

Property Description Report For: 14311 Route 9W, Municipality of New Baltimore

Status:

Roll Section: Taxable Swis: 194200 Tax Map ID #: 7.01-1-21 415 - Motel **Property Class:** No Photo Available Site: COM 1 No In Ag. District: **Site Property Class:** 415 - Motel

> **Zoning Code: Neighborhood Code:**

00001 - Commercial Ravena-Coeymans-**School District:**

Selkirk

Active

01 - Commercial

2024 - \$300,200 **Total Assessment:**

Property Desc: 2024 - 41.00%

Deed Page: 1865 **Grid North:** 1318038

Deed Book: **Grid East:**

Total Acreage/Size:

Land Assessment:

Full Market Value:

Equalization Rate:

2021 676587

2024 - \$39,200

2024 - \$732,195

2.25

Owners

Old Stockade Development 110 Maiden Ln Kingston NY 12401

Sales

Sale Date	Price	Property Class	Sale Type	Prior Owner	Value Usable	Arms Length	Addl. Parcels	Deed Book and Page
3/31/2021	\$500,000	415 - Motel	Land & Building	Shah, Sejal P	Yes	Yes	No	2021/1865
7/24/1992	\$1	415 - Motel	Land & Building	Shah, Pramod	No	No	No	777/188

Utilities

Sewer Type: Utilities:

Private Electric Water Supply:

Comm/public

Inventory

Overall Eff Year Built:

Overall Condition:

Fair

Overall Grade:

Economy

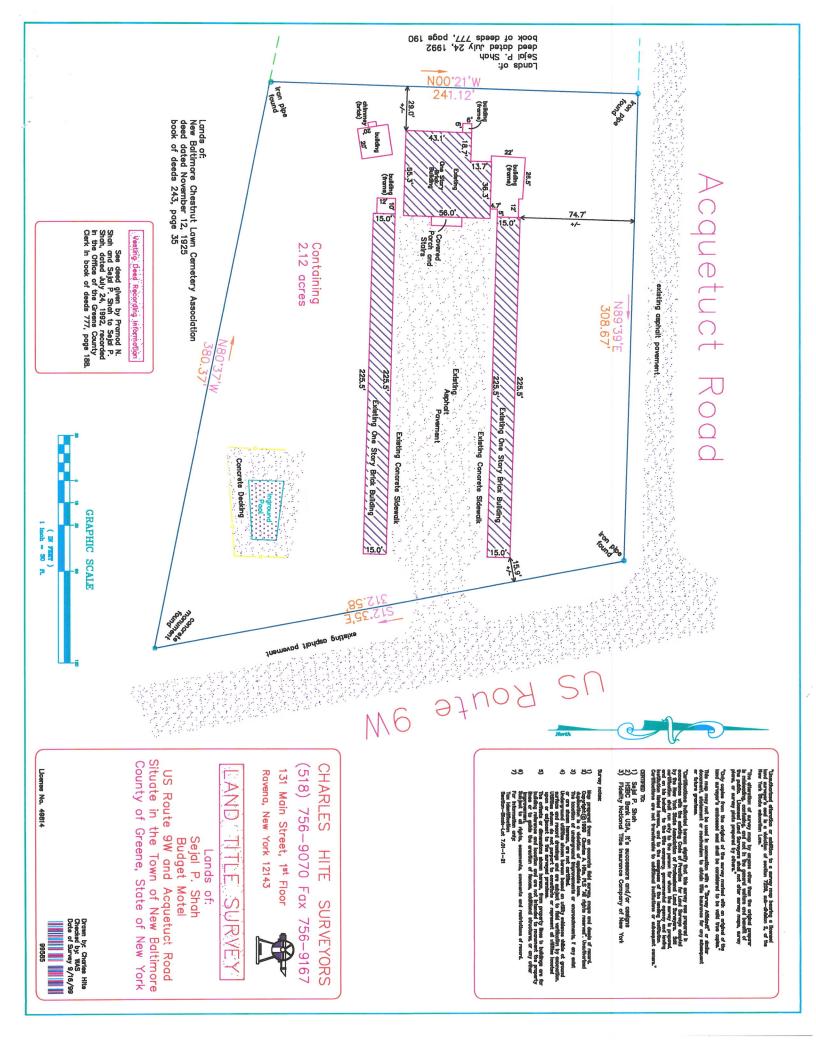
Overall Desirability:

3

Buildings

Gross Floor Basement Year Stories Condition Quality Area (sqft) AC% Sprinkler% Alarm% Elevators Type **Built** 9704 1 1950 Good Average





