September 1, 2021

Gregory Fisher 47 Cloverdale Avenue White Plains, NY

Building Department
Village of Irvington, New York
Building Department
85 Main Street
Irvington, NY 10533

Attention: Ed Marron

Building Inspector

Property: The Abbot House

100 North Broadway Irvington, NY 10533

Subject: Proposed Pergola Installation and Existing Gazebo Removal

Mr. Marron:

Attached please find 8 signed plan sets of the proposed pergola installation and existing gazebo removal at the above reference property for review. Drawing 1 of 2 includes a photo of the proposed pergola as well as the material finish. Drawing 2 of 2 details the pergola post foundations and tie-downs to anchor the pergola. It is my understanding that the building permit and architectural board review process as well as any associated fees will be determined upon initial review of the plans.

If you have any questions or comments on the attached plans or would like to discuss this submittal, I can be reached by phone at 914-346-7609 or by email at gmfisher47@gmail.com.

Sincerely,

Gregory Fisher

Grayy Fish

NYS P.E. License No. 080521

APPLICATION FOR BUILDING PERMIT

The Village of Irvington | 85 Main St | Irvington NY 10533

Application Number:	823	Date:	08/12/2021
Job Location:	100 N BROADWAY	Parcel ID:	2.60-25-8A
Property Owner:	ABBOTT HOUSE	Property Class:	
Occupancy:	Commercial	Zoning:	
Common Name:	ABBOTT HOUSE		

Applicant	Contractor
ABBOTT HOUSE	ABBOTT HOUSE
100 NORTH BROADWAYIRVINGTON NY 10533	100 NORTH BROADWAY IRVINGTON NY 10533
5163752538	5163752538

Description of Work

Type of Work:	New Accessory Structure	Applicant is:	Owner
Work Requested by:	The Owner	In association with:	
Cost of Work (Est.):	4000.00	Property Class:	

Description of Work

We are installing a freestanding 4 beam pergola made of cedar, 8ft 9inches tall and 12 feet wide (including overhang). The pergola will be mounted to concrete footings placed 10 feet apart.

Please Note: Completing the application does not constitute a permit to commence construction. To obtain your permit follow the instructions on the instruction page provided on page 3.

Job Location: 100 N BROADWAY Parcel Id: 2.60-25-8..A

AFFIDAVIT OF APPLICANT

	OTT HOUSE being duly sworn, depose and says: That s/he does business as: with offices at: 100 NORTH DWAYIRVINGTON NY 10533 and that s/he is:
	The owner of the property described herein. The of the New York Corporation with offices at:
	duly authorized by resolution of the Board of Directors, and that
	said corporation is duly authorized by the owner to make this application.
	A general partner of with offices and that said Partnership is duly authorized by the Owner to make this application. The Lessee of the premises, duly authorized by the owner to make this application. The Architect of Engineer duly authorized by the owner to make this application. The contractor authorized by the owner to make this application.
kno Un Iaw	at the information contained in this application and on the accompanying drawings is true to the best of his owledge and belief. The undersigned hereby agrees to comply with all the requirements of the New York State iform Fire Prevention and Building Code, the Village of Irvington Building Code, Zoning Ordinance and all other or pertaining to same, in the construction applied for, whether or not shown on plans or specify in this application.
1	worn to before me this 12 th day of Avquet of 2021 KATE V HOPE Notary Public, State of New York No. 01HO6289229 Qualified in Westchester County Commission Expires September 23, 20 25
OWNE	R'S AUTHORIZATION
	OTT HOUSE as the owner of the subject premises and have authorized the contractor named above to perform the nder the subject application.
Ov	vner phone number 914-591-7300 Owner email address TKAVFMAN@ABBOTTHOUSE . NET
	I hereby acknowledge that it is my responsibility as the property owner to ensure that if the permit (if issued) receives a Final Certificate of Approval from the Building Department and further that if a Final Certificate of Approval is not obtained upon completion of the construction, a property violation may be placed on the property for which this permit is being requested.
	Sworn to before me this 12 th day of AUGUST of 2021
	Notary Public / Commission of Deeds Applicant's Signature

