



Village of Tannersville

Po Box 967, Tannersville, NY 12485

Telephone: (518)-589-5850 Fax: (518)-589-5805

E-mail: pz@tannersvillenyny.gov Website: www.tannersvillenyny.org

PLANNING DEPARTMENT APPLICATION

FOR OFFICE USE ONLY:

FEES DUE: _____

ZBA REQUIRED? _____

FEES RECEIVED? _____

BP REQUIRED? _____

Meeting Date: _____

EAF ___(Long) ___(Short)
RECEIVED _____

DEC FORM _____ (-) (+)

DEADLINE: 10 Business days prior to meeting 3 Weeks if Requesting Variance

Site Plan Review: Subdivision Review: _____

Major _____ Minor _____ Other _____

Date of Application: 6/24/26

Plans Submitted: _____

Please note:

- **Applicant must attend meeting(s).**
- **Failure to show, withdrawal of application, or denial will result in forfeiture of fee.**
- **Applicant may be billed for Village Engineer fees related to the review of application.**

Name of Property Owner/Applicant: Brett Hogan, 4 Season Getaways LLC, Lodge LLC ^{Your Own}

Property Address: 5909 Main Street, Tannersville NY

Tax Map Parcel #(s): 182-06-1-12 Parcel Size: 65 acres Width: 69.10ft Depth: 247.46 + 127.59

Property Zoning District: Central business District Property Class: 220 - 2 family

Present Use of Property: STR Proposed Use STR

Variance Requested? No If yes, please complete Zoning Board of Appeals Application.

Previous applications for this property: Yes Planning Board No Zoning Board of Appeals

If yes, provide results: approved for pool

Description of Proposal / Detail of Request:

STR permit - 13 bedroom seeking 3500sq ft

Value of Construction: \$ 0/NA

Licensed Land Surveyor/Engineer/Authorized Agent: _____

(If representing applicant, please included a notarized letter from the property owner indicating such authorization.)



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Easement or Restrictions on property:

Yes - sewer mains

Names of Adjacent owners and property owners across the street. (Use separate sheet if necessary)

Sharon Rebbkin
Eddie Legg / Dawn Platner
7 South Main Street

Certification of Statements:

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application. Notarized statement of authorization is attached to this application if the applicant is not the owner of record.

Brett Hogan
Applicant Signature

Brett Hogan
Applicant Name Printed/Typed

2780 Clarendon Ave. Ballmore NJ 07170
Mailing Address

516-860-6528, brett@leg.com
Phone/Fax/Email

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

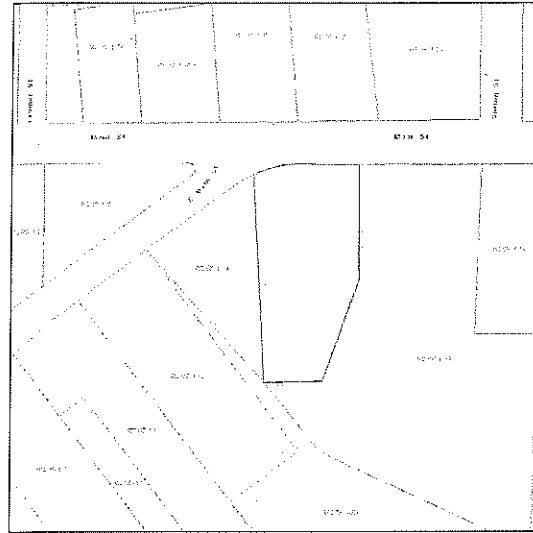
Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

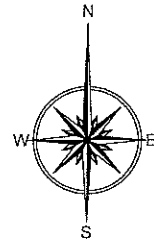
Part 1 – Project and Sponsor Information			
5909 Main Street STR Permit			
Name of Action or Project:			
5909 Main Street, 182.06-1-12			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
13 bedroom house seeking 38 occupancy for short term rental permit			
Name of Applicant or Sponsor:		Telephone: 516-860-6928	
4 Season Getaways LLC / Your Own Lodge LLC		E-Mail: bott@4sg.com	
Address:			
2780 Clarendon Ave.			
City/PO:		State:	Zip Code:
Bellmore		NY	11710
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If No, continue to question 2.			YES
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO
If Yes, list agency(s) name and permit or approval: STR Permit			YES
3. 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			
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):			
<input type="checkbox"/> Parkland			