1001-1-21

TOWN OF NEW BALTIMORE

NEW BALTIMORE, NEW YORK 12124

APPLICATION FOR SEWAGE DISPOSAL SYSTEM

* Requirements						
	. 4					
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				5-0	r000	
Examined:		19				
Approved:		19		. '		
	Sanitary Inspector		AR	Z/L 17	7 2000	
	Sanitary Inspector			Date	of Application	
		1				
A. This application	must be completely fille		RUCTIONS	bmitted in Trip	licate to the Town C	lerk. Diagram
the location plan, illust streams, ponds, lakes ar (1) Return applicated diagrammed location for necessary for applicant and one and one-half percolation test. NOT determine if system with the necessary (*) requirements the sewage disrejection. NOTE: HER THE SYSTEM. CIRCLE: whether application and address of or Nature of work: New	rating lot, buildings, set-bad location of proposed set ition to Town Clerk. (2) or approval or disapproval. to provide Sanitary Inspective (1%) feet deep. Upon core: INSPECTOR SHALL Ill perform satisfactorily. Firements for the installations as system, the Sanitary E AGAIN THE INSPECTOR Applicant's Signature	ack dimension wage disposal s Town Clerk (3) Upon apprector with a hapletion, (5) HAVE THREE following the on of sewage of Inspector Min or SHALL BE	is from property line system. will forward applic royal of location, app and dug hole, specif applicant will call S E DAY NOTICE Te percolation test, (6) disposal system. U UST again be called ALLOWED 24 HOU	es, adjoining pre ation to Sanita olicant will be n fically located, anitary Inspect O TAKE PERC applicant will to pon completion by applicant fo URS NOTICE T Address to	emises, public streets, any Inspector who wotlfied, and (4) it will approximately one (156-3039) who would be notified by Sanitar in of the installation as a final inspection at O INSPECT BEFORE	water supply, ill review the I then become i) foot square vill schedule a hich test will y Inspector of ind (7) before dd approval or E COVERING
Number of dwelling un	its / number of	f bathrooms	; laundry.	; cell	lar M/t	i
Name of nlumber or co	ntractor: GRENE	DUNTY	SEPTIC ()	EANEKS	· IIC	
Source and location of	water supply; Well	02	; Public	2//	; Other	
4 500						
	41TIS TORI	PLOT	DIAGRAM	THE THE	IK USEN BY	
E OFFICE AU	1 OWNERS (P)	lot diagram of	location on reverse a	ide) Jassa	LING OR	117.
THIS SYSTE THIS WAIT Fee: \$30	HAS 175 000 00 Date Paid: 4/17/2	system	Co: was	LIVING GEOMARIESS	TEAL NCE IN MITTELL IS OF Applicant	SOUNETAL TANK CALCONCETE ONLY FOR WHERS
			1/1/	/h	A matication	

CERTIFICATE OF COMPLIANCE

TOWN OF NEW BALTIMORE GREENE COUNTY, NEW YORK

DATE: 18 20 18						
This is to certify that work requested to be done as shown by Permit No. 2017-49 on this structure currently occupied as a MOTEL has been completed						
in accordance with the New York State Uniform Fire and Building Code.						
Property Location 14311 STATE BOUTE GW WAYENA, NY Owner(s) SAGEL SHAH - BUDGET MOTEL # 7.01-1-21						
NEW SEPTIC SYSTEM By order of the Town of New Baltimore Town Board Building Inspector						

TOWN OF NEW BALTIMORE 3809 COUNTY ROUTE 51 HANNACROIX, NY 12087

Fee paid O
Date
APPLICATION FOR A BUILDING PERMIT-Page 1
* Please print. *An incomplete application may delay the timely issuance of your
permit. Enter "N/A" if a section is not applicable.
PART 1: GENERAL INFORMATION
1 Project location
Number and street address: 143/1 STATE Koute Gw KANFULL
Tax Map Number: 7.01-1-21 Zoning District
MOT have
Current use of the property/building: HOTER
South South
Proposed use of the property/building:
2.Owner identification
Owner name/s. SHA
Address of owner: 14311 STATE FOUTE JW - KAVEWH
Address of Owner.
City, State, Zip Code: KAVENIA NU /2/13
-6.012/2
Phone number(s): 5/5-369-2002
3. Type of Construction of Improvement
()New Building-proposed use is
()Conversion-current use is Proposed use is
Special Control of the Control of th
()Addition ()Alteration ()Repair/Replacement Septic
ODemolition ()Miss Structure
()Relocation ()Demolition ()Misc Structure
4. Description of Troject
The state of the s
SEAL SUSTEM
· /if it is a first of the state of the stat
5.Estimated project cost
Contractor estimate for the work to be performed \$ // / -
And/or the the terms of the
Estimate for the work to be performed by homeowner \$
Continue on page 2 Do not write below this line
Date recd 8/16/17 Recd by St. Fwd to O.M.
Special approval needed by: Zoring Board of Appeals Planning Board
(Other)

Town of New Baltimore APPLICATION FOR A BUILDING PERMIT-PAGE 2

PART 2: DESIGNERS AND CONTRACTORS 1. Architect/Engineer name HEAST address Z city, state, zip__ phone(s) 2. General Contractor name 612 phone(s) 3. Electrical Contractor name phone(s) 4.Plumbing Contractor name phone(s)_____ 5.Mechanical Contractor name phone(s) Contractor name phone(s) PART 3: PROJECT LOCATION AND DETAILS *Be sure to attach sketch or plot plan. A sketch of the work to be performed must be part of this application. It must include: location of the proposed structure or addition showing the number 1. or stories and exterior dimensions distance of the proposal from all lot lines distance of the proposal from any structure including neighboring 2. 3. structures depth of the proposed foundation or footers maximum percentage of the lot to be covered by building(s) 4. addition will be used as () family room; () living room; () kitchen; 5. 6. ()den; ()bedroom; ()1/2 bath; ()full bath; ()other_ basement: ()full; ()partial; ()crawlspace; ()pier; ()slab 7. garage: ()attached; ()detached 8. utilities: ()electric; ()gas; ()other deck/porch: ()open; ()covered; ()enclosed; ()screened; 9. 10. ()other

14311 ROUTE 9W WWDS IMPROVEMENTS

GENERAL MOTES:

1. THERE SHALL BE NO DEMATION FROM THESE PLANS DURING
CONSTRUCTION WITHOUT PRIOR APPROVAL OF A LICENSED DESIGN
PROPESSIONAL, INVSDOH, INVSDOH, AND THE TOWN SOF REV PRAITINGE.

