

Prop	erty Information	Request Information	n	<b>Update Information</b>
File#:	BS-X01542-7423856120	Requested Date: 01/1	8/2024	Update Requested:
Owner:	FRANK BELLINO	Branch:		Requested By:
Address 1:	26 WINDING LANE	Date Completed:		Update Completed:
Address 2:		# of Jurisdiction(s):		
City, State Zip	: BEDFORD HILLS, NY	# of Parcel(s):		

#### **Notes**

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

Collector: Town of Bedford

Payable Address: 425 Cherry Street, Bedford Hills, NY 10507

Business# (914) 666-8040

PERMITS Per Town of Bedford department of Building there is an Open permit on this property.

1. Permit #21558

Permit Type: Deck Permit

Collector: Town of Bedford

Payable Address: 425 Cherry Street, Bedford Hills, NY 10507

Business# (914) 666-8040

SPECIAL ASSESSMENTS Per Town of Bedford Finance Department/Treasurers office there are no Special Assessments/liens on the

property

Collector: Town of Bedford

Payable Address: 425 Cherry Street, Bedford Hills, NY 10507

Business# (914) 666-8040

DEMOLITION NO

**UTILITIES** 

WATER

Account#:B08-70 Status: Pvt & Lienable: Amount:\$1055.64 Good Thru: 03/01/2024 Payment Status: Due Account Act: Yes

Payable To: Bedford Water Districts

Address:425 Cherry St, Bedford Hills, NY 10507

PH:(914) 666-7855

Sewer:

The House is on a community sewer. All houses to the Shared Septic system.

Garbage

GARBAGE PRIVATE HAULER WITH LIEN STATUS AND BALANCE UNKNOWN

#### Kowalski, Kim

From:

Surace, Roxanne

Sent:

Monday, January 29, 2024 9:06 AM

To: Subject: Kowalski, Kim New FOIL - Smith

Attachments:

Smith\_26 Winding Lane.jpg

Hi Kim,

The text has been cut off. Here is the complete request:

Hello, We are currently working with closing on this property scheduled and would need the below records verified. Please provide the requested below info at the earliest.

Address: 26 WINDING LANE, BEDFORD HILLS NY 10507

Parcel: 60.15-3-28

Owner Name: FRANK BELLINO

1. Please advise if the below address has any OPEN/PENDING/EXPIRED Permits and demolition permits that need attention and any fees due currently.

2. Also advise if there are any open Code Violation or fines due that needs attention currently.

Roxanne Surace
Senior Office Assistant
Town of Bedford Supervisor & Town Clerk's Office
321 Bedford Road, Bedford Hills, N.Y. 10507
O: 914-864-3864 / F: 914-666-5249
rsurace@bedfordny.gov
http://www.bedfordny.gov



# Town of Bedford Building Department

Printed on: 01/29/2024

## **PARCEL HISTORY**

for: 26 Winding Ln
Parcel #: 60.15-3-28 Acreage:0.8 Parcel Zone:TF

#### **OPEN APPLICATIONS**

	H			
Date	Number	Type	Status	Const. Cost

#### **PERMITS**

Date	Number	Type	Exp. Date	Status	Const. Cost
11/16/2007	21558	Addition		PENDING	8000.00
Description:	Deck				
09/05/1980	10014	Swimming Pool	09/05/1981	APPROVED	
Description:					
07/30/1976	770757	2 Family Residence	07/30/1977	APPROVED	
Description:				,	
02/11/1976	8917	Cottage/Accessory Apartment	02/10/1977	APPROVED	
Description:					
05/20/1975	8768	Alteration	05/19/1976	APPROVED	
Description:					



