



## Property Information

## Request Information

## Update Information

File#:	BF-X01611-282362239	Requested Date:	04/06/2024	Update Requested:
Owner:	PAULETTE BRUNO	Branch:		Requested By:
Address 1:	49 OTIS RD	Date Completed:	05/22/2024	Update Completed:
Address 2:		# of Jurisdiction(s):		
City, State Zip:	ISLIP TERRACE, NY	# of Parcel(s):	1	

## Notes

**CODE VIOLATIONS** Per Town of Islip Zoning Department there are no Code Violation cases on this property.  
Collector: Town of Islip Zoning Department  
Payable: 24 Nassau Avenue Islip NY 11751  
Business# 631-224-5477

**PERMITS** Per Town of Islip Building Department there are no Open/Pending/ Expired Permit on this property.  
Collector: Town of Islip Building Department  
Payable: 655 Main St Islip NY 11751  
Business# 631-224-5550

**SPECIAL ASSESSMENTS** Per Town of Islip Treasurer's Office there are no Special Assessments/liens on the property.  
Collector: Town of Islip Receiver of Taxes  
Payable: 40 Nassau Ave Islip, NY 11751  
Business# 631-224-5580

UNABLE TO PROVIDE DOCUMENTATION TO THIRD PARTIES. VERBAL INFO ACQUIRED.

**DEMOLITION** NO

**UTILITIES**

**Water:**  
Account #: 3000073387  
Payment Status: DUE  
Status: Lienable  
Amount: \$100.41  
Good Thru: NA  
Account : Active  
Collector: Suffolk County Water Authority  
Payable Address: 4060 Sunrise Highway, Oakdale, NY 11769  
Business # 631-698-9500

**Sewer:**  
The house is on a community sewer. All houses goes to the shared septic system.

**GARBAGE:**  
Garbage bills are included in the real estate property taxes



# County Property Tax Inquiry / Payment

## Property Look-up

### Property Detail

Parcel ID	05002530003000520000000
Alternate Parcel ID	05000000000075553460000
Location	49 OTIS RD
Owner as of January 1	BRUNO PAULETTE & DIANA BR
Customer ID	4772352
Jurisdiction	ISLIP
Acres	0.293
<a href="#">Assessed Value</a>	\$47,000.00
Exemptions Value	\$5,000.00
<a href="#">2023 Charges</a>	\$12,756.55

R

Town Clerk  
 RECEIVED  
 TOWN OF ISLIP  
 APR 8 2024  
 Date Stamp Here



*Town of*  
**Islip**

**FREEDOM OF INFORMATION LAW (F.O.I.L.)  
 APPLICATION FOR ACCESS TO PUBLIC RECORDS**

**SECTION 1 – TO BE COMPLETED BY APPLICANT**  
**I HEREBY APPLY TO REVIEW OR HAVE COPIED THE RECORD(S) DESCRIBED BELOW:**

<b>Name of Applicant:</b> Kevin Smith	<b>Mailing Address of Applicant (include suite if applicable):</b> 2605 Maitland Center Parkway, Suite C
<b>Name of Business or Firm:</b> Stellar Innovations	<b>City:</b> Maitland, <b>State:</b> FL <b>Zip Code:</b> 32751
<b>Signature of Applicant:</b> 	<b>Date of Application:</b> 04-07-2024
<b>Telephone Number:</b> 03022619069	<b>Department if known:</b>

**DESCRIPTION OF RECORD SOUGHT TO INSPECT AND ANY SPECIAL INSTRUCTIONS.** Please describe the record(s) sought in as specific detail as possible, with address, date or timeframe, if applicable. If we cannot determine what record(s) you seek, your application will be denied. Under the NYS FOIL Law, the Town of Islip is only required to supply **DOCUMENTS THAT ALREADY EXIST (NYS POL Article 6).**

49 OTIS RD, ISLIP TERRACE NY 11752 / parcel : 05002530003000520000000

CODE ENFORCEMENT // PERMITTING // SPECIAL ASSESSMENT

Our firm has been requested to research the referenced property for any

**BUILDING PERMITS, CODE VIOLATION & SPECIAL ASSESSMENT FEES** on record on this property

**FEE SCHEDULE**

Be advised that there is a statutory fee due (\$.25 per page, not in excess of 9x14) for copies. For anything else, including digital formats, cost of reproduction will be charged. Deposits may be required for voluminous requests. Copy fees are to be paid for any pages required to be redacted prior to viewing a file. FOIL requests will not be processed for any person or company who fails to pay any outstanding FOIL fees due for a prior FOIL request. Copies will be prepared unless specifically requested otherwise.