2. THE MATERIALS AND SECIONATIONS NOTED ON THE PLANS MUST BE.

2. THE MATERIALS AND SECIONATIONS NOTED OND APPROVED IN WRITING BY
A LICENSED DESIGN PROPESSIONAL AND TOWN REPRESENTATIONS.

3. FOLLOW ALL MANUFACTURER'S INSTRUCTIONS FOR COMPONENT

PROTECTIVE OPCANIZATION (DIG SAFELY NEW YORK). 5. ELECTRICAL EQUIPMENT INSTALLED IN ACCORDANCE WITH THE PLAN MUST EE ALEN YORK STATE BOARD OF PIRE (NOVERNYMITERS CERTIFIED. PROFESSIONAL AND TOWN REPRESENTATIVE. PRIDR TO EXCAVATING, CONSULT THE UNDERGROUND FACILITIES

NSTALLATION UNLESS OTHERWISE DIRECTED BY A LICENSED DESIGN

REQUIRED NOTES - ALL SEPTIC PLANS;

1. SANTIARY FACILITIES MAY BE CONSTRUCTED ONLY AFTER A YOWN "PERMIT".

1. SANTIARY FACILITIES MAY BE CONSTRUCT BE PLACED IN CONSTRUCT HAS BEEN ISSUED. ("NESE FACILITIES SHALL NOT BE PLACED IN OPERATION UNTIL A TOWN "CERTIFICATE OF COMPLETION" HAS BEEN ISSUED. CONTACT THE DESIGNATED TOWN REPRESENTATIVE REGARDING THE CONTACT THE DESIGNATED TOWN REPRESENTATIVE REGARDING THE

ERRIFY THAT CONSTRUCTION FOLLOWED THE APPROVED HAN, FURNISH AN AB-BUILT FLAN, AND APPLY TO TOWN FOR A "DERTHFOATION OF COMPLETION."
INSPECTIONS OF SANITARY FACILITY CONSTRUCTION SHALL BE CONDUCTED ONTILY BY A LICENSED PROFESSIONAL AND TOWN REPRESENTATIVE: A LICENSED DESIGN PROFESSIONAL SHALL SUPERVISE SYSTEM INSTALLATION PRIOR TO SITE DEVELOPMENT:

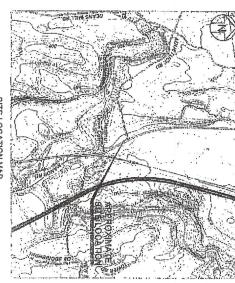
AFTER SITE PREPARATION PRIOR TO FILL PLACEMENT (SYSTEMS IN FILL ONLY); DURING PERCOLATION TESTING OF THE STABILIZED FILL (SYSTEMS IN FILL AFTER ADJUSTMENT OF THE PUMP OR SIPHON CHAMBER (DOSED SYSTEMS

PRIOR TO BACKFILLING FIRES, TANKS, PITS, WELL SEALS, ETC.

F. AFTER FINAL GRADING AND SÉEDING.
4. ROOF, FLOOT, FOOTING, COCUMB WATER, BACKWASH DRAINS, ETC. SHALL BE DRECTED ANALY FROM THE TREATMENT ASEA.
5. NO VEHICULAR PARKING OR TRAFFIC SHALL BE ALLOWED ON ANY PORTION OF

THE SEVVAGE TREATMENT SYSTEM EXCEPT AS SHOWN.

5. THE OWNER SHALL FURNISH THE PURCHASER OF A LOT DEPICTED ON THIS
TUDY WITH A CORP OF THE APPROVED EVAL OR IF CONSTRUCTED, AN ACCURATE
AS-BUILT FLAN DEPICTING INSTALLED FACILITIES.



SITE LOCATION MAP

TAX WAP #: 7.01-1-21

	- Indiana	
SOIL APPRAISAL PERFOR	WED BY FR	SOIL APPRAISAL PERFORMED BY FRANK ENGINEERING ON 7-22-15
TEST HOLE DESIGNATION	~	STABILIZED PERC RATE
PT1 - PERCOLATION TEST NO. 1	NO. 1	11:07 MIN JANCH
PT2 - PERCOLATION TEST NO. 2	FNO. 2	13:42 MIN JINCH
P73 - PERCOLATION TEST NO. 3	NO. 3	14:10 MINJINCH
OH1 - DEEP HOLE NO. 1	1718 #2-0	1-24" SILT LOAM, TOPSOIL
ν	24"-48" FIN	24"-48" FINE SANDY LOAM SOME SILT
	NO GW, NO	48"-80" FINE SANDY LOAM NO GW, NO MOTTLING NOTED. SOIL DAMP AT 50"
DHZ - DREP HOLE NO. 2	0-15" SILT I	0-18" SILT LOAM, TORSOIL
	18"-36" FINI 36"-78" FINI NO GW, NO	18"-36" FINE SANDY LOAM SOME SILT 36"-78" FINE SANDY LOAM ND GW, ND MOTTILING NOTED, SOIL DAMP AT 50"

PERCOLATION TEST PERFORMED IN ACCORDANCE TO WASTEMATER TREATMENT STANDARDS FOR INDIVIDUAL HOUSEHOLD SYSTEMS. APPROXIMATE LOCATION OF TESTS SHOWN ON SITE PLAN.