KATE V HOPE
Notary Public, State of New York
No. 01HO6289229
Qualified in Westchester County
Commission Expires September 23, 20

Client#: 470930 ABBOTHOU2

$ACORD_{\sim}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/13/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

this certificate does not confer a	iny rights to the certificate holder in lieu (ot such endorsement(s).		
PRODUCER		CONTACT NAME:		
USI Insurance Services LLC	Services LLC PHONE (A/C, No, Ext): 914 459-6200 FAX (A/C, No):	FAX (A/C, No):		
333 Westchester Ave.		E-MAIL ADDRESS:		
White Plains, NY 10604		INSURER(S) AFFORDING COVERAGE	GE	NAIC#
		INSURER A: Philadelphia Indemnity Insurance Co.	1	18058
INSURED A LIBERT OF THE PROPERTY OF THE PROPER		INSURER B : Beazley Lloyd's Syndicate	0	000000
Abbott House		INSURER C:		
100 North Broadway		INSURER D :		
Irvington, NY 10533		INSURER E :		
		INSURER F:		
COVERAGES	CERTIFICATE NUMBER:	REVISION NUM	IBER:	

COVERAGES CERTIFICATE NUMBER: R	REVISION NUMBER:
---------------------------------	------------------

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE	ADDL INSR	SUBR WD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	Х	COMMERCIAL GENERAL LIABILITY			PHPK2255737	04/01/2021	04/01/2022	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
								MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$3,000,000
		POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$3,000,000
		OTHER:							\$
Α	AUT	OMOBILE LIABILITY			PHPK2255737	04/01/2021	04/01/2022	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	Х	ANY AUTO						BODILY INJURY (Per person)	\$
	Х	OWNED X SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	Х	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
Α	Х	UMBRELLA LIAB X OCCUR			PHUB761999	04/01/2021	04/01/2022	EACH OCCURRENCE	\$5,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000
		DED X RETENTION \$10000							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	(Mar	ndatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
В	Pro	ofessional Liab			W22A16200401	04/01/2021	04/01/2022	\$1,000,000/\$3,000,00	00
В	Αb	use Liab.			W22A16200401	04/01/2021	04/01/2022	\$500,000/\$500,000	
Α	Fid	elity Coverage			PHPK2255737	04/01/2021	04/01/2022	\$750,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The General Liability policy include an Additional Insured endorsement that provides Additional Insured status to the Village of Irvington, while performing their specific job duty, only when there is a written contract that requires such status, and only with regard to work performed on behalf of the named insured.

CERTIFICATE HOLDER	CANCELLATION
Village of Irvington 85 Main Street Irvington, NY 10533	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
(Well Scall

© 1988-2015 ACORD CORPORATION. All rights reserved.



WESTCHESTER ONE, 44 SOUTH BROADWAY, 10TH FLOOR, WHITE PLAINS, NY 10601-4411

| nysif.com

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

^^^^^ 131991946

KEEVILY SPERO-WHITELAW INC
500 MAMARONECK AVENUE
HARRISON NY 10528



SCAN TO VALIDATE AND SUBSCRIBE

POLICYHOLDER
ABBOTT HOUSE
100 NORTH BROADWAY
IRVINGTON NY 10533

CERTIFICATE HOLDER
VILLAGE OF IRVINGTON
85 MAIN STREET
IRVINGTON NY 10533

POLICY NUMBER	CERTIFICATE NUMBER	POLICY PERIOD	DATE
W 500 117-7	773260	07/01/2021 TO 07/01/2022	8/17/2021

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 500 117-7, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW.

IF YOU WISH TO RECEIVE NOTIFICATIONS REGARDING SAID POLICY, INCLUDING ANY NOTIFICATION OF CANCELLATIONS, OR TO VALIDATE THIS CERTIFICATE, VISIT OUR WEBSITE AT HTTPS://WWW.NYSIF.COM/CERT/CERTVAL.ASP. THE NEW YORK STATE INSURANCE FUND IS NOT LIABLE IN THE EVENT OF FAILURE TO GIVE SUCH NOTIFICATIONS.