**SECTION 2 – TO BE COMPLETED BY AGENCY RECORDS ACCESS (FOIL) OFFICER**

Receipt of this request is hereby acknowledged. Please allow Twenty (20) business days for processing before contacting this office. A copy of this form is being mailed to you indicating your request is being processed.

4/9/2024

LORELL HAIN

m42429

Date Records Access Officer

Application Number

Office of the Town Attorney, 655 Main Street, Islip, NY 11751 (631) 224-5550

*Please note: The Public Officer's Law requires a municipality to acknowledge receipt of this FOIL request within five (5) business days.*

**PLUMBING PERMIT APPLICATION**  
Town of Islip Building Division

ISLIP TOWN PLUMBER'S LICENSE REQUIRED  
ALL PAPERWORK FOR PLUMBER MUST BE  
UP-TO-DATE IN TOWN FILE)

**PROPERTY OWNER**

Name Bruno, Paulette  
Address 49 Otis Rd  
Islip Terrace ZIP 11752  
Telephone \_\_\_\_\_

**ALL QUESTIONS MUST BE ANSWERED**

- 1) Plumbing Permit — Fill in Boxes on Right ▶
- 2) Commercial & Industrial — Plumbing and/or HVAC must have 3 sets of plans signed and sealed by architect
- \* 3) Will there be gas piping  YES  NO  
Mercury test by the Town will be required

4) Riser Diagram is required for residential permits  
~~+ New at the furnace (furnace by other)~~

\*Gas Piping permits require a gas riser diagram drawn on the plumbers letterhead.

\*\*Air Conditioning permits require diagram of duct work.  
\* 1st floor both direct replacement

**PROPERTY LOCATION**

Street 49 Otis Rd, Islip Terrace

Nearest Cross Street \_\_\_\_\_ Direction from Cross Street N S (E) W  
Distance from Cross Street \_\_\_\_\_ SW NW

PLEASE BRING COPY OF THE ISSUED BUILDING PERMIT WITHOUT THE PROPER BUILDING PERMIT BEING IS:

25300 0300 052000 K 003

BRUNO 11/29/05  
49 OTIS RD 11752  
ISLIP TERRACE, NY  
GAS PIPING, HEAT, 6 FIXTURES

I swear that this application is a true and complete statement in effect all required insurance, including Workers Compensation

es. that I have  
... Plumbing License.

Name Paulette Bruno  
Print  
Paulette Bruno  
Signature of PROPERTY OWNER

Name Vincent L. Agonzo  
Print  
Vincent L. Agonzo  
Signature of TOWN LICENSED PLUMBER

Town License # \_\_\_\_\_ Ter. \_\_\_\_\_

Sworn to before me this 27th day of September, 2005

Sworn to before me this 21st day of November, 2005

Joanne C. Bechhoff  
Notary Public

JOANNE C. BECHHOFF  
Notary Public - State of New York  
NO. 01BE5062577  
Qualified in Suffolk County  
My Commission Expires 7-1-06

JOANNE C. BECHHOFF  
Notary Public - State of New York  
NO. 01BE5062577  
Qualified in Suffolk County  
My Commission Expires 7-1-06

**OFFICE USE ONLY**

0500- 253-3-52

Address 49 Otis Rd

Town Islip Terrace

Date Filed 11/22/05

Approved by \_\_\_\_\_

Fee 275 Receipt No. PRO57129

Date Issued 11/29/05 By JM Expires 11/29/06

A Permit shall expire one (1) year after date of issuance. Upon payment of the proper fees, a permit may be renewed, but not more than three (3) renewals may be granted.

	Total # of fixtures	Bsmnt	1st	2nd	3rd
<input checked="" type="checkbox"/> Heat <u>NG</u>	Water clos.	<u>REP</u>	<u>1</u>	<u>1</u>	
<input type="checkbox"/> Air Cond.**	Lavatories	<u>REP</u>	<u>1</u>	<u>2</u>	
<input type="checkbox"/> Pub. Water	Tub/Show.	<u>REP</u>	<u>1</u>	<u>2</u>	
<input type="checkbox"/> Dom Hot Water	Sink				
<input type="checkbox"/> Well Water	Wash. Mach.		<u>1</u>		
<input type="checkbox"/> Sprinkler <u>90</u>	Dish Wash				
<u>100</u>	Urinal				
<u>35</u>	Gr. Trap				
<u>50</u>	Bidet				
<u>275</u>	Whirlpool Tub				
	Future Out				

Side of Street N S (E) W  
Direction from Cross Street N S E W  
SW NW

N BE ISSUED

# PERMIT APPLICATION

TOWN OF ISLIP BUILDING DIVISION  
1 Manittion Court, Islip, NY 11751

BRUNO, PAULETTE  
49 OTIS RD.  
ISLIP TERRACE NY 11752  
NEW DWELLING (DUE TO SIZE OF ADDITIONS)