# Town of Bedford Building Department

Printed on: 01/29/2024

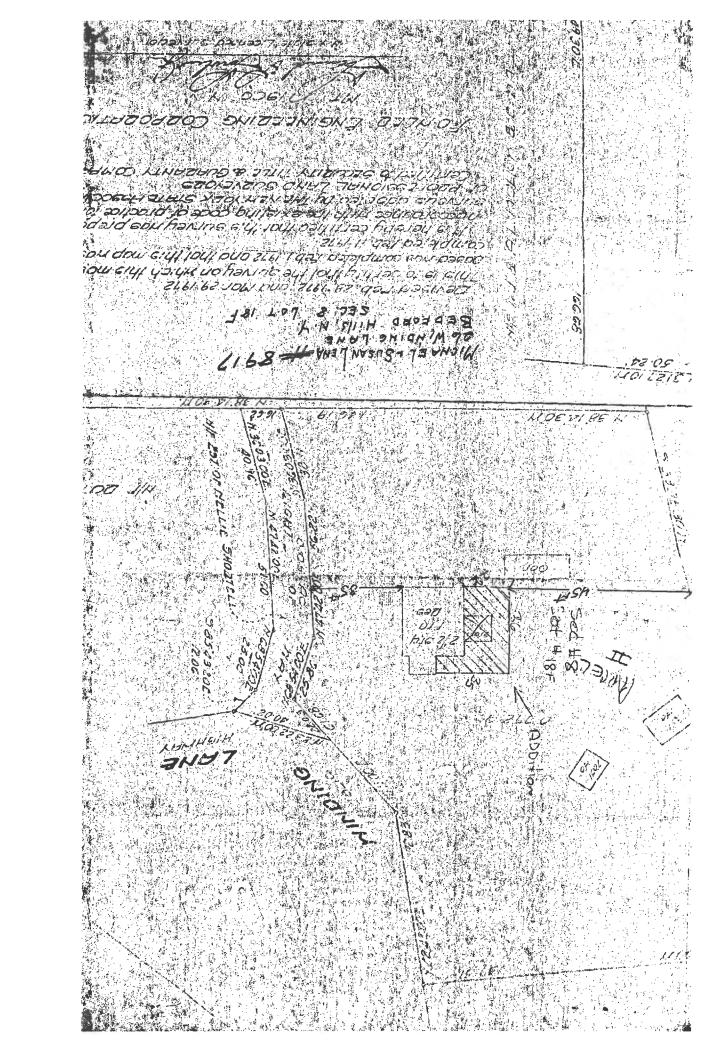
### **CERTIFICATES**

Date	Certificate Number	Permit Number	Permit Type	Certificate Type	Status
07/30/1976	201725	770757	2 Family Residence	СС	ISSUED
Description:					
04/30/1976	5276	8917	Cottage/Accessory Apartment	СС	ISSUED
Description:					
08/02/1988	5275	8768	Alteration	CC	ISSUED
Description:					
01/12/1988	201724	10014	Swimming Pool	CC	ISSUED
Description:					

### **COMPLAINTS**

-				
	Date	Number	Complaint Type	Status

	EXISTING SEPTIC  Private Water Supply	_5	-DFORD unicipality
CERTIFICATE OF CONSTRUCTION	N COMPLIANCE		1576-4
ocated at 26 WINDING	· · · · · · · · · · · · · · · · · · ·	WCDH Fite No	Riechi
WHEN MICHAEL LEN	IA	Lot 18 F	Joh
eparate Sewerage System built by ADDITION	BY CLEMWATER BUILDERS	MAHOPAC	\
Consisting of	1000 Gal. Masonry, Wester Septic Tank_ STING SEEPAGE	PIT Common Test	24" /2'X 7' X 5'0865
	TOWN	пуручан.	12 A / A S DEEP
Private Supply Profit Private Supply Profit Private Supply Drilled By			
uilding Type	Number of Bedrooms	Date Permit Issued	2-5-76
osion Control Completed			
			0
ner Requirements	premises were constructed essentially as shown on the pand the permit issued by the Westchester County Department	plans of the completed work (con	es of which are attached), and in accordance
ther Requirements  certify that the system(s) as listed serving the above ith the stendards, rules and regulations, plans filed, and the stendards of the served by the above such usage. Approval of the separate sewerage system ecome null and void when a public water supply become null and void when a public water supply and void when a public water supply and void when a public water supply and void water supply and void when a public water supply and void water sup	premises were constructed essentially as shown on the and the permit issued by the Westchester County Department of the permit issued by the Westchester County Department of the permit issued by the permit issued by the permit issued as the permit issued by the permit issued as the permit issued by the	plans of the completed work (copinent of Health)  essary to secure the correction y sawar becomes available and the light on or change when, in the light	If any unsanitary conditions resulting from a approval of the private water supply shall ment of the Commissioner of Health, such
ate 3 - 17 - 76  ate 3 - 17 - 76  ate 3 - 18 - 18 - 18 - 18 - 18 - 18 - 18 -	Certified By Certified By State State County Department of the State Sta	plans of the completed work (coppent of Health)  Essary-to secure the correction a secure the correction or change when, in the judy rision of a licensed Professional	If any unsanitary conditions resulting from le approval of the private water supply shall ment of the Commissioner of Health, such Engineer or Registered Architect.



