA, NEW YORK 10970
 (845) 364-0337
 info@rosenblumarch.com

SHEET NUMBER

A5

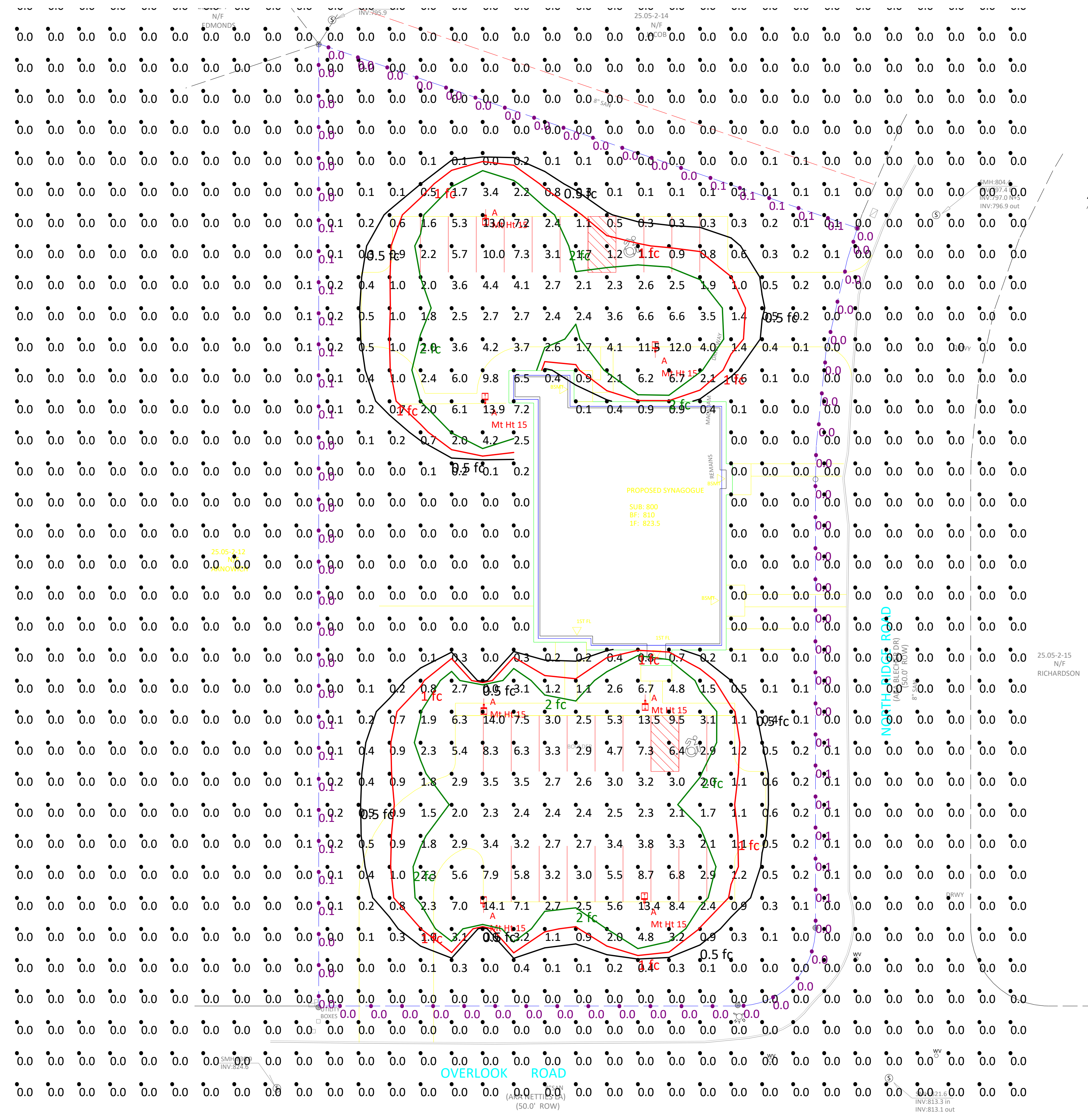


#	Date	Comments
1	11/25/2025	

Revisions

Drawn By: Patrick Carbone
 Checked By:
 Date: 1/25/2025
 Scale: As Noted

Chabad of the Heights Pomona, NY



Scale: 1 inch= 20 Ft.



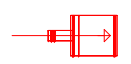
#	Date	Comments
1	11/25/2025	






Drawn By:	Checked By:	Date:
Patrick Carbone		1/25/2025




Scale: As Noted

Chabad of the Heights

Pomona, NY

Luminaire Schedule						
Type	Symbol	Qty	Part #	Lum. Lumens	Lum. Watts	Total Watts
A		7	A22 4T100 @100W with with A22 70-100HS shield	10140	100.8	705.6

Fixture Color Legend	
	Standard
	Emergency
	LightCloud Controls
	LightCloud Emergency
	Non-LightCloud Controls

Isoline Legend	
Illuminance (Fc)	
Color	Value
	0.5
	1
	2

Luminaire Tag Summary	
Tag	Qty
A	7

Calculation Summary									
Label	CalcType	Units	Avg	Max	Min	Avg/Min	Max/Min	PtSpcLr	PtSpcTb
CalcPts_1	Illuminance	Fc	0.47	14.1	0.0	N.A.	N.A.	10	10
Property Line (purple)	Illuminance	Fc	0.03	0.1	0.0	N.A.	N.A.	10	N.A.