CONVERSATIONS WITH THE OWNER HAVE INDICATED THAT THIS NEIGHBORHOOD IS SERVED BY PUBLIC WATER.

PROPERTY LINE TO TOE OF FILL OR ABS. FIELD

WELL TO TOE OF FILL OR ABS. FIELD

HOUSE TO TOE OF FILL OR ABSORPTION HELD HOUSE TO SEPTIC TANK/DOSING TANK MINIMUM SEPARATION DISTANCES

20' MIN. 10' MIN.

D m m m w

100' MIN

WELL TO SEPTIC TANK

50° MIN.

TO MIN

1.) LIMITS OF THE SYSTEM TO BE ROPED OFF PRIDR TO AND AFTER SYSTEM INSTALLATION TO PREVENT HEAVY EQUIPMENT FROM COMPACTING THE MATURAL USABLE SOIL AND DAMAGE TO THE ABSORPTION TRENCHES. 2.) ALL SEPTIC SYSTEMS ARE TO BE DESIGNED AND CONSTRUCTED IN COMPLIANCE WITH N.Y.S. HEALTH CODE PART 75A AND NYSDEC

3.) NO DOSTING WELLS, PONOS, WATER COURSES OR WETLANDS EXISTING WITHIN 100 FEET OF PROPOSED SEWAGE DISPOSAL SYSTEM.
4.) NO ROCE, FOOTING, COCUNIG WATER, BACKYMASH DRAINS ETC. SHALL BE CONNECTED TO THE SEPTIC SYSTEM.
5.) SEPTIC SYSTEM.
5.) SEPTIC SYSTEM.
6.) SEPTIC SYSTEM.

6.) SEDIMENT CONTROL FENCE TO BE INSTALLED AT LIMIT OF DISTURBANCE UNTIL A PERMANENT STAND OF VEGETATION IS ESTABLISHED

B.) THE EARTH EACKFILL IS TO BE MOUNDED SUGHTLY ABOVE THE ORIGINAL GROUND CEVEL (I.E., NOT COMPACTED) TO ALLOW FOR SETTLING, FOLLOWING SETTLEMENT, THE ENTIRE AREA HAS TO BE GRADED WITHOUT THE USE OF HEAVY EQUIPMENT AND MUST BE SEEDED WITH GRASS. T) ANY CHANGE IN CONDITIONS MUST BE BROUGHY TO THE ATTENTION OF THE DESIGN ENSINEER.

MINIMUM OF 48 HOUR NOTICE. 9.) PRIOR TO THE START OF CONSTRUCTION, BUILDER SHALL VERIFY THAT THE BUILDING FINISHED FLOOR AND TANK INVERTS ARE SET TO ACHEVE O). THE CONTRACTOR SHALL NOTIFY THE ENGINEER OF CONSTRUCTION PROGRESS REQUIRING INSPECTIONS AS NOTIFD IN THIS PLAN SET WITH A THE BUILDING FINISHED FLOOR AND TANK INVERTS ARE SET TO REQUIRED SLOPES AND COVER AS INDICATED ON THE DETAILS.



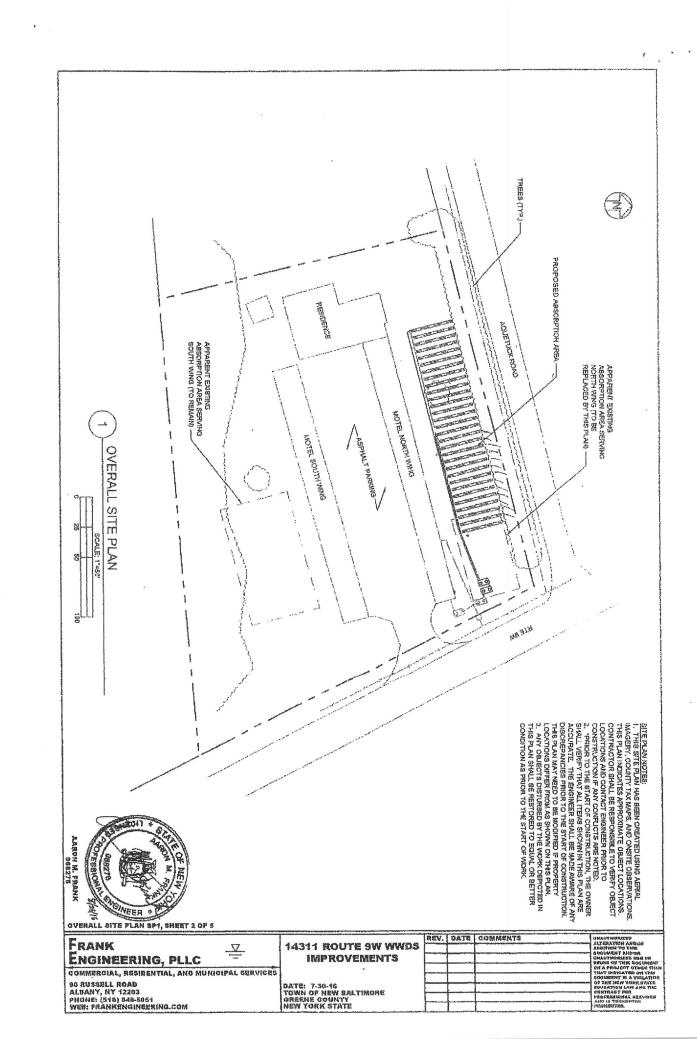
Engineering, PLLC COMMERCIAL, RESIDENTIAL, AND MUNICIPAL SERVICES