THE POLICY INCLUDES A WAIVER OF SUBROGATION ENDORSEMENT UNDER WHICH NYSIF AGREES TO WAIVE ITS RIGHT OF SUBROGATION TO BRING AN ACTION AGAINST THE CERTIFICATE HOLDER TO RECOVER AMOUNTS WE PAID IN WORKERS' COMPENSATION AND/OR MEDICAL BENEFITS TO OR ON BEHALF OF AN EMPLOYEE OF OUR INSURED IN THE EVENT THAT, PRIOR TO THE DATE OF THE ACCIDENT, THE CERTIFICATE HOLDER HAS ENTERED INTO A WRITTEN CONTRACT WITH OUR INSURED THAT REQUIRES THAT SUCH RIGHT OF SUBROGATION BE WAIVED.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR.INSURANCE FUND UNDERWRITING

ABBOTT HOUSE - 100 N BROADWAY

Application Number: 823

New Accessory Structure

Materials List:

- 1. Western Red Cedar (pre-cut and pre-drilled)
- 2. Powder Coated steel L-brackets
- 3. Concrete (footings)
- 4. ½ inch screws
- 5. Gravel flooring

Reference photo for structure design:

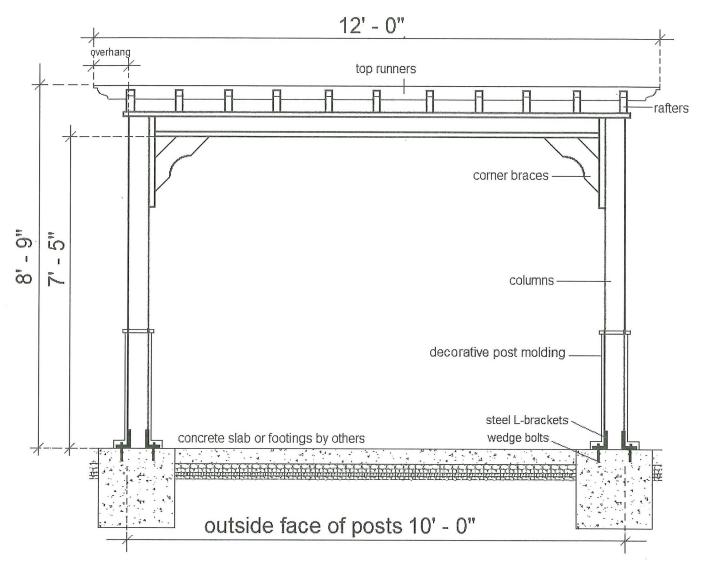


Shop-applied stain color: CEDAR (see below)



Bart- 914-610-6751 Abbott House

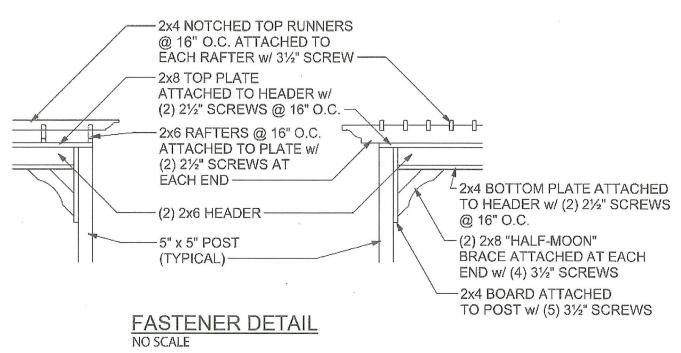


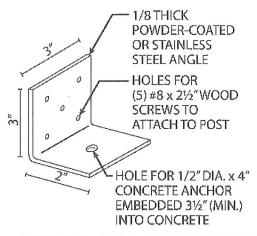


Not to scale. Rafter and top runner spacing governed by chart, not by drawing, which may over or understate the number of rafters or top runners. Must be anchord to concrete slab, concrete footings, or deck. Do not anchor to pavers, flagstone, or bluestone. © Perola Kits USA 2016 (800) 403-9259