		NO	YES	N/A
5.	Is the proposed action,			
	a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.	Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7.	Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8.	a. Will the proposed action result in a substantial increase in traffic above present levels?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9.	Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10.	Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: <u>currently connected to municipal water</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11.	Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: <u>currently connected to municipal sewer</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12.	a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
	b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13.	a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			

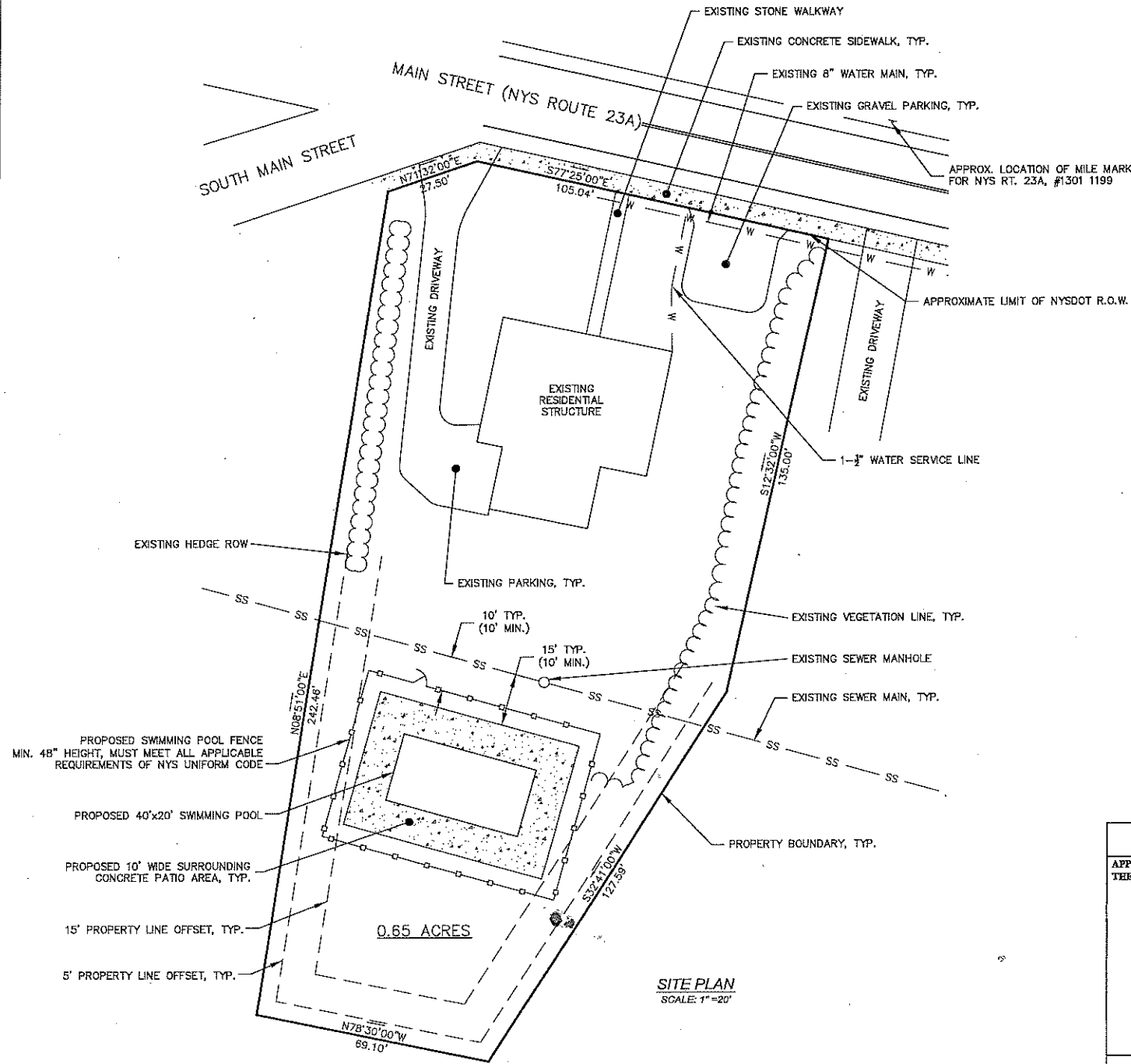
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year or 500-year flood plain?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	NO <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
21. Is the project located within, or within 1/2 mile of, a disadvantaged community? If No, could impacts from the project affect a disadvantaged community? If Yes to either question in 21, answer the following question. a. Identify the potential pollution impacts of the project, either direct or indirect, that may occur within the disadvantaged community (e.g., wastewater discharges, air emissions, noise, odors, solid or hazardous waste generation or management):	NO <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	YES <input type="checkbox"/> <input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Walt Hagan</u> Date: <u>6/24/26</u> Signature: <u>[Signature]</u> Title: <u>Owner</u>		



