For Office Use Only:			
Action Date: 4/5	2 - /	Date Received:	
Fees Paid/Amt: 2	114/23	Received By:	
Has the ZBA granted any va (Attach a copy of any varian	ce or special permit to this	application)	
Please	include a copy of the mos	t recent or previously app	roved Site Plan.
Owner's Name: Raw	Grond artfolde	ing LLC	
Address: 5-3	37 47th Rd	0	
Telephone: Hom	forg Island	Business: 118	344 5505 (m)
Applicant's Name:	regory Rh.	ein (Jo	hn Theologis)
Address: 12	Slinton	Ave	
Telephone: Hom	e:	Business: 845	-820-1479
Tax Map ID: Section:	// Block:	Lot(s):	4
Project Location:	120000-1	6 Raildoad	Ave Suite 2
Zoning District:		Parcel Area (SF/Acres):	3,969
Applicant to complete the fo	llowing questions:		
1. Identify the EXISTING & PI **See Section 14		s) of the property & buildin vithin each category (Includ	
EXISTING		PROPOSED	
Type of Use	Contraction to the Contraction of the Contraction o	Type of Use	
Residential		Residential	
Mixed Uses		Mixed Uses	
General Uses Business and Service Uses		General Uses	
prosiliess and service 0363		Business and Service Uses	

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2. Identify the EXISTING & PROPOSED use(s) of the property and building (Complete the following table):

Building Story	Existing Use	Existing Area (SF)	Proposed Use	Proposed Area (SF)	
First Floor	(Rotai	10.00 ppt	Food/Retail	500 A.	
Second Floor				00	
Third Floor					
Describe the PROPOSED use(s): Preparing and selling hot/cold food and drinks. Mostly fo-go w/ a few indead outdoor					
tables. Minimal retail products					
3. Identify the Specific Use and Use Group that applies to the proposed use(s): (See Section 145-31 for the Use Table and specific uses - Included with this form as Attachment 1)					
4. Is the property located within the Historic District? VN):					
5. Are there any physical changes proposed to the property or exterior of the building? (YN) If Yes, Describe. If No, skip Questions 6, 7, & 8):					

6. Complete the following table for the applicable Bulk Zoning Requirements for the proposed use/use group:

(See Chapter 145 ZONING, Article IV BULK REQUIREMENTS of the Village of Warwick Code - Attachment 2)

	Required	Existing	Proposed
Min Lot Area (SF)			
Lot Width (FT)			
Front Setback (FT)			
Side Setback (FT)			
Total Side Setback (FT)			
Side Yard (FT)			
Side Yard w/in 25' of a R Zone			
Rear Setback (FT)			
Rear Yard (FT)			
Rear Yard w/in 25' of a R Zone			
Street Frontage (FT)			
Max Height (FT)			* 1
Development Coverage (%)			
Building Coverage (%)			
Floor Area Ratio (F.A.R.)			
Lot Depth (FT)			
Livable Floor Area/Unit (SF)			
Lot Area/Dwelling Unit (FT)			
Bedrooms/Acre Lot Area			

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7. Are there any E utility rights-or-w	EXISTING easements for ray, street rights-of-way	r access, drainage, sewer/wa v, etc.? (Y/N) If yes, identify e	ter utility lines, underground/above ground ach by type, size, and location:
(**All existing ea	sements & ROWs shou	ld be shown on the property	survey submitted with this application**)
8. Will any of the change of use? (Y,		entified above be altered, ch —	anged, or effected by the proposed
If the project	ct is located within the	Historic District it must be r	eferred to the Village of Warwick AHDRB
1	hysical changes propos	ed to the interior of the build	ding? (Y/N) (Describe):
10. Is the property		ially within a FEMA designate Iplain maps available for rev	
11. Identify the tot	tal EXISTING and PROPO See Water Billing Clerk Existing Use	OSED water and sewer usage for past data) (See Attachmo	rates for each use in gallons per day (GPD): ent 3 for standard usage rates)
Water Use (GPD)	300	300	
Sewer Use (GPD)	300	300	No change
12. Is on-street par	king available near the	\ /	
13. Is a Municipal F	Parking Lot available wi	thin 300-FT of the site? (Y/N)	Identify Location: VES South S
14. Identify the nur	mber of on-site parking	spaces Provided for the EXIS	STING and PROPOSED use(s):
	Existing Use	Proposed Use	bo change
# Spaces Provided	0	0	No craces
15. Identify the tota otherwise:	al EXISTING and PROPC	SED number of persons occu	apying the site as employees, customers, or
	Existing Use	Proposed Use	
# Employees	2	2	
# Customers			
# Other Users			