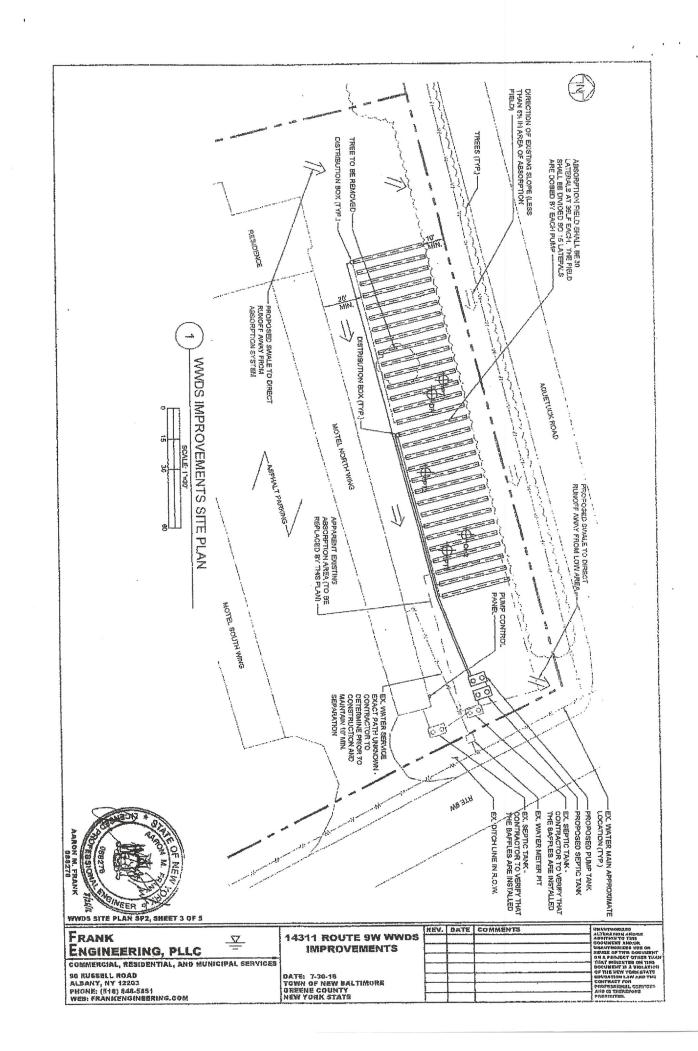
90 RUSSELL ROAD Aleany, ny 12203 Prijie (518) 848-5861 Web: Frankenginerring.com 14311 F IMP

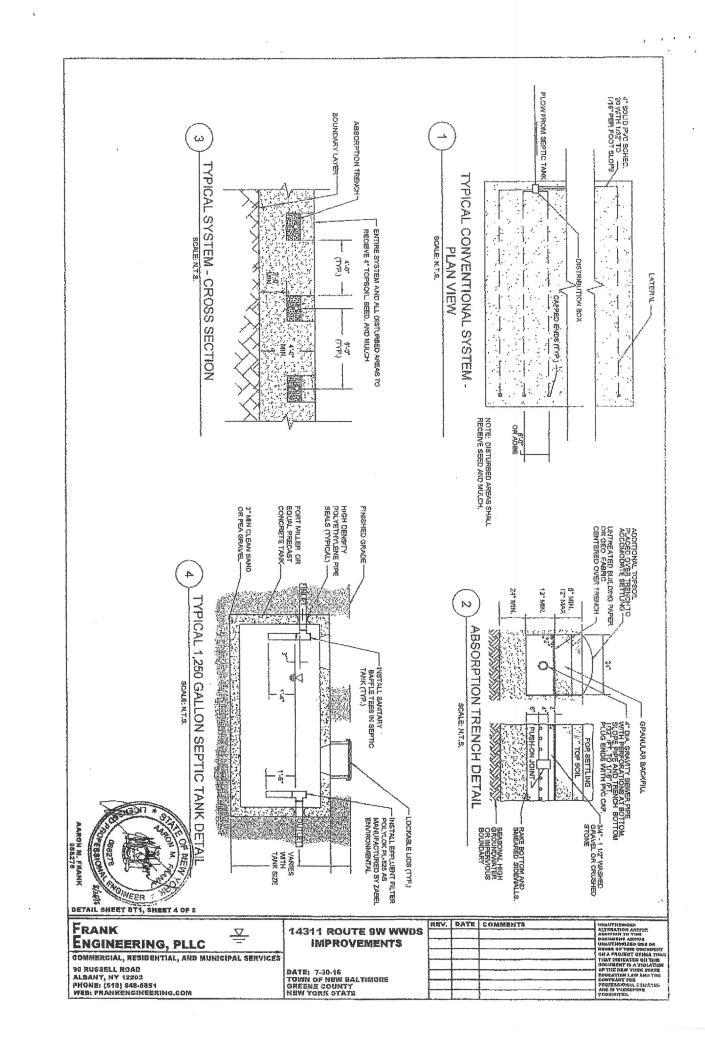
Date: 7.38-18 Town of New Baltimore Greene County New York State

