



## Property Information

## Request Information

## Update Information

|                  |                      |                       |            |                   |
|------------------|----------------------|-----------------------|------------|-------------------|
| File#:           | BS-X01661-4787698213 | Requested Date:       | 06/04/2024 | Update Requested: |
| Owner:           | JENNIFER SCIUTO      | Branch:               |            | Requested By:     |
| Address 1:       | 1104 O STREET        | Date Completed:       |            | Update Completed: |
| Address 2:       |                      | # of Jurisdiction(s): |            |                   |
| City, State Zip: | TROY, NY             | # of Parcel(s):       | 1          |                   |

## Notes

**CODE VIOLATIONS** Per City of Troy Department of Zoning there are no Code Violation cases on this property.

Collector: City of Troy  
Payable Address: 433 River Street, 5th Floor Troy, NY 12180  
Business# 518-279-7180

**PERMITS** Per City of Troy Building Department there is an Open Permit on this property.

Permit# BLD2012-0458  
Permit Type: Building Permit

Collector: City of Troy  
Payable Address: 433 River Street, 5th Floor Troy, NY 12180  
Business# 518-279-7180

**SPECIAL ASSESSMENTS** Per City of Troy Department of Finance there are no Special Assessments/liens on the property.

Collector: City of Troy  
Payable Address: 433 River Street, 5th Floor Troy, NY 12180  
Business# 518-279-7180

**DEMOLITION** NO

**UTILITIES** Water & Sewer  
Account #: 5617107801  
Payment Status: PAID  
Status: Pvt & Non-Lienable  
Amount: \$0.00  
Good Thru: N/A  
Account Active: Yes  
Collector: City of Troy Water Billing  
Payable: 433 River Street Troy, NY 12180  
Business # 518-279-7100

UNABLE TO PROVIDE DOCUMENTATION TO THIRD PARTIES. VERBAL INFO ACQUIRED

**GARBAGE**  
GARBAGE PRIVATE HAULER WITH LIEN STATUS AND BALANCE UNKNOWN.

**Structure**

| Building 1                 |                 |
|----------------------------|-----------------|
| Building Style             | 08 - Old style  |
| Number of Stories          | 1.7             |
| Exterior Wall Material     | 03 - Alum/vinyl |
| Actual Year Built          | 1930            |
| Eff. Year Built            |                 |
| Year Remodeled             |                 |
| Number of Kitchens         | 1               |
| Number of Full Baths       | 1               |
| Number of Half Baths       |                 |
| Number of Bedrooms         | 2               |
| Number of Fireplaces       | 1               |
| Heat Type                  | 2 - Hot air     |
| Fuel Type                  | 4 - Oil         |
| Central Air                | No              |
| Basement Type              | 3 - Partial     |
| Total Sq Ft                | 1671            |
| 1st Story Sq Ft            | 1032            |
| 2nd Story Sq Ft            |                 |
| 1/2 Story Sq Ft            |                 |
| 3/4 Story Sq Ft            | 639             |
| Additional Story Sq Ft     |                 |
| Finished Attic Sq Ft       |                 |
| Finished Basement Sq Ft    |                 |
| Finished Rec Room Sq Ft    |                 |
| Finished Over Garage Sq Ft |                 |
| Condition                  | 3 - Normal      |



**2024 Tentative Assessment Information**

|                      |           |
|----------------------|-----------|
| Land Assessed Value  | \$14,000  |
| Total Assessed Value | \$79,000  |
| Equalization Rate    | 65.00%    |
| Full Market Value    | \$121,500 |
| Partial Construction | No        |
| County Taxable       | \$79,000  |
| Municipal Taxable    | \$79,000  |
| School Taxable       | \$79,000  |

**Property Description**

|                   |                    |
|-------------------|--------------------|
| Property Type     | 210 - 1 Family Res |
| Neighborhood Code | 17222              |
| SWIS              | 381700             |
| Water Supply      | 3 - Comm/public    |
| Utilities         | 3 - Electric       |
| Sewer Type        | 3 - Comm/public    |
| Zoning            | SF                 |
| School            | Lansingburgh CSD   |
| Book              | 8385               |
| Page              | 329                |

**Last Property Sale**

|                      |                   |
|----------------------|-------------------|
| Deed Date            | 12/15/2017        |
| Deed Book            | 8385              |
| Deed Page            | 329               |
| Contract Date        | 10/19/2017        |
| Sale Date            | 12/01/2017        |
| Full Sale Price      | \$96,800          |
| Net Sale Price       | \$94,000          |
| Usable For Valuation | Yes               |
| Arms Length          | Yes               |
| Prior Owner          | Timothy Illenberg |