#	Date	Comments
1	11/25/2025	

Drawn By: Patrick Carbone
Checked By:
Date: 11/25/2025
Scale: As Noted

Chabad of the Heights
Pomona, NY

Luminaire Location Summary			
Lum No	Label	Mt Ht	Tilt
1	A22 4T100 @100W with shield	15	0
2	A22 4T100 @100W with shield	15	0
3	A22 4T100 @100W with shield	15	0
4	A22 4T100 @100W with shield	15	0
5	A22 4T100 @100W with shield	15	0
6	A22 4T100 @100W with shield	15	0
7	A22 4T100 @100W with shield	15	0



Comments

Date 11/25/2025

1

Revisions

Drawn By: Patrick Carbone

Checked By:

Date: 11/25/2025

Scale: As Noted

Chabad of the Heights

Pomona, NY

LIGHTING STANDARDS

The Illuminating Engineering Society (IES) provides guidelines for parking lot lighting in the document

"IES RP-20-14: Lighting for Parking Facilities."

These standards cover light level requirements, uniformity requirements, controls, and emergency

iii) High Activity Areas (e.g., shopping centers, large entertainment venues, urban areas):

- Average illuminance: 3.0 foot-candles (32.29 lux) lighting to ensure safety, security, and energy efficiency in parking lots.

Light Level Requirements:

IES RP-20-14 recommends different light levels based on the type of parking facility and the level of activity.

Horizontal illuminance at pavement level is as follows:

a) Open Parking Facilities:

i) Low Activity Areas (e.g., small retail, employee parking, rural areas):

- Average illuminance: 1.0 foot-candles (10.76 lux)
- Minimum illuminance: 0.25 foot-candles (2.69 lux)
- Uniformity ratio (average to minimum): 4:1

ii) Medium Activity Areas (e.g., commercial, industrial, suburban areas):

- Average illuminance: 2.0 foot-candles (21.53 lux)
- Minimum illuminance: 0.5 foot-candles (5.38 lux)
- Uniformity ratio (average to minimum): 4:1
- Minimum illuminance: 0.75 foot-candles (8.07 lux)
- Uniformity ratio (average to minimum): 4:1

Lighting controls in parking lots should be designed to optimize energy efficiency, adapt to changing conditions, and provide user customization. Options include:

a) Timers: To automatically turn lights on and off based on pre-set schedules.

b) Occupancy sensors: To detect motion and adjust lighting levels accordingly.

c) Dimming controls: To adjust light levels depending on the level of activity or time of day.

d) Daylight harvesting: To reduce electric lighting output when sufficient natural light is available.

NOTES

* The light loss factor (LLF) is a product of many variables, only lamp lumen depreciation (LLD) has been applied to the calculated results unless otherwise noted. The LLD is the result (quotient) of mean lumens / initial lumens per lamp manufacturers' specifications.

* Illumination values shown (in footcandles) are the predicted results for planes of calculation either horizontal, vertical or inclined as designated in the calculation summary. Meter orientation is normal to the plane of calculation.

* The calculated results of this lighting simulation represent an anticipated prediction of system performance. Actual measured results may vary from the anticipated performance and are subject to means and methods which are beyond the control of Damin Sales.

LIGHTING DESIGN DISCLAIMER



#	Date	Comments
1	11/25/2025	

Drawn By: Patrick Carbone
Checked By:
Date: 1/25/2025
Scale: As Noted

Chabad of the Heights
Pomona, NY



Color: Bronze

Weight: 11.2 lbs

Project:

Type:

Prepared By:

Date:

Driver Info

Type	Constant
120V	0.83A/0.67A/0.50A
208V	0.48A/0.38A/0.25A
240V	0.42A/0.33A/0.25A
277V	0.72A/0.29A/0.22A
Input Watts	59.9-101W

LED Info

Watts	100/80/60W
Color Temp	3000/4000/5000K
Color Accuracy	80-84 CRI
L70 Lifespan	100,000 Hours
Lumens	8,938-14,368 lm
Efficacy	128.9-160 lm/W

Technical Specifications

Field Adjustability

Field Adjustable:

Field Adjustable Light Output:
100W/80W/60W (factory default: 100W)
Color Temperature Selectable:
3000K, 4000K and 5000K (factory default:4000K)

Compliance

UL Listed:

Suitable for wet locations. Suitable for mounting within 4 ft (1.2m) of the ground.

IESNA LM-79 & LM-80 Testing:

RAB LED luminaires and LED components have been tested by an independent laboratory in accordance with IESNA LM-79 and LM-80.