SPECTION OF ORIGINAL Separate Sewerage Syste	SEPTIC SYSTEM BEDFORD  Municipality
CONSTRUCTION PERMIT	WCDH File No.
Located at 26 WINDING	LANE Section 8 Block
Subdivision	Iot 18 = Job
Owner MICHAEL LENA	Address 26 WINDING LA BEDFORD LOT Area 34 ACRE
Building Toma RESIDENCE	No. of Total  Bedrooms 3 Habitable Space Square Feet
	onsist of EXISTING SEEPINGE Pit Approx 12'x 7'x 5'DEPTH O.M.  Metal Septic Tankplus 100 lineal feet X 24" width trench
The he constructed by FRE-BAI	2 CONSTRUCTION Address LINCOLNDALE, N.Y.
To be constructed by	lie Supply from Town of BEDFORD
Water Supply: Pub	
Pri	vate Supply to
Other Requirements	drilled by Address Address and location of the
Other Requirements  I represent that I am wholly proposed system(s): 1) that constructed as shown on the a with the standards, rules and and that on completion thereo the Commissioner of Health wi will be furnished the owner, had be furnished the owner, had be period of two (2) approval of the Certificate of repairs thereto; 2) that the approved plan and that said wand regulations of the Weston	and completely responsible for the design and location of the separate sewage disposal system above described will be approved plan or approved amendment thereto and in accordance regulations of the Westchester County Department of Health, of a "Certificate of Construction Compliance" satisfactory to all be submitted to the Department, and a written guarantee his successors, heirs or assigns by the builder, that said perating condition any part of said sewage disposal system years inmediately following the date of the issuance of the of Construction Compliance of the original system or any additional described above will be located as shown on the well will be installed in accordance with the standards, rule mester County Department of Health.
Other Requirements  I represent that I am wholly proposed system(s): 1) that constructed as shown on the a with the standards, rules and and that on completion thereo the Commissioner of Health wi will be furnished the owner, hadder will place in good op during the period of two (2) approval of the Certificate of repairs thereto; 2) that the approved plan and that said wand regulations of the Weston Date 2/5/74	and completely responsible for the design and location of the separate sewage disposal system above described will be approved plan or approved amendment thereto and in accordance regulations of the Westchester County Department of Health, of a "Certificate of Construction Compliance" satisfactory to a "Certificate of Construction Compliance" satisfactory to the submitted to the Department, and a written guarantee his successors, heirs or assigns by the builder, that said perating condition any part of said sewage disposal system years immediately following the date of the issuance of the of Construction Compliance of the original system or any a drilled well described above will be located as shown on the well will be installed in accordance with the standards, rule well will be installed in accordance with the standards, rule mester County Department of Health.  Signed Michael County the date issued unless
Other Requirements  I represent that I am wholly proposed system(s): 1) that constructed as shown on the a with the standards, rules and and that on completion thereo the Commissioner of Health wi will be furnished the owner, builder will place in good op during the period of two (2) approval of the Certificate of repairs thereto; 2) that the approved plan and that said wand regulations of the Weston Date 2/5/76  APPROVED FOR CONSTRUCTION: 1 construction of the building	and completely responsible for the design and location of the separate sewage disposal system above described will be approved plan or approved amendment thereto and in accordance regulations of the Westchester County Department of Health a "Certificate of Construction Compliance" satisfactory to the submitted to the Department, and a written guarantee his successors, heirs or assigns by the builder, that said perating condition any part of said sewage disposal system years inmediately following the date of the issuance of the of Construction Compliance of the original system or any a drilled well described above will be located as shown on the well will be installed in accordance with the standards, rul mester County Department of Health.  Signed Mandal County Department of Health.  Signed Mandal County Department of Health. Any change
Other Requirements  I represent that I am wholly proposed system(s): 1) that constructed as shown on the a with the standards, rules and and that on completion thereo the Commissioner of Health wi will be furnished the owner, builder will place in good op during the period of two (2) approval of the Certificate of repairs thereto; 2) that the approved plan and that said wand regulations of the Weston Date 2/5/76  APPROVED FOR CONSTRUCTION: 1 construction of the building	and completely responsible for the design and location of the separate sewage disposal system above described will be approved plan or approved amendment thereto and in accordance regulations of the Westchester County Department of Health of a "Certificate of Construction Compliance" satisfactory to a "Certificate of Construction Compliance satisfactory to a successors, heirs or assigns by the builder, that said herating condition any part of said sewage disposal system years immediately following the date of the issuance of the of Construction Compliance of the original system or any a drilled well described above will be located as shown on the well will be installed in accordance with the standards, rule mester County Department of Health.  Signed Will be installed in accordance with the standards, rule mester County Department of Health.  Signed Will be commissioner of Health. Any change in requires a new permit. Approved for disposal of domestic

SD 47-66A