THERE HAS NOT BEEN ANY STRUCTURAL, MECHANICAL, ELECTRICAL OR SITE ENGINEERING PERFORMED FOR THIS STRUCTURE, KIT OR PROJECT. IT SHALL BE THE RESPONSBILITY OF THE PURCHASER OF THIS STRUCTURE/KIT TO OBTAIN DESIGN DATA FROM A LICENSED ENGINEER FOR THESE SYSTEMS. ENGINEERING SHALL CONFORM WITH ALL APPLICABLE LOCAL AND/OR STATE BUILDING CODES AND REGULATIONS. ALL CONSTRUCTION SHALL COMPLY WITH THE REQUIREMENTS OF ANY AND ALL APPLICABLE STATE, COUNTY AND LOCAL BUILDING CODES OR REGULATIONS.







STEEL L-BRACKET DETAIL NO SCALE

THERE HAS NOT BEEN ANY STRUCTURAL, MECHANICAL, ELECTRICAL OR SITE ENGINEERING PERFORMED FOR THIS STRUCTURE, KIT OR PROJECT. IT SHALL BE THE RESPONSBILITY OF THE PURCHASER OF THIS STRUCTURE/KIT TO OBTAIN DESIGN DATA FROM A LICENSED ENGINEER FOR THESE SYSTEMS. ENGINEERING SHALL CONFORM WITH ALL APPLICABLE LOCAL AND/OR STATE BUILDING CODES AND REGULATIONS. ALL CONSTRUCTION SHALL COMPLY WITH THE REQUIREMENTS OF ANY AND ALL APPLICABLE STATE, COUNTY AND LOCAL BUILDING CODES OR REGULATIONS.



PAGE 3

Del	ivery Address
Address	
City, State, Zip	
Name	
Phone	
Email ·	<u>kristina@abbotthouse.net</u>
Project manager/Revision	Alyssa Morano / Rev. B
Pergola Model:	Serenity Freestanding (ground mounted)
Shop note:	4 beam
Material:	Western Red Cedar
Side of structure:	Side A Side B
Outside face of posts:	10 ft 0 in x 10 ft 0 in
Roof span:	12ft 0in x 12ft 0in
Overhang:	12 in 12 in
# of columns:	4
Column width:	6x6 nominal (5" x 5" actual)
Structure height:	8 ft 9 in
Column height:	8 ft 0 in
Bottom of headers:	7 ft 5 in
Rafters:	2 in x 6 in
Top runners:	2 in x 4 in
Rafter spacing:	16 inches on center (approx.)
Top runner spacing:	16 inches on center (approx.)
Corner braces:	2x8 half moon
Rafter tail design:	Standard Tails
Post Base Trim:	11" square and 36" tall
Mounted to:	Concrete
Post brackets:	Powder coated steel L-brackets
Stain color:	Cedar
Options:	
Est. Ship Date:	15 weeks from drawing approval
Special:	
I have carefully reviewed all t	the specs above, all the specs on
the attached drawings, and th	ne delivery instructions and
confirm and approve them.	
Signature	