IP Rating:

Ingress protection rating of IP66 for dust and water

Trade Agreements Act Compliant:

This product is a product of Cambodia and a "designated country" end product that complies with the Trade Agreements Act

DLC Listed:

This product is listed by Design Lights Consortium (DLC) as an ultra-efficient premium product that qualifies for the highest tier of rebates from DLC Member Utilities. Designed to meet DLC 5.1 requirements.
DLC Product Code: S-N4M58S

Performance

Lifespan:

100,000-Hour LED lifespan based on IES LM-80 results and TM-21 calculations

Wattage Equivalency:

100W: Replaces up to 400W Metal Halide (MH) or 310W High Pressure Sodium (HPS)
80W: Replaces up to 350W Metal Halide (MH) or 250W High Pressure Sodium (HPS)
60W: Replaces up to 250W Metal Halide (MH) or 200W High Pressure Sodium (HPS)

Electrical

Driver:

Constant Current, Class 1, 120-277V, 50/60 Hz:
100W: 120V: 0.83A, 208V: 0.48A, 240V: 0.42A, 277V: 0.36A
80W: 120V: 0.67A, 208V: 0.38A, 240V:0.33A, 277V: 0.29A
60W: 120V: 0.5A, 208V: 0.29A, 240V:0.25A, 277V: 0.22A

Dimming Driver:

Driver includes dimming control wiring for 0-10V dimming systems. Requires separate 0-10V DC dimming circuit. Dims down to 10%.

THD:

3.25% at 120V, 5.82% at 277V

Power Factor:

99.7% at 120V, 94.5% at 277V

7-Pin Receptacle with Shorting Cap:

ANSI C136.41 7-pin receptacle, compatible with wireless control systems

Surge Protection:

6 kV

Construction

IES Classification:

The Type IV distribution (also known as a Forward Throw) is especially suited for mounting on the sides of buildings and walls, and for illuminating the perimeter of parking areas. It produces a semicircular distribution with essentially the same candlepower at lateral angles from 90° to 270°.

Cold Weather Starting:

The minimum starting temperature is -40°F (-40°C)

Maximum Ambient Temperature:

Suitable for use in up to 104°F (40°C)

Lens:

Polycarbonate lens

Technical Specifications (continued)

Housing:

Die-cast aluminum

Effective Projected Area:

1 Fixture: 0.3

2 Fixtures: 0.7

3 Fixtures: 1.2

4 Fixtures: 1.2

Finish:

Formulated for high durability and long-lasting color

Gaskets:

High-temperature silicone gaskets

Green Technology:

Mercury and UV free. RoHS-compliant components.

LED Characteristics

LEDs:

Long-life, high-efficacy, surface-mount LEDs

Color Uniformity:

RAB's range of Correlated Color Temperature follows the guidelines of the American National Standard for Specifications for the Chromaticity of Solid State Lighting (SSL) Products, ANSI C78.377-2017.

Optical

BUG Rating:

Type 4

100W: B2 U0 G2

80W: B2 U0 G2

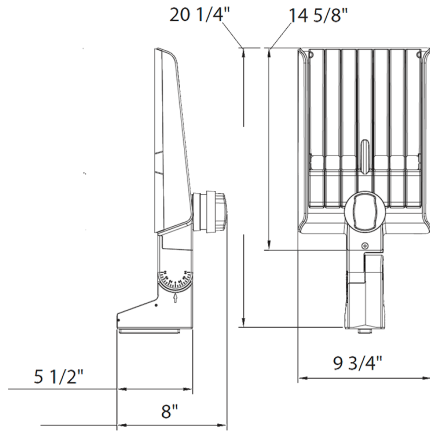
60W: B2 U0 G2

Other

5-Year Limited Warranty:

The RAB 5-year, limited warranty covers light output, driver performance and paint finish. RAB's warranty is subject to all terms and conditions found at rablighting.com/warranty.

Dimensions



Features

- DLC Premium listed
- Adjustable Universal Pole Mount
- 7-Pin Receptacle with Shorting Cap
- IP66 Rated
- 100,000-Hour LED lifespan
- 5-Year, limited warranty

Ordering Matrix

Family	Optics	Wattage	Mounting	Color Temp	Finish	Driver	Options
A22	-	4T	100				
	2T = Type II 4T = Type IV 5T = Type V Blank = Type III	70 = 70/60/50W 100 = 100/80/60W 150 = 150/120/100W 200 = 200/180/160W 320 = 320/280/250W	Blank = Universal Adjustable Pole Mount Blank = Universal Non-Adjustable Pole Mount	Blank = 3000/4000/5000K CCT Adjustable Y = 3000K	Blank = Bronze W = White B = Black	Blank = 120-277V, 0-10V Dimming /480 = 480V, 0-10V Dimming	Blank = 7-Pin Receptacle with Shorting Cap /MVS = 7-Pin Receptacle with Shorting Cap and Microwave Motion Sensor /LCBS = Lightcloud Blue w/PIR Sensor /LCBS/MVS = Lightcloud Blue w/MVS Sensor