### PERMIT(S) REQUESTED (Check one or more)

- Numbers refer to questions on right
- Building Permit (must be issued before work starts)
  - Commercial  Industrial  Residential
  - Main Building  Addition 1-4, 6, 8-10
  - Accessory Building  Addition 1-4, 6, 8-10
  - Interior Alteration 1-4, 8-10, 11
  - Interior Arrangement 1-4, 6, 8-10, 11
  - Fire Damage Repair 1-4, 6, 8-10, 11
  - Fireplace/Wood Coal Stove 3, 9, 10, 11
  - Swim/Pool  In-ground  Above 1-6, 9, 10, 11
  - Hot Tub 4 Foot Safety Fence Required
  - Change of Use/Occupancy 1-4, 6, 7, 9, 10, 11
  - Demolition (valid only 4 months) 1-3, 9, 11
  - Parking Lot installation Only 1-3, 7, 9, 10, 11
  - Revision of Issued permit 1-9, 10, 11
  - Other:

3 # of Existing Bedrooms  
3 # of Proposed Bedrooms  
3 # TOTAL BEDROOMS  
 \_\_\_ Year Original DWLG Constructed

### PROPERTY OWNER - T

Name Eddie + Diana Bruno  
Anthony + Paulette  
 Address 61 Frances Blvd.  
Holtsville, NY 11742

### TENANT - Tel.

Name \_\_\_\_\_  
 Address \_\_\_\_\_

### CONTRACTOR - Tel.

Name \_\_\_\_\_  
 Address \_\_\_\_\_

### BOARD OF APPEALS

GRANTED: \_\_\_\_\_  
 DENIED: \_\_\_\_\_

### SECRETARY

I understand that before a building permit can be issued, adjoining street must meet minimum Town standards or be bonded for same and that a Certificate of Occupancy for work done under this permit will not be issued until road damage caused during construction is repaired or bonded for same. I understand that the Town is relying on the information provided herein, any inaccuracy may cause delay or additional fees. I swear that this application is a true and complete statement of all proposed work on the described premises, that I have in effect all required insurance, including workers compensation insurance, and that I presently possess a valid Suffolk County home improvement license, if applicable.

Name Paulette Bruno  
Paulette Bruno (Print)  
 (Signature of Property Owner)

ANTHONY BRUNO  
Anthony Bruno (Print)  
 (Signature of Contractor)

Name \_\_\_\_\_  
 (Print)  
 County Home Improvement License# \_\_\_\_\_

Sworn to before me this 9<sup>th</sup> day June of 2005  
Joel G. Orr  
 Notary Public Signature

JONATHAN A SCHERR  
 NOTARY PUBLIC STATE OF NY  
 NO 01905010810  
 QUALIFIED IN SUFFOLK COUNTY  
 COMMISSION EXPIRES APRIL 5  
 2007

Sworn to before me this \_\_\_ day \_\_\_ of 200\_\_  
 Notary Public Signature

Address \_\_\_\_\_  
 Post Office \_\_\_\_\_  
 Receipt # PL-055279  
 Base Fee \_\_\_\_\_  
**AS-BUILT SURVEY**  
**FINAL SURVEY REQUIRED FOR CITY**  
 ZONING A APPROVED \_\_\_\_\_  
 APPROVED TO ISSUE RI DATE 6-15-05  
 SPECIAL CONDITIONS OF PERMIT ANY STRUCTURES ON PROPERTY MUST CONFORM TO ZONING CODE.  
 FLOOR AREA to be constructed or altered 1833 total square feet  
 LL \_\_\_\_\_ UL \_\_\_\_\_ GAR \_\_\_\_\_ DECK \_\_\_\_\_  
 Basement Finished \_\_\_\_\_ Unfinished \_\_\_\_\_ Porch \_\_\_\_\_  
 Percent of Lot occupied:  
 Existing Main Structure \_\_\_\_\_ % Accessory Structures \_\_\_\_\_ %  
 Proposed Main Structure \_\_\_\_\_ % Accessory Structures \_\_\_\_\_ %  
 DATE FILED 6-15-05 DATE ISSUED 8-8-05  
 By: TR Expires 7-8-06  
 A permit shall expire one (1) year after the date of issuance. Upon payment of the proper fees, a permit may be renewed, but not more than three one year renewals may be granted. No renewals are allowed on pools or second story decks.  
Add - 1339 Cell 240