© Pergola Kits USA 2020 Toll Free: (800) 403-9259

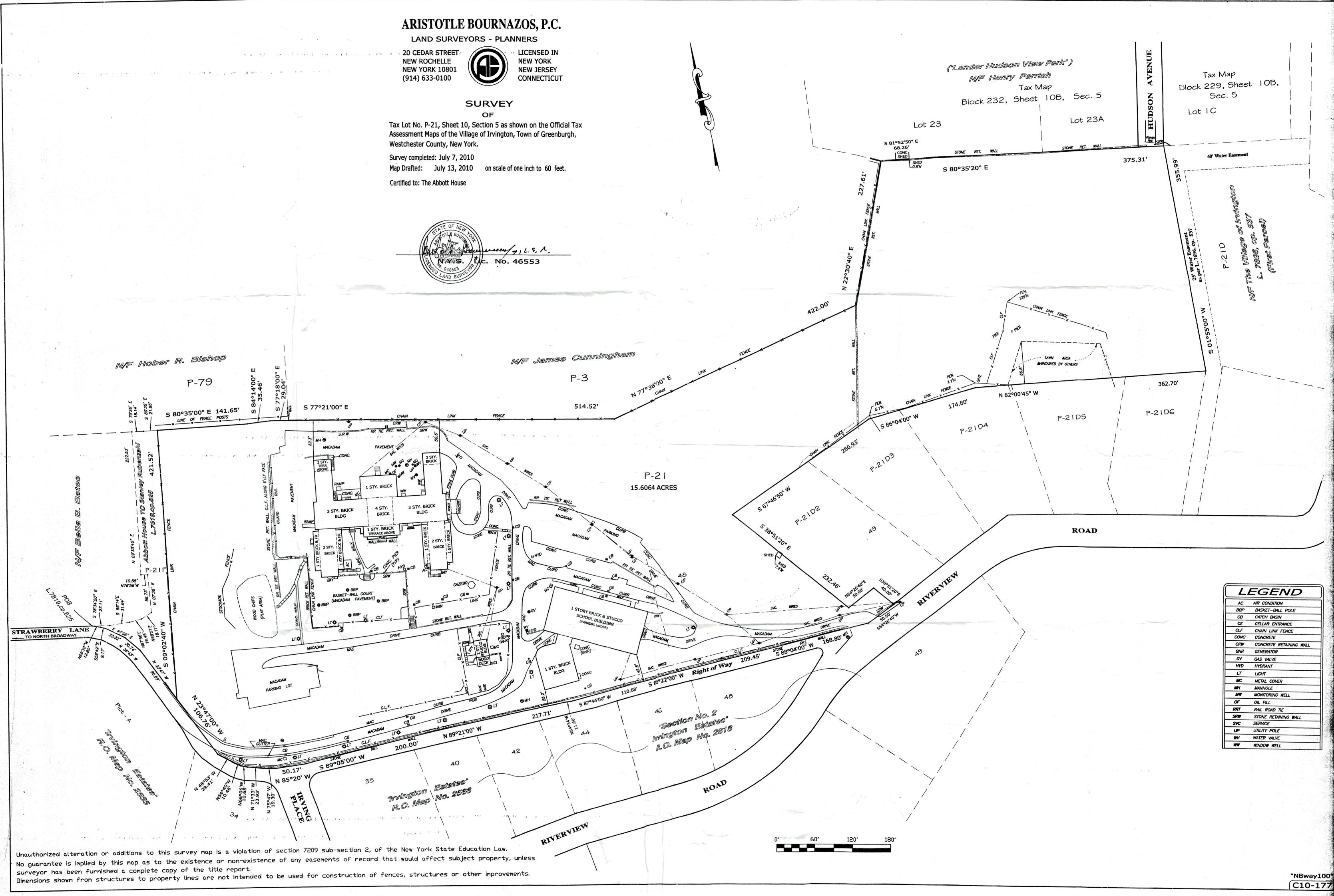
THERE HAS NOT BEEN ANY STRUCTURAL, MECHANICAL, ELECTRICAL OR SITE ENGINEERING PERFORMED FOR THIS STRUCTURE, KIT OR PROJECT. IT SHALL BE THE RESPONSBILITY OF THE PURCHASER OF THIS STRUCTURE/KIT TO OBTAIN DESIGN DATA FROM A LICENSED ENGINEER FOR THESE SYSTEMS. ENGINEERING SHALL CONFORM WITH ALL APPLICABLE LOCAL AND/OR STATE BUILDING CODES AND REGULATIONS. ALL CONSTRUCTION SHALL COMPLY WITH THE REQUIREMENTS OF ANY AND ALL APPLICABLE STATE, COUNTY AND LOCAL BUILDING CODES CR REGULATIONS.