	限概
ROUTE 9W WWDS	
ROVEMENTS	

V. DATE COMMENTS







DESIGN CRITERIA

四十二

THAS SITE CONSISTS OF A HOTEL WITH TWO WARDS AND A SMALL RESIDENCE. THIS SITE PLAN DEPOTS THE WORK NECESSARY TO REPLACE THE SETTL SYSTEM SEPANDE ONLY THE NORTH WING SEPANDE ONLY THE NORTH WING HOUSES 13 PRODUCE, THE SEPTLO SYSTEM HAS BEEN DESIGNED TO SERVE THESE 13 PRODUCE. THE SERVE THESE DESIGNED TO SERVE THESE DESIGNED THE SERVE THESE DESIGNED TO SERVE THESE DESIGNED TO SERVE THESE DE BEEN SELECTED. LOW RATE OF 130 GALLONS PER DAY PER ROOM HAS

GPD PER ROOM) = 1,590 GPD BASED ON MYSDEC STANDARDS: (13 ROOMS) x (130

SECTIC TANK SIZING: 1.5 X DESIGN FLOW: 1.5 X 1.580 = 2.535 GALLONS; THE SITE CURRENTLY HAS (2) 1,000 GALLON SECTIC TANKS AND THE PROPOSED DESIGN WILL REQUIRE THE ADDITION OF A 1,250 GALLON TANK THE APPLICATION RATE ASSOCIATED WITH THE 14 MINUTES PER NICH PERO RATE IS 0.8 GALLONS PER ST. THIS RESULTS IN THE NEED FOR 1.057 IF OF Z WIDE STONE AND PIPE ABSORPTION TRENCHES.

THE SITE SOILS CONDITIONS ARE ACCEPTABLE FOR THE USE OF A CONCENTONAL SEPTIC SYSTEM. A PUMP TANK HAS BEEN ADDED TO CHECT THE SEPTIC TANK EFFLUENT TO THE ABSORPTION AREA.

THAT ALL WATER USING FIXTURES ARE IN GOOD WORKING CONDITION. LEAVING FACETS AND TOLETS THAT GET STUCK RUNNING CON JOD A CONSIDERABLE AMOUNT OF WASTEWATER FLOW TO THE SEPTIC SYSTEM AND THIS GAN CAUSE EARLY FAILURE. DWNER'S RESPONSIBILITY: THE OWNER SHALL ENSURE

BUILDING TO SEPTIC TANK:
4" PVC SCHEDULE 30 WITH TIGHT JOINTS, MINIMUM SLOPE; 1/4" PER FOOT

SEPTIC TANK TO PUMP CHAMBER: 4" PVC SCHEDULE 80 WITH TIGHT JOINTS, MINIMUM SLOPE: 1/8" PER FOOT

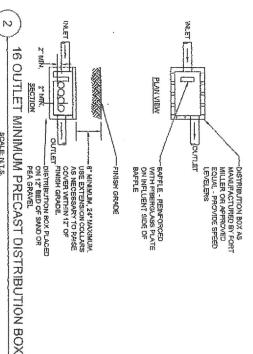
PUMP CHAMBER TO LATERALS: 2" HDPE DRI1, SLOPED FOR POSITIVE DRAINAGE TO PUMP CHAMBER WITH WEEP HOLE AT PUMP CHAMBER

LATERALS: SEE DETAILS

1 DAY STORAGE TIME FOR PUMP FAILURE.
PUMP TANK YOLUME ABOVE HIGH LEVEL ALARM = 1,380 GALLONS
SEPTIC TANK 1 YOLUME ABOVE NORMAL LOUID LEVEL = 220 GALLONS
SEPTIC TANK 2 VOLUME ABOVE NORMAL LOUID LEVEL = 220 GALLONS
SEPTIC TANK 3 VOLUME ABOVE NORMAL LOUID LEVEL = 235 GALLONS
SEPTIC TANK 3 YOLUME ABOVE NORMAL LOUID LEVEL = 315 GALLONS
TOTAL STORAGE AMALCABLE FOR PUMP PAILURE = 2,155 GALLONS
TOTAL STORAGE AMALCABLE FOR PUMP PAILURE = 2,155 GALLONS
THEREFORE, GREATER THAN 1 DAY STORAGE PROVIDED