TAX MAP
SCALE: NTS



SATELLITE IMAGE
SCALE: NTS



SITE PLAN
SCALE: 1"=20'

VILLAGE OF TANNERSVILLE BOARD ENDORSEMENT FOR SITE PLAN	
APPROVAL SUBJECT TO REVIEW BY THE FOLLOWING AGENCIES:	ROAD STATUS: INGRESS EGRESS
VILLAGE OF TANNERSVILLE <input type="checkbox"/>	RIGHT OF WAY A) UNIMPROVED <input type="checkbox"/>
DEPARTMENT OF HEALTH <input type="checkbox"/>	B) IMPROVED <input type="checkbox"/>
DEPARTMENT OF ENVIRONMENTAL CONSERVATION <input type="checkbox"/>	VILLAGE ROAD <input type="checkbox"/>
DEPARTMENT OF ENVIRONMENTAL PROTECTION <input type="checkbox"/>	TOWN ROAD <input type="checkbox"/>
GREENE COUNTY PLANNING BOARD <input type="checkbox"/>	COUNTY ROAD <input type="checkbox"/>
OTHER <input type="checkbox"/>	STATE ROAD <input type="checkbox"/>

OTHER CONDITIONS OF APPROVAL: _____, CHAIRMAN

OWNERS CERTIFICATION
The undersigned, owner or owner's authorized representative of the property shown on this plat, does hereby certify that he/she has reviewed this plat, is familiar with this map, its contents and its notes and hereby consents to all said terms and conditions as stated hereon and agree to file this map with the Greene County Clerk.

Brett Hogan 4-1-15
Signature Date

VILLAGE BOARD ENDORSEMENT
Approved by resolution of the planning board of the Village of Tannersville, subject to all conditions and requirements of said resolution. Any change, erasure, modification, or revision of this plat as approved shall void this approval.

Mayor - Village Board Date

Christopher R. DiChiaro, P.E.
Civil Engineer
51 Hickory Hollow Court
Palenville, NY 12463
(845) 594-2068
email: cdichiaro@gmail.com

PROPOSED POOL LOCATION PLAN
ON LANDS OF BRETT HOGAN
5909 MAIN STREET, TANNERSVILLE, NY - S.B.L.#: 182.06-1-12
TOWN OF HUNTER COUNTY OF GREENE

Project Date: March 30, 2015

Revision Record:	Date:	Comment:



Unauthorized alteration or addition to a plan bearing a Licensed Engineer's seal is a violation of Section 7209, Subdivision 2, of the New York State Education Law.

Drawn: CRD
Checked: CRD
Scale: As Shown
Sheet Title: Pool Location Plan
Sheet Number: C1 of 1

NOTES:
1. THIS IS NOT A SURVEY MAP. PLANIMETRIC INFORMATION DEPICTED ON THIS DRAWING IS BASED ON RECORD PLANS, FIELD MEASUREMENTS AND SATELLITE IMAGERY.
2. LOCATION OF ALL UTILITIES TO BE VERIFIED IN THE FIELD. UTILITIES MUST BE ACCURATELY LOCATED AND MARKED-OUT BEFORE CONSTRUCTION BEGINS.