Owner Information

| Owner Name      | Address 1 | Address 2 | PO Box | City | State | Zip   | Unit Name | Unit Number |
|-----------------|-----------|-----------|--------|------|-------|-------|-----------|-------------|
| Jennifer Sciuto | 1104 O St |           |        | Troy | NY    | 12182 |           |             |

| Sales      |           |           |               |            |                               |            |                |                      |             |                   |
|------------|-----------|-----------|---------------|------------|-------------------------------|------------|----------------|----------------------|-------------|-------------------|
| Deed Date  | Deed Book | Deed Page | Contract Date | Sale Date  | Last Physical Inspection Date | Sale Price | Net Sale Price | Usable for Valuation | Arms Length | Prior Owner       |
| 12/15/2017 | 8385      | 329       | 10/19/2017    | 12/01/2017 |                               | \$96,800   | \$94,000       | Yes                  | Yes         | Timothy Illenberg |
| 10/28/2011 | 6071      | 40        | 08/22/2011    | 10/26/2011 |                               | \$67,980   | \$64,020       | Yes                  | Yes         | Patricia Warriner |

### No Exemption Data Found

| Land   |              |       |       |        |       |             |
|--------|--------------|-------|-------|--------|-------|-------------|
| Site # | Land Type    | Acres | Front | Depth  | Sq Ft | Soil Rating |
| 1      | 01 - Primary | 0.14  | 60.00 | 100.00 |       |             |

| Improvements |                    |        |              |          |                   |                   |                      |
|--------------|--------------------|--------|--------------|----------|-------------------|-------------------|----------------------|
| Site #       | Structure Code     | SqFt   | Dimensions   | Quantity | Overall Condition | Actual Year Built | Effective Year Built |
| 1            | RP3 - Porch-screen | 96.00  | 8.00 x 12.00 | 1.00     | 3 - Normal        | 1930              |                      |
| 1            | FC1 - Shed-machine | 96.00  | 8.00 x 12.00 | 1.00     | 3 - Normal        | 1980              |                      |
| 1            | RP4 - Porch-enclsd | 108.00 | 6.00 x 18.00 | 1.00     | 3 - Normal        | 1960              |                      |

| Special Districts |      |               |                 |             |
|-------------------|------|---------------|-----------------|-------------|
| Code Description  | Type | Primary Units | Secondary Units | Amount      |
| GARBF -           |      | 1.00          | 0.00            | \$0.00      |
| PL017 -           |      | 0.00          | 0.00            | \$79,000.00 |



# Building Application (Pg 1)

Troy NY, CityView 8.3

## Property Information

Street #  Address   
 Account #  Narrative   
 Lot  Block    
 Tax Map ID

Status  Reason for Status  Property History

## Owner Information

Owner   
 Address   
 City  Zip   
 Phone

## Application Information

Created By:

BLD2012-0458

Permit #:  Date Received:  Status   
 Building Name:  Date Issued:  Issued By:   
 Permit Type:  Zoning:  Valuation:   
 Type of Work:  New  Addition  Alteration  Repairs  Sitework  Miscellaneous  Barricade  
 Siding  Roofing  Sign  Fence  Cellar  Swimming Pool  
 Current Use:  # of Units:   
 Proposed Use:  # of Units:   
 Certificate of Occupancy?  # of Units CO:  Date Compliance Insp Done:   
 Cert of Occ Conditions:   
 Type of Constr.:  # of Stories:  Fence Length:  Fence Height:   
 New Gross Floor Area (sq ft)  Building Length:  Building Width:  Building Sq Ft:   
 # of Rooms:  # of Buildings:  City Report:  Federal Report:   
 Project Description:

## Record Owner

Name:  City/State:   
 Address:  Zipcode:  Phone #:

## Contractor Information

General Liability Insurance Expires: 02-26-2013  
 Worker's Compensation: 11-01-2012 City of Troy Additional Insured: Yes

Insur. Code #  Address:   
 Name:  City:   
 Phone #:  Fax #:  State:  Zipcode:   
 Contact:

## Other Contractors

Electrical Insurance Expires:  
 Plumbing Insurance Expires:

Plumbing Contractor:  Name:  Company Name:   
 Electrical Contractor:  Name:  Company Name:

## Architect/Engineer Information

Name:  Address:   
 City:  State:  Zip:  Ph #:  Fax #:

Work Permit Denial





# Building Application (Pg 2)

Troy NY, CityView 8.3

## Property Information

Street #  Address

Account #  Narrative

Lot  Block

Tax Map ID

Status  Reason for Status  Property History

## Owner Information

Owner

Address

City  Zip

Phone

## Application Information

BLD2012-0458 Permit # :  Date Received:  Status

Building Name  Date Issued  Zoning:

Permit Type:  Valuation:

## Building Components

| Code | Units | Quantity | Description | Unit Cost | Total Cost |
|------|-------|----------|-------------|-----------|------------|
|      |       |          |             |           |            |
|      |       |          |             |           |            |
|      |       |          |             |           |            |

Components Grand Total:

## Referral Information

| Date Sent | Department | Status | Date Rec'd | Reviewed By | Comments |
|-----------|------------|--------|------------|-------------|----------|
|           |            |        |            |             |          |
|           |            |        |            |             |          |