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16. Identify the number of deliveries per day for	the EXISTING and PROPOSED use(s):
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	Existing Use	Proposed Use
# Deliveries/Day	1 pew wk	1 per neek

17. Identify the number, location, and size of loading spaces for the EXISTING and PROPOSED use(s):

	Existing Use	Proposed Use
# Loading Areas	1	1
Loading Area Size		
Loading Location	16 Railroad	16 Rayroad

18a. Identify the amount of solid waste/garbage generated by the EXISTING and PROPOSED use(s):

	Existing Use	Proposed Use
Cans of Waste		
Generated/Wk.		2 pen wil

18b. Identify the method of solid waste disposal for the EXISTING and PROPOSED use(s):

	Existing Use	Proposed Use
Waste Disposal		1
Method		take away

(i.e. How often is waste collected? Will individual cans or a dumpster be used?)

18c. Identify the location of any outdoor storage of solid waste for the EXISTING and PROPOSED use (S):

	Existing Use	Proposed Use	
Outdoor Waste Storage Location	hone	None	

19. Will the PROPOSED use increase the location, amount of, and intensity of exterior lighting? (Y/N):

If YES, Describe:

20. Will there be any change in the existing drainage or stormwater detention areas? (Y/N) If YES, Describe:

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21. Will there be a school services, et		of municipal services such as		
22. Will the propos	sed use routinely produ	ice odors? (Y/N) If YES, Descr	ribe: $\sqrt{0,cc}$	ooking on site
23. Will the propos	sed use produce operat	ing noise exceeding the loca	l ambient noise levels? (Y/	(N)
If YES, Describe:				
24. Identify the ho	urs of operation for the	EXISTING and PROPOSED us	se(s):	
	Existing Use	Proposed Use		State Control
Hours of Operation	Ma-6p.	11am-6pm	5 DAYS per	WEEK
26. Are any other of		ls required for the PROPOSE	D use? (Y/N) If yes, list all	approvals:
**Applicant to	certify that the above i	information is complete and of Use Waiver Application to		
Signature of Applica	ant:	V	Date: _/	14/23
Signature of Owner	-/Agent:		Date:	The same of the sa
**Note: The Planni	ng Board Secretary is a	ck Planning Board Secretary uthorized to review this appi e it will be forwarded to the	lication for completeness	
1. Has the informat	ion in this Waiver Appli	ication been reviewed for co	mpleteness (Y/N):	Yes
2. Has the Applicant	t submitted a current c	ertified property survey? (Y/	'N):	U
proportion provided and the second a	active of Diaming Desir	-d Constant		
Sigr	nature of Planning Boar	u secretary		Date

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		Angle Control		
24. additional one recommendation of the first of the fir	Transfer in			
The second secon			page of referes poses seems be Pagering Assert managers Sales 1/4/2/3 Pagering Land Japan	
			Topics design of property only a such and the first state of the second	

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To be completed by the Village of Warwick Planning Board:	
 Has the information in this Waiver Application been reviewed by the Planning Board for completeness and accuracy? (Y/N): 	
2. Does this application require formal Site Plan Review/Approval by the Planning Board? (Y/N) (Describe):	
Vaiver Approval: YES NO Date:	
oes the Planning Board have any specific comments or conditions on this Waiver Approval?	
Signature of Planning Board Chairman Date	