



Property Information

Request Information

Update Information

File#:	BF-X01611-6230114476	Requested Date:	04/06/2024	Update Requested:
Owner:	GUSTAVO AMAYA	Branch:		Requested By:
Address 1:	63 FULTON ST	Date Completed:	05/22/2024	Update Completed:
Address 2:		# of Jurisdiction(s):		
City, State Zip:	BRENTWOOD, 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 #: 3000103423
Payment Status: PAID
Status: Lienable
Amount: \$0.00
Good Thru: NA
Account Active: 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	05000750002000180000000
Alternate Parcel ID	05000000000030551070000
Location	63 FULTON ST
Owner as of January 1	AMAYA GUSTAVO
Customer ID	5290810
Jurisdiction	ISLIP
Acres	0.459
Assessed Value	\$44,000.00
Exemptions Value	\$0.00
2023 Charges	\$11,785.47

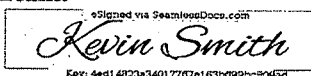
Town Clerk
 RECEIVED
 TOWN OF ISLIP
 APR 8 2024
 Date Stamp Here



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:**

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

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).**
 63 FULTON ST, BRENTWOOD NY 11717 / parcel : 05000750002000180000000
 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 _____ **LORELI HAIN** _____ m 42429
 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.

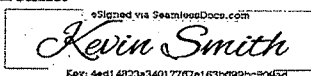
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Name of Business or Firm: Stellar Innovations	City: Maitland,	State: FL	Zip Code: 32751
Signature of Applicant: 	Date of Application: 04-07-2024		
Telephone Number: 03022619069	Department if known: Code and Permitting		

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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: 63 Fulton Street, Brentwood NY
Tax Map #: 0500075000200018000

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

PERMIT APPLICATION

TOWN OF ISLIP BUILDING DIVISION
1 Main Street, Islip, New York 11751

- PERMITS 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 1-12
 - Driveway Apron 3, 11, 12
 - Accessory Building Addition 1-10, 12
 - Interior Alteration 1-4, 8-10, 12
 - Fire Damage Repair 1-4, 8, 9-10, 12
 - Fireplace/Wood Coal Stove 3, 9, 10, 12
 - Swimming Pool In-ground Above 1-8, 9, 10, 12
 - 4-foot safety fence required
 - Framing Permit (Vital License Required) 1-4, 9

#	Total # of Fixtures	Basement	1st	2nd	3rd
<input type="checkbox"/> Heat	Water clo.			1	
<input type="checkbox"/> Air Cond.	Laundry			1	
<input type="checkbox"/> Dish Wash	Tub/shower			1	
<input type="checkbox"/> Wash Water	Sink				
<input type="checkbox"/> Sinks	FULL/Double				
<input type="checkbox"/> Sinks	Other fix.				1

List other fixtures on Sps 3
Sps. D/W, Ux, S/W, Twp, etc.

- Certificate of Compliance 1, 8-9, 10, 12
- Change of Use or Occupancy 1-4, 8, 7, 9, 10, 12
- Demolition (valid only 4 months) 1-3, 7, 9, 10, 12
- Parking Lot Installation Only 1-3, 7, 9, 10, 12
- Public Assembly 1, 4, 9, 10
- Rental 1-4m. 2-2m. Multiple 1, 2, 9, 10
- Revision of Issued Permit 1-9, 10, 12
- Storage of Combustibles 1-3, 8, 7, 9, 10
- Underground Tank Installation 1-3, 8, 7, 9, 10
- Land Clearing (5 ac. or more) 1-3, 7, 9, 12
- Other:

PROPERTY OWNER To: _____
Name Knobloch
Address 63 E. Main St
Brewster NY 11717

TENANT To: _____
Name _____
Address _____

CONTRACTOR To: _____
Name _____
Address _____

FOR OFFICE USE ONLY

0500-75-02-18PML Building _____
Plumbing _____
Front Foot _____

Address 63 E. Main St
Post Office Brewster TOTAL FEE 20.00

ZONING AB Approved _____ Date _____
ORIGINAL C/D or C/C _____
Certified as: _____ date _____
SPECIAL CONDITIONS OF PERMIT _____

DATE FILED 3/17/79 by WJ Expires 3/15/80
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 renewals may be granted.

- Answer, in black ink, questions numbered next to type of PERMITS REQUESTED.
1. SIZE & USE of existing structures 1159 sq ft - 1 1/2 bath, Dining Room
 2. PROPOSED USE Living room, kitchen, 1 1/2 bath
 3. DESCRIPTION OF PROPOSED WORK raised ridge
2 Bedrooms + Family room
1 1/2 Bath
 4. FLOOR AREA to be constructed or altered 1159 total square feet of all floors including entry and attic
 5. IF MASTER PLAN, identify _____
 6. SETBACKS: Distance new structure to be from property line after construction
Front Yard _____ (corner lots)
Other Front Yard _____ Rear Yard _____
Side Yard _____ Other Side Yard _____
 7. SIZE of property 1 X 1 in _____ sq. ft. or _____ Acres
 8. HEIGHT of building from average grade to ridge _____ feet
 9. PROPERTY LOCATION
Street Easton St Hamlet Brewster
Side of St. ON OFF CS CR
Nearest cross St. Easton St Direction from Cross St. ON CS CR CRW
Distance from cross St. _____ ft. If on corner ONE TWO THREE FOUR
School District Brewster
 10. Are there any Property Covenants or Conditions of Special Permits which would affect the development of this property? Yes If yes, please attach _____
 11. WIDTH of paved driveway (if framing property) _____ feet
 12. Name of Filed Map _____
Lot No. on Filed Map _____

I understand that before a building permit can be issued, adjoining streets 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 swear that this application is a true and complete statement of all proposed work on the described premises.

Signature of PROPERTY OWNER
Helen M. Knobloch

Signature of CONTRACTOR
County Home Improvement License # _____

Signature of TOWN ENGINEER
Jerry Malinowski

Sworn to before me this 30 day of February 1979
Notary Public

Sworn to before me this _____ day of _____ 19____
Notary Public

Sworn to before me this 17th day of March 1979
Notary Public



Account Balance

Town

BRENTWOOD



Street Name

FULTON ST



Street Number

63



Search

Clear

Enter Tax Map #: (19 Digits)

Search

Clear

Account
Number

Account
Name

Street

Town

Zip

Balance
[Live Chat](#)

Tax Map #

3000103423 AMAYA 63
GUSTAVO FULTON BRENTWOOD 11717- 0.00 050007500
ST 2512

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
02/28/2024	\$122.19
11/28/2023	\$120.62
08/29/2023	\$125.04
05/25/2023	\$106.63

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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