2" GOOSE NECKED VENT WITH INSECT SCREEN ON TERMINAL PUMP CYCLE:
86% OF LATERAL VOLUME PLUS
FORCEMAIN DRAIN BACK
VOLUME = 370 GALLONS TANK CONCRETE BAFFLE TEES IN SEPTIC OR PEA GRAVEL ----POLYETHYLENE FIRE TANK (TYP.) -FINISHED GRADE -SEALS (TYPICAL) HIGH DENSITY PUMPS "OFF" LEVEL (370 GALLON PUMP VOL.) -(65' OVER PUMP ON) COATING INSIDE TANK TANK MANUPACTURER >
SHALL PROVIDE
CORROSION RESISTANT がいる "2" CHECK VALVE
"2" PYC PIPING
"EFFLUENT
PUMP THE POOR LET -DISCONNECT UNION LOCKABLE LIDS (TITE.) LIFT OUT CHAIN JUNICTION BOX DISCHARGE PIPING TO ABSORPTION SELD NOTES: .
1) COMPACTOR SHALL ANCHOR PUMP STATION AS NECESSARY TO PREVENT THE STRUCTURE FROM FLOATING. 2.) CONTRACTOR SHALL FOLLOW PUMP MANUFACTURER INSTALLATION BUSTRUCTIONS. 3.) PUMP STATION SHALL MEET THE FOLLOWING CONTRACTOR SHALL VERRY COMPONENT DRIVENSIONS TO ENSURE ALL ITEMS FIT. (2) PUMP: MODEL # SHEF42 SERIES AS MANUFACTURED BY HYDROMATIC PUMPS OR

CONCRETE PRODUCTS INC. OR APPROVED EQUAL 2,000 GALLON DUPLEX PUMP TANK BY GUARDIAN SCALE: N. T.S.



PUMP OPERATION REQUIREMENTS: PUMP ON AND OFF CONTROL LEAD AND LAG PUMP ALTERNATION PUMP BREAKER ALARM SWITCH (ON - OFF - TEST)
PUMP SWITCH (HAND - OFF - AUTO) CONTROL PANEL

MOUNTED (OUTDOOR)

CONTROL PANEL TO MEET ALL

NECESSARY LOGAL, FEDERAL, AND NEW

YORK STATE CODE REQUIREMENTS AND HIGH WATER ALARM ALARM CIRCUIT BREAKER LASHING RED ALARM LIGHT



SCALE N.T.S.

Frank Engineering, pllc

COMMERCIAL, RESIDENTIAL, AND MUNICIPAL SERVICES

90 Russell Road Albany, ny 12203 Phone: (518) 848-5851 Web: Frankengineering.com

14311 ROUTE 9W WWDS IMPROVEMENTS

DATE: 7-30-16 TOWN OF NEW BALTIMORE GREENE COUNTY NEW YORK STATE

REMOTE MOUNTED CONTROL REV. DATE COMMENTS

PANEL MOUNTED OUTSIDE

BUILDING WALL



Department of Environmental Conservation

Post Construction Certification of On-site Treatment Works

State Poliutant Discharge Elimination System (SPDES)
General Permit GP-6-15-001

Groundwater Discharge of Treated Sanitary Sewage

THIS FORM MUST BE SUBMITTED AT THE COMPLETION OF ON-SITE TREATMENT WORKS CONSTRUCTION PRIOR TO COMMENCING DISCHARGE

All <u>NEW on-site treatment systems and significant MODIFICATIONS</u> to existing systems authorized by GP-0-15-01 require certification by a professional engineer (PE) prior to commencing discharge. This form must be completed by a PE Boansed to practice in New York State.

If a local health agency has jurisdiction, the PE and permittee should also contact that agency for any necessary approved(s).

At completion of on-site treatment works construction, SUBMIT THIS FORM TO:

GP-0-15-00 Permit Coordinator
NYSDEC Division of Water, Bureau of Water Permits OR PCI.GeneralPermit@dec.ny.gov.
625 Broadway
Albany, NY 12233-3505

By the seal and signature below, the PE certifies that:

- 1. Helahe is a licensed professional engineer registered to practice engineering in New York State;
- 2. Wastewater treatment system(s) serving the identified facility is (are) designed and constructed in accordance with Design Standards for Intermadiate-Sized Wastewater Treatment Systems (NYSDEC, 2014) and, for on-site systems located in the Lake George Basin, are designed and constructed in accordance with Design Standards for Wastewater Treatment Works in the Lake George Basin (NYSDEC, 2015).
- If modifications to the originally approved engineering design and site plan were made, an electronic
 copy of the "as-built" engineering design and site plan must be submitted to the GP-0-15-001 Permit
 Goodinator; and
- The identified on-site treatment works will be placed in service and become operational as of 1/2 / 1 (20) 7 (date).

The second secon			
Stamp and Signature of Cortifolog Engir	neer	Cate	
A MAKES		11/14/17	
Printed Name of Professional Empireer	Telephone	Email	1-1-2-11 - 11-11-11-11-11-11-11-11-11-11-11-1
Acros da Falletta	5/8-848-5851	Geraid tor	
Professional Engineers	and the same of th		
Mailing Address	Post Office City	State	
Frank Engineering, 1244 90 Roussell Roll	Alberry	WY	1203
Name of Permittee	Facility Name		
Sept 1. Show, Pritesh Corp.	Budget Malel		
DEC Permit ID	Facility SPDES Number	County of Fac	Hty
4- HHZ-2001(10000)	MA-0 5-454 38	Greene	



Department

ANDREW M. CUOMO Governor

HOWARD A. ZUCKER, M.D., Commissioner

SALLY DRESLIN, M.S., R.N. **Executive Deputy Commissioner**

August 28, 2017

Re:

Temporary Residence

Greene County

RECEIVED

OCT 02 2017

Budget Motel BLDG/PLANNING/ZBA TOWN OF NEW BALTIMORE New Baltimore Town

Mr. Aaron M. Frank, P.E. Frank Engineering, PLLC 90 Russell Road

Albany, New York 12203

Dear Mr. Frank:

