



Property Information Request Information Update Information

File#:	BS-X01661-4979882460	Requested Date:	06/04/2024	Update Requested:
Owner:	JENNIFER JOHNSON	Branch:		Requested By:
Address 1:	55 LAKE SHORE DR	Date Completed:	07/29/2024	Update Completed:
Address 2:		# of Jurisdiction(s):		
City, State Zip:	RONKONKOMA, NY	# of Parcel(s):	1	

Notes

CODE VIOLATIONS Per Town of Islip Department of Zoning there are no Code Violation cases on this property.

Collector: Town of Islip
Payable Address: One Manitton Court Islip, NY 11751
Business# 631-224-5470

PERMITS Per Town of Islip Building Department there is an Expired Permit on this property.

Permit #: SOL002
Permit Type: Solar Panel

Collector: Town of Islip
Payable Address: One Manitton Court Islip, NY 11751
Business# 631-224-5470

SPECIAL ASSESSMENTS Per Town of Islip Department of Finance there are no Special Assessments/liens on the property.

Collector: Town of Islip
Payable Address: One Manitton Court Islip, NY 11751
Business# 631-224-5470

DEMOLITION NO

UTILITIES Water

Account #: 3000523614
Payment Status: DUE
Status: Pvt & Non-Lienable
Amount: \$893.49
Good Thru: NA
Account Active: Yes
Collector: Suffolk County Water Authority
Payable 2045 NY-112 Suite 5, Coram, NY 11727
Business # (631) 698-9500

Sewer:
The House is on a community Sewer. All houses go to the shared septic system.

Garbage:
Garbage bills are included in the Real Estate Property taxes.

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: June 13, 2024

RE: Address: 55 Lake Shore Drive, Ronkonkoma NY
Tax Map #: 0500022000100036000

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,

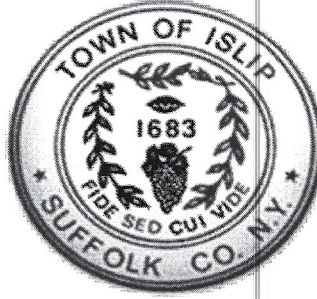
A handwritten signature in cursive script that reads "Linda A. Harding".

Linda A. Harding
Principal Office Assistant

Building Department

Date Stamp Here


JUN 05 2024



Town of Islip

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

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 Innovation	City: Maitland	State: FL	Zip Code: 32751
Signature of Applicant: 	Date of Application: 06-04-2024		
Telephone Number: 302-261-9069	Department if known: Building Department		

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 time frame, 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)**.
55 LAKE SHORE DR, RONKONKOMA NY 11779
Any OPEN/PENDING/EXPIRED PERMIT

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.**

Date

Records Access Officer

Application Number

Building Department, One Manitton Court, Islip, NY 11751 (631) 224-5470

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

Application Number

**FOR AGENCY USE ONLY BELOW
SECTION 3 – NOTICE TO APPLICANT**

DEPOSIT REQUIRED

- Before we may continue processing your FOIL Application, a deposit in the amount of \$ _____ is required within thirty (30) days of this response. Please forward a check payable to the "Town of Islip" in the deposit amount to the attention of the Records Access Officer, Building Department, One Manitto Court, Islip, New York 11751. For questions, please call (631) 224-5470. If we do not receive your deposit within thirty (30) days of this response, your FOIL will be deemed closed.

RECORDS PROVIDED

- The records have been fully provided. The records have been partially provided or redacted.

The document(s) you requested are available. The cost of reproduction is \$ 25¢. Please bring your cash, check or money order payable to the "Town of Islip" and submit to the Building Department, One Manitto Court, Islip, NY 11751. If necessary, please contact the Records Access Officer at (631) 224-5470 to make other arrangements for the receipt of your documents if you are unable to pick them up at our Building Department.

- Please call (631) 224-5470 to schedule an appointment to view the documents requested. If we are not contacted within thirty (30) days to schedule a viewing, your FOIL will be deemed closed.

- A redaction fee in the amount of \$ _____ is due at the time of viewing appointment.

RECORDS DENIED, PARTIALLY PROVIDED OR REDACTED

- | | |
|---|---|
| <ul style="list-style-type: none"><input type="checkbox"/> Request needs to be more specific because cannot determine what record(s) you seek<input type="checkbox"/> Records not possessed by the Town of Islip<input type="checkbox"/> After a diligent search, there are no known documents that are responsive to your request<input type="checkbox"/> If a record exists, would be a law enforcement record. Please contact our Code Enforcement Department at (631) 224-5548 for a violation search – a fee applies.<input type="checkbox"/> Law Enforcement Records<input type="checkbox"/> Are trade secrets or commercial enterprise documents which if disclosed, would cause injury to the competitive position of the subject enterprise<input type="checkbox"/> Municipalities are only required to search for specific documents requested that are in existence. | <ul style="list-style-type: none"><input type="checkbox"/> Complainant's name cannot be disclosed pursuant to the Public Officers Law Article 6A, Sec. 89-2(a)<input type="checkbox"/> Could endanger the life or safety of any person<input type="checkbox"/> Municipalities are not required to respond to questions or inquiries, only required to provide specific documents requested that are in existence<input type="checkbox"/> Unwarranted invasion of personal privacy<input type="checkbox"/> Exempt inter-agency or intra-agency materials<input type="checkbox"/> Would impair present or imminent contract awards or collective bargaining negotiations<input type="checkbox"/> Exempted by statute other than the Freedom of Information Law<input type="checkbox"/> Exempt examination questions or answers<input type="checkbox"/> Other: |
|---|---|

Name of Records Access Officer:

Andy Auciello

Records Access Officer Signature:

Andy Auciello

Date:

6/5/24

This Freedom of Information Request will remain on file for six (6) months from the date of final determination. Thereafter, it will be destroyed.

You have the right to appeal a denial of this application in writing within thirty (30) days to Ernest J. Cannava, Senior Assistant Town Attorney, Islip Town Hall, 655 Main Street, Islip, New York 11751. You are entitled to an explanation of the reason for such denial in writing within ten (10) business days of the appeal.

I hereby appeal:

Signature

Date

Open Permit Records for 0500 02200 0100 036000 55 LAKE SHORE DR - RONKONKOMA

Plan Net Records: MS-00295

ZBA Net Records: 301-84

Permit Number	Property	Dates	Record Type	Options
SOL002 - 191796 Active Permit	HOME Sean Johnson 55 Lake Shore Dr Ronkonkoma - 11779	Filing: 10/21/2020 Permit: 10/23/2020 Permit Exp: 10/23/2021 CO: Not Issued	SOL - Solar Panel Installation Permit <i>Solar panels - sunation</i>	View Edit





Account Balance

Town

Street Name

Street Number

Enter Tax Map #: (19 Digits)

Account Number	Account Name	Street	Town	Zip	Balance	Tax Map #
3000523614	JOHNSON JENNIFER	55 LAKE SHORE DR	RONKONKOMA	11779- 3154	893.49	050002200010003600C

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
-----------	-------------

06/25/2024	\$79.52
------------	---------

03/25/2024	\$80.81
------------	---------

12/26/2023	\$81.25
------------	---------

09/26/2023	\$74.19
------------	---------

Result as of: 7/29/2024

***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)



[Contact SCWA](#)

[Privacy Policy](#)

[Site Map](#)

[Terms of Use](#)