## Supporting Documents

Revised Site Plan Required?  Date Approved

Approved By

| Type | Document Path |
|------|---------------|
|      |               |
|      |               |

Notes

## Fee Information

| Fee Type | Amount   |
|----------|----------|
| Permit   | \$ 86.00 |
| Permit   | \$ 86.00 |

## Project Funding Source

| Type Of Funding | Program |
|-----------------|---------|
|                 |         |
|                 |         |



# Permit Application

## Troy NY, CityView 8.3

### Job Address

Street #  Address:  Plan :  Lot :

### Application Information

Name:  Type of Applicant:  Phone #:   
 Address:  City:  State:  Zipcode:   
 Permit Type:  Permit #:  Zoning:   
 Project Description:  Building:   
 Building Use:  # of Stories:   
 Type of Constr.:

### Owner Information

Name:  Ph #:   
 Address:  City:  State:  Zip:

### Contractor Information

License #:  Name:  Ph #:  Fax #:   
 Address:  City:  State:  Zip:   
 Contact:   
 General Liability Insurance Expires:   
 Worker's Compensation:  City of Troy Additional Insured:

### Other Contractor Information

Electrical Contractor:   Electrical Insurance Expires:   
 Plumbing Contractor:   Plumbing Insurance Expires:

### Building Components

| Quantity | Units | Code | Description | Unit Cost | Total Cost |
|----------|-------|------|-------------|-----------|------------|
|          |       |      |             |           |            |
|          |       |      |             |           |            |
|          |       |      |             |           |            |

I HEREBY MAKE APPLICATION for issuance of a permit for work described above. I AGREE that no person will be employed without providing Worker's Compensation and Disability Benefits Law coverage, as required by State Law, and that all applicable ordinances of the City shall be complied with. I DECLARE, subject to penalty of perjury, that statement made herein are true and correct to the best of my knowledge.

Applicant understands and agrees that this work permit is issued conditioned on the approval of the City engineer and the permit may be rescinded by the City engineer at anytime. Failure to call for required inspections may result in suspension or revocation of work permit and stoppage of work until proper inspections are made and or may prevent a certificate of occupancy from being issued.

Type of Applicant: **Contractor**

Applicant Signature: \_\_\_\_\_

Applicant Name (Print): \_\_\_\_\_

*Eunice Stritoma*  
 Eunice Stritoma Best Fire

**Best Fire, Inc.**

**The City of Troy  
Application For Permit**

|                                     |                                |                        |
|-------------------------------------|--------------------------------|------------------------|
| Location of Work: <u>1104 O St.</u> |                                |                        |
| Property Owner: <u>T. ILLENBURY</u> | Address: <u>1104 O St</u>      | Phone:                 |
| Contractor: <u>BEST FIRE</u>        | Address: <u>780 HOUSICK RD</u> | Phone: <u>273 9600</u> |

|   |   |  |                 |
|---|---|--|-----------------|
| <input type="checkbox"/> New Building<br><input type="checkbox"/> Building Addition<br><input type="checkbox"/> Alterations<br><input type="checkbox"/> Repairs<br><input type="checkbox"/> Siding<br><input type="checkbox"/> Roofing<br><input type="checkbox"/> Sign<br><input type="checkbox"/> Swimming Pool<br><input type="checkbox"/> Fence<br><input type="checkbox"/> Sitework<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Demolition<br><input type="checkbox"/> Barricade<br><input type="checkbox"/> Excavation<br><input checked="" type="checkbox"/> Other | Description Of Work:<br><u>Wood fire place insert</u>                                 |  |                 |
|   | Cellar: <input type="checkbox"/> Yes <input type="checkbox"/> No      New Gross Area: |  |                 |
|   | Construction Type:  |  | # Of Floors:    |
|   | Building Size At Grade:   |  |                 |
|   | Current Use:  |  | #DU:      #COM: |
|   | Proposed Use:   |  | #DU:      #COM: |
|   | Fencing Height:   |  | Linear Feet:    |

| Construction Trades                 | Construction Cost | Contractors Information |
|-------------------------------------|-------------------|-------------------------|
| <input type="checkbox"/> General    |                   |                         |
| <input type="checkbox"/> Plumbing   |                   |                         |
| <input type="checkbox"/> Electrical |                   |                         |
| <input type="checkbox"/> HVAC       |                   |                         |
| <input type="checkbox"/> Demolition |                   |                         |
| <input type="checkbox"/> Excavation |                   |                         |
| <input type="checkbox"/> Other      |                   |                         |
| Total:                              | <u>4000</u>       |                         |

I hereby make application for issuance of a permit for work described above. I agree that no person will be employed without providing workers compensation and disability benefits law coverage, as required by state law, and that all applicable ordinances of the City shall be complied with. I declare. Subject to penalty of perjury that statements made herein are true and correct to the best of my knowledge.

OWNER      APPLICANT'S SIGNATURE  
 CONTRACTOR      APPLICANT'S NAME (PRINT) Wayne Luberman  
 OTHER      DATE 6-1-2012