We have reviewed the alternate plans you submitted for the proposed replacement sewage disposal system to serve the north wing of the Budget Motel in New Baltimore. This office previously approved plans for a replacement sewage disposal system that consisted of a series of septic tanks, a pump dosing tank and two new absorption fields. The alternate plans call for installing a pressure distribution system within the leach field instead of the previously approved gravity distribution system. This modification was proposed to allow for adequate separation between the leach field and a water service line that was discovered while preparing the site for construction of the new system. The leach field for the pressure distribution system will consist of two fields each containing 18 laterals that are each 30 feet long. Each distribution pipe will contain 1/4-inch orifices spaced apart 6-feet on center. The leach fields will be alternately dosed by two Hydromatic model SHEF 44 dosing pumps will pump effluent to the leach fields. These plans are hereby approved with the following conditions.

- 1. That all required local approvals must be obtained prior to construction.
- The design engineer shall supervise construction and provide written certification to this office that installation is completed in accordance with the approved plans.
- 3. That the NYS Department of Environmental Conservation Region IV (NYSDEC) office be contacted to determine whether a modified SPDES permit is required for the proposed replacement sewage disposal system. The NYSDEC Region IV office can be reached at 518-357-2069.

· We are retaining one copy of the approved plans and returning two sets to you. If you have any questions please feel free to contact this office at 607-432-3911.

Sincerely.

Matthew A./Qurrey, P.E. Public Health Engineer 2

Enclosure

cc:

Mrs. Shah, Budget Motel

Mr. Mantor, New Baltimore Town Code Enforcement Officer

NYSDEC Region 4, Schenectady

Ravena-Coeymans-Selkirk School District

Notice of 2024 School Tax

NYS Taxation and Finance School Code: 524

OLD STOCKADE DEVELOPMENT

TAXPAYER COPY

The total amount of local assistance to be received from the State of New York during the school year July 1, 2024 - June 30, 2025 is \$20,124,532.00

The estimated tax to be raised is \$28,161,837.00 % Changed from prior year 4.3



2024-003835-1-524

Ravena-Coeymans-Selkirk CSD

15 MOUNTAIN RD RAVENA, NY 12143

110 MAIDEN LN

KINGSTON, NY 12401

2024-003835

ADDRESS:

14311 Route 9W

TOWN:

New Baltimore

SBL:

7.01-1-21

SWIS:

194200 Motel

PROPERTY DESCRIPTION

PROPERTY CLASS:

ESCROW CODE:

APPROVED SEP 0 3 2024

Full Market Value as of July 01, 2024

Total Assessed Value as of July 01, 2024

Uniform Percentage of Value

\$732,195.00 \$300,200.00

41.00

PROPERTY TAXES Taxable Assessed Before STAR Total Due Taxing Purpose Rate per \$1000 \$10,661.83 \$300,200.00 35,515772 School Tax \$300,200.00 0.827823 \$248.51 Library Tax

TOTAL TAX DUE BY 10/01/2024

\$10,910.34

Exemption

Ex Amt

Total Due

Penalty Amt Full Ex Amt If Paid Between Penalty 10/02/2024 - 11/01/2024 \$218.21 \$11,128.55 2.00 %

US Postmark determines date of payment.

MAKE CHECKS OR MONEY ORDERS PAYABLE TO:

RAVENA-COEYMANS-SELKIRK CSD

MAIL PAYMENT WITH REMITTANCE STUB TO:

RAVENA-COEYMANS-SELKIRK CSD

TAX PROCESSING UNIT

PO BOX 250

RAVENA, NY 12143-0250

TO PAY YOUR TAXES ONLINE GO TO:

https://payments.msbpay.navient.com/RAVE_SchoolTax/Landi

ng

IN PERSON PAYMENTS:

National Bank of Coxsackie

Ravena Branch

Faith Plaza, Route 9W

Ravena, NY

Glenmont Branch

331 Route 9W Glenmont, NY **MAILING ADDRESS CHANGES:**

All Address changes Must be made through your Town Assessor.

School Collection Ends 11/1/2024.

All unpaid taxes after this date are

returned to the county.

DURING NORMAL BANK HOURS

Send this section ONLY with your payment.

RAVENA-COEYMANS-SELKIRK CSD TAX PROCESSING UNIT

PO BOX 250 RAVENA, NY 12143-0250 Send this section ONLY with your payment.

2024 - 2025 SCHOOL TAX

OLD STOCKADE DEVELOPMENT

110 MAIDEN LN KINGSTON, NY 12401 **TOTAL TAX DUE BY 10/01/2024**

\$10,910.34

If Paid Between 10/02/2024 - 11/01/2024 Penalty 2.00 % Penalty Amt \$218.21

Total Due \$11,128.55

PROPERTY DESCRIPTION

ADDRESS:

14311 Route 9W New Baltimore

TOWN: SBL:

7.01-1-21

194200 SWIS: ESCROW CODE:

US Postmark determines date of payment.

2024-003835-1-524

REMITTANCE STUB MUST BE RETURNED WITH PAYMENT IF YOU WISH TO RECEIVE A RECEIPT FOR PAYMENT OF THIS BILL, PLACE A CHECK IN THIS BOX []. CREDIT SUBJECT TO CLEARANCE OF CHECK.