1. SIZE & USE of existing structures 1178 # RESIDENCE
2. PROPOSED USE RESIDENTIAL
3. DESCRIPTION OF PROPOSED WORK 1328.7 # 2ND STY  
Additional, 24 # COVERED PORCH  
240 # 2ND STY DECK
4. FLOOR AREA to be constructed or altered 1352.7 Total sq. feet of all floors excluding cellars and attic. Parking Lot Area \_\_\_\_\_ Sq. Ft.
5. IF MASTER PLAN, Identify: \_\_\_\_\_
6. SETBACKS: Distance new structure to be from property line after construction (corner lots)  
 Front Yard 40' Other Front Yard \_\_\_\_\_ Rear Yard 69.0'  
 Side Yard 18' Other Side Yard 4'-18.7'
7. SIZE of property ( 85 ) x ( 150 ) = 12750 sq. ft. or \_\_\_\_\_ Acres
8. HEIGHT of building from average grade to ridge \_\_\_\_\_ Feet
9. PROPERTY LOCATION Post Office ISLIP TERRACE  
 Street OTIS ROAD Side of Street  N  S  E  W  
 Nearest Cross Street OTIS PLACE Direction from Cross St.  N  S  E  W  
 Distance from cross St. 1009.62 ft. If on Corner  NE  SE  SW  NW  
 School District \_\_\_\_\_
10. Are there any Property Covenants or Condition of Special Permits which would affect the development of this property? \_\_\_\_\_ If yes, please attach.
11. Name of Filed Map \_\_\_\_\_  
 Lot No. on Filed Map \_\_\_\_\_

**TOWN OF ISLIP**



**ANGIE M. CARPENTER  
SUPERVISOR**

**Division of Code Enforcement  
28 Nassau Avenue, Islip, NY 11751  
631-224-5475**

**Division of Fire Prevention  
24 Nassau Avenue, Islip, NY 11751  
631-224-5477**

Date: April 16, 2024

RE: Address: 49 Otis Road, Islip Terrace NY  
Tax Map #: 0500253000300052000

Dear Sir or Madam:

In response to your request that we search our records for any violations on the above captioned location, please be advised this form only reflects violations that have been verified by the Town of Islip to exist. Our records have revealed the following:

**There Are NO Violations Indicated.**

Please contact the Code Enforcement Division at (631)224-5548 to determine what must be done to clear the violations indicated above.

Very truly yours,

A handwritten signature in cursive script that reads "Linda A. Harding".

Linda A. Harding  
Principal Office Assistant

R

Town Clerk  
 RECEIVED  
 TOWN OF ISLIP  
 APR 8 2024  
 Date Stamp Here



*Town of*  
**Islip**

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<b>Name of Business or Firm:</b> Stellar Innovations	<b>City:</b> Maitland, <b>State:</b> FL <b>Zip Code:</b> 32751
<b>Signature of Applicant:</b> 	<b>Date of Application:</b> 04-07-2024
<b>Telephone Number:</b> 03022619069	<b>Department if known:</b>

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LOUI HAIN

m42429

Date Records Access Officer

Application Number

Office of the Town Attorney, 655 Main Street, Islip, NY 11751 (631) 224-5550

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# Account Balance

Town

ISLIP TERRACE



Street Name

OTIS RD



Street Number

49



Search

Clear

Enter Tax Map #: (19 Digits)

Search

Clear

Account  
Number

Account  
Name

Street

Town

Zip

Balance

Tax Map #

[Live Chat](#)

3000073387 BRUNO 49 ISLIP 11752- 100.41 05002530003000  
PAULETTE OTIS RD TERRACE 1907

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Public Authorities Law Section 1078-f provides that water charges of the Suffolk County Water Authority (SCWA) are a lien on the real property where the water services were provided. Any water charges in arrears for more than 90 days may appear on the next real property tax bill for the property. The above amount represents the unpaid water charges for the identified SCWA account number at the subject premises as of the date of your inquiry. This figure may not include the final bill for water charges for this account. It may take several weeks to generate a final bill when an account is finalized. Therefore, a purchaser of this property should have money held in escrow at closing until the seller provides evidence of a paid final water bill for this account. Following is the billing history over the last year for this account which may be useful in establishing an appropriate escrow amount at closing.

Billing Information:

Bill Date	Bill Amount
05/13/2024	\$100.41
02/13/2024	\$103.55
11/10/2023	\$110.34
08/14/2023	\$109.41

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Result as of: 5/22/2024

**\*Balance may not reflect most recent activity.**

**[Click here for the SCWA Escrow Payment form.](#) This form is to be completed by the party making an escrow payment on the owner's property to Suffolk County Water Authority.**

**For your convenience SCWA offers several bill payment options. Please [click link](#) for the method that most effectively meets your needs.**

4060 Sunrise Highway | Oakdale, NY 11769

Customer Service: [\(631\) 698-9500](tel:(631)698-9500)



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