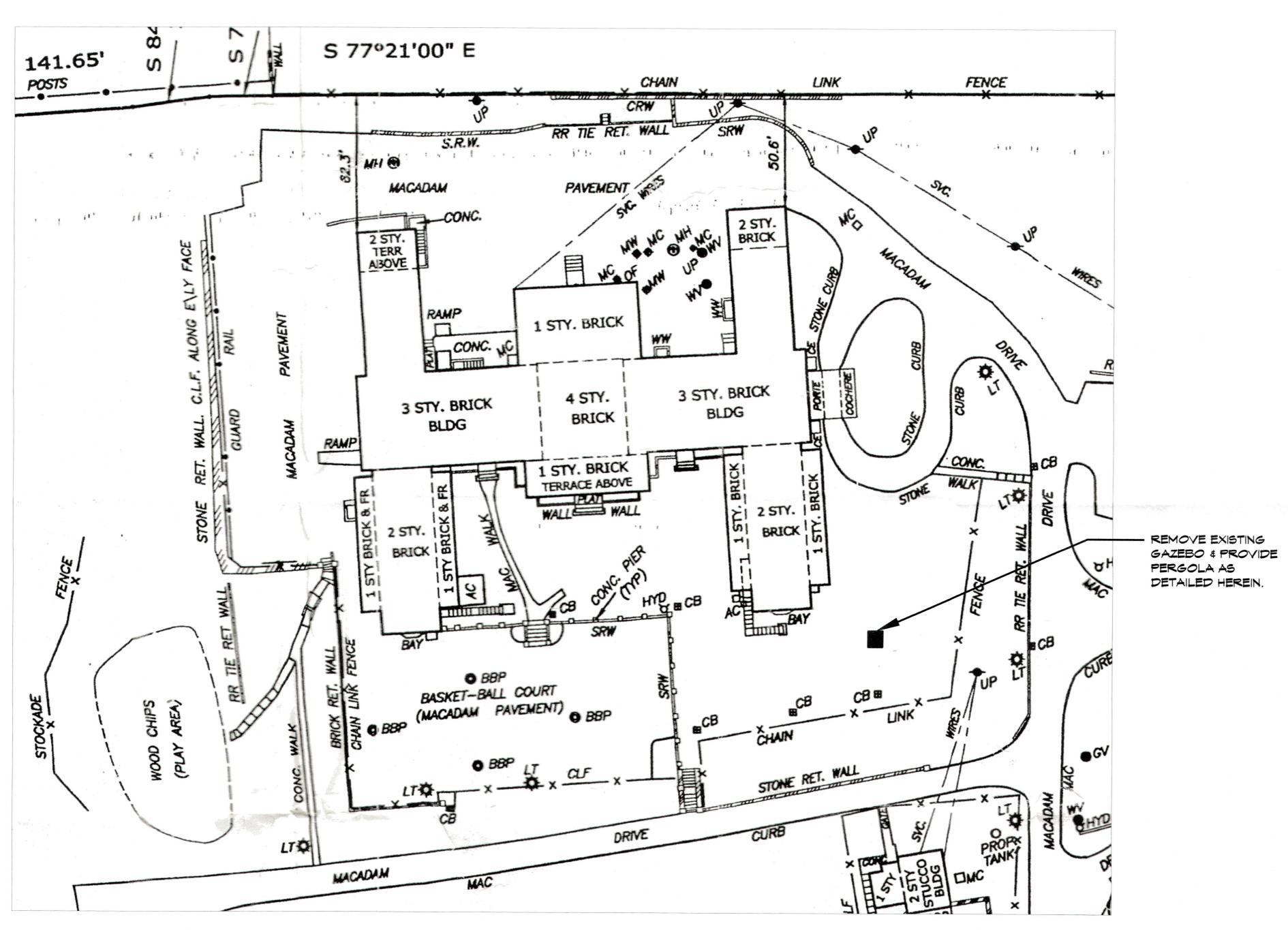




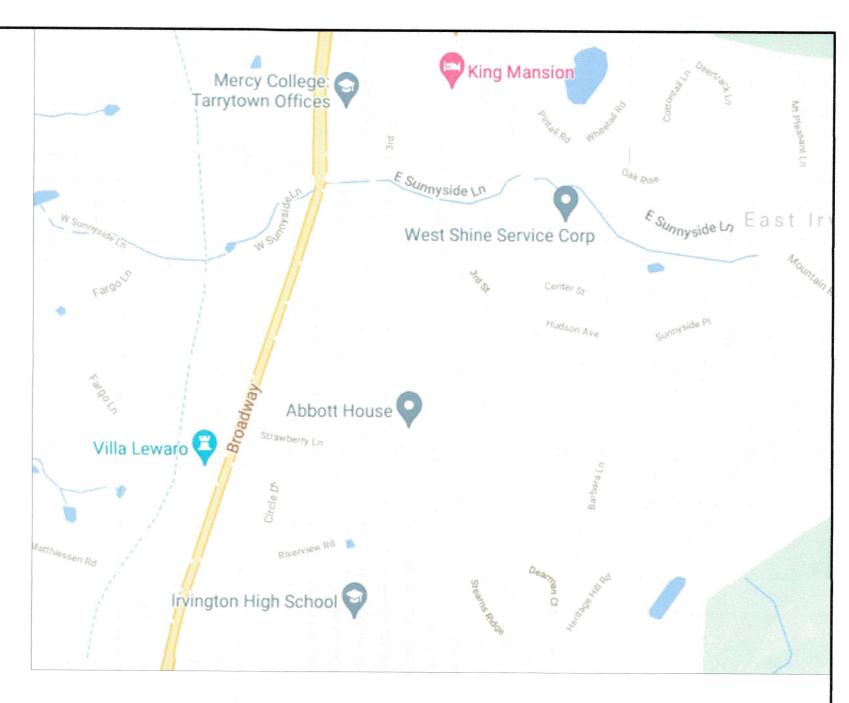








SITE PLAN SCALE : 1" = 40'



LOCATION BROADWAY

New Accessory Structure

Application Number: 823

Materials List:

- 1. Western Red Cedar (pre-cut and pre-drilled)
- 2. Powder Coated steel L-brackets 3. Concrete (footings)
- 4. ½ inch screws
- Gravel flooring



Shop-applied stain color: CEDAR (see below)



Proposed 10'x 10'Pergola (Building not included)
Scale: N.T.S.

Old Gazebo Scale: N.T.S.

Pergola Model:	Serenity Freestanding (ground mounted)
Shop note:	4 beam
Material:	Western Red Cedar
Side of structure:	Side A Side B
Outside face of posts:	10 ft 0 in x 10 ft 0 in
Roof span:	12 ft 0 in x 12 ft 0 in
Overhang:	12 in 12 in
# of columns:	4
Column width:	6x6 nominal (5" x 5" actual)
Structure height:	8 ft 9 in
Column height:	8 ft 0 in
Bottom of headers:	7 ft 5 in
Rafters:	2 in x 6 in
Top runners:	2 in x 4 in
Rafter spacing:	16 inches on center (approx.)
Top runner spacing:	16 inches on center (approx.)
Corner braces:	2x8 half moon
Rafter tail design:	Standard Tails
Post Base Trim:	11" square and 36" tall
Mounted to:	Concrete
Post brackets:	Powder coated steel L-brackets
Stain color:	Cedar

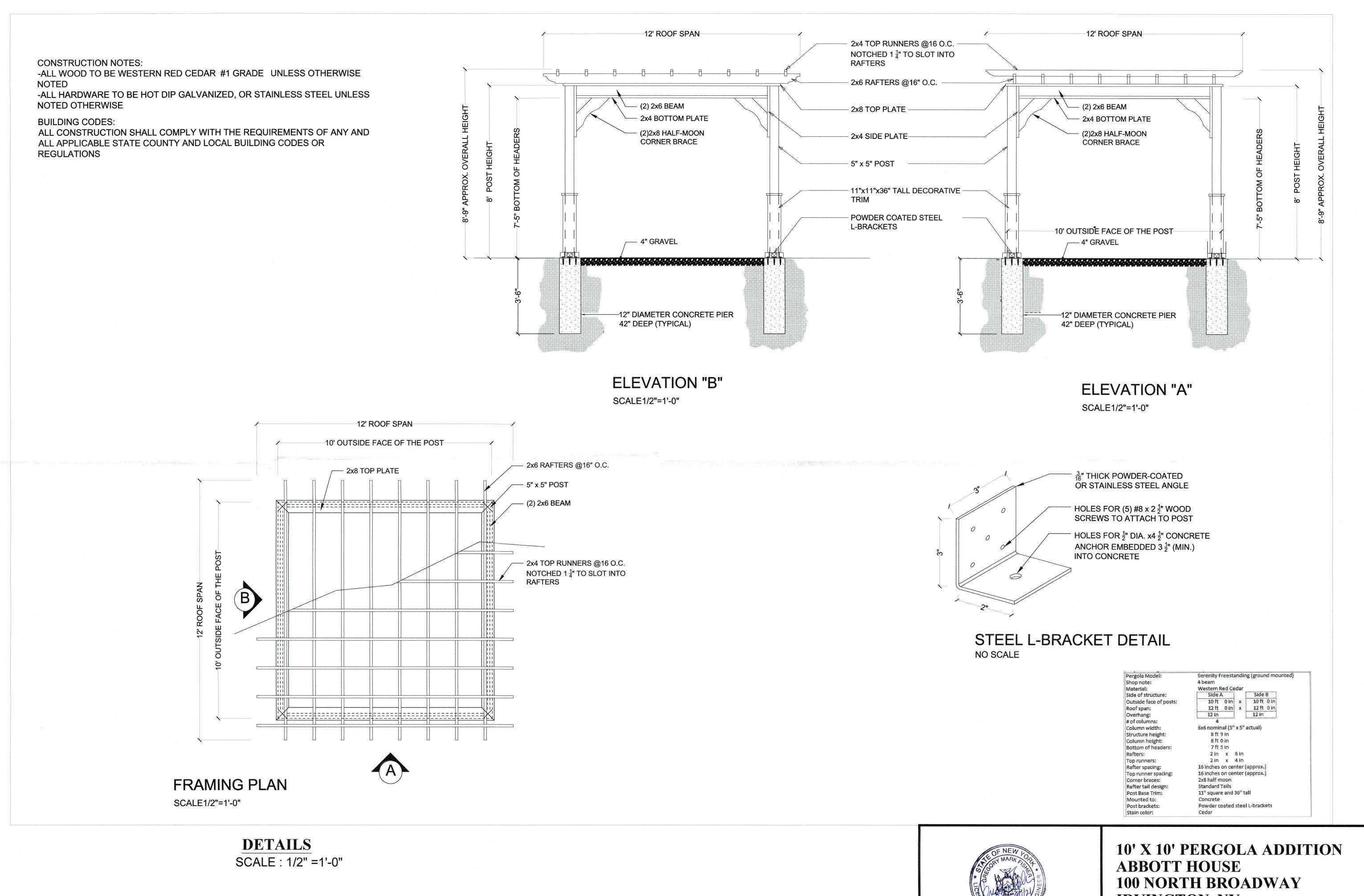


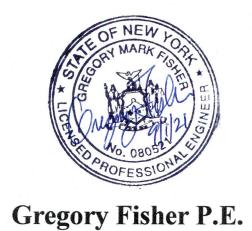
Gregory Fisher P.E. (914) 346-7609

10' X 10' PERGOLA ADDITION **ABBOTT HOUSE** 100 NORTH BROADWAY IRVINGTON, NY

AUGUST 25, 2021

As Noted





(914) 346-7609

IRVINGTON, NY

AUGUST 25, 2021 Scale:

As Noted