



TOWN OF NEWBURGH

Crossroads of the Northeast

ZONING BOARD OF APPEALS
OLD TOWN HALL
308 GARDNERTOWN ROAD
NEWBURGH, NEW YORK 12550

APPLICATION

OFFICE OF ZONING BOARD
(845) 566-4901

DATED: 05.04.15

TO: **THE ZONING BOARD OF APPEALS**
THE TOWN OF NEWBURGH, NEW YORK 12550

I (WE) JORG UWE FRISCHKNECHT PRESENTLY

RESIDING AT NUMBER 2 OAK RIDGE DRIVE, NEWBURGH, NEW YORK 12550

TELEPHONE NUMBER 845-222-3884

HEREBY MAKE APPLICATION TO THE ZONING BOARD OF APPEALS FOR THE FOLLOWING:

- A USE VARIANCE
- AN AREA VARIANCE
- INTERPRETATION OF THE ORDINANCE
- SPECIAL PERMIT

1. LOCATION OF THE PROPERTY:

70-3-1 (TAX MAP DESIGNATION)

2 CHEVY LANE (STREET ADDRESS)

R-3 SINGLE FAMILY RESIDENTIAL (ZONING DISTRICT)

2. PROVISION OF THE ZONING LAW APPLICABLE, (INDICATE THE SECTION AND SUBSECTION OF THE ZONING LAW APPLICABLE BY NUMBER; DO NOT QUOTE THE LAW).

185 - ATTACHEMNT 9: R-3 BULK REQUIREMENTS FOR SINGLE FAMILY RESIDENCE



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7. ADDITIONAL REASONS (IF PERTINENT):

JORG UWE FRISCHKNECHT
PETITIONER (S) SIGNATURE

STATE OF NEW YORK: COUNTY OF ORANGE:

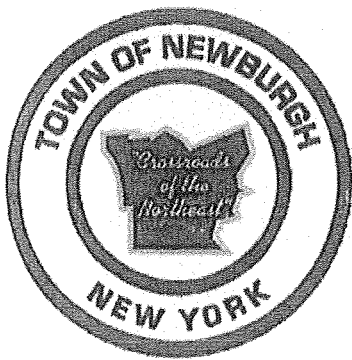
SWORN TO THIS 7th DAY OF May 20 15

NOTARY PUBLIC

Martha Katalina Soto
Notary Public, State of New York
No. 01SO6314370
Qualified in Orange County
Commission Expires November 03, 2018

NOTE: NYS GML Section 239-m (3) for proposed actions that are within 500 feet of the properties or thresholds listed in the statute the Zoning Board of Appeals is required to send a copy of the complete application to the Orange County Department of Planning to be reviewed prior to Zoning Board of Appeals decision. And also NYS GML Section 239-NN requires notification for any proposed actions, to the Municipal Clerk, within 500 feet of the Border of that adjoining County, Town or City.

(NOTE: BOARD MEMBERS MAKE SITE VISITS TO ALL THE PROPERTIES)



TOWN OF NEWBURGH

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ZONING BOARD OF APPEALS
OLD TOWN HALL
308 GARDNERTOWN ROAD
NEWBURGH, NEW YORK 12550

PROXY

JORG UWE FRISCHKNECHT, DEPOSES AND SAYS THAT

HE/SHE RESIDES AT 2 OAK RIDGE DRIVE, NEW WINDSOR, NY 12553

IN THE COUNTY OF ORANGE AND STATE OF NEW YORK

AND THAT HE/SHE IS THE OWNER IN FEE OF _____

2 CHEVY LANE (S/B/L: 70-3-1), TOWN OF NEWBURGH, ORANGE COUNTY, NY

WHICH IS THE PREMISES DESCRIBED IN THE FOREGOING APPLICA-

TION AND THAT HE/SHE HAS AUTHORIZED JONATHAN CELLA, P.E.

TO MAKE THE FOREGOING APPLICATION AS DESCRIBED THEREIN.

DATED: 5-7-15

[Signature]

OWNER'S SIGNATURE

[Signature]

WITNESS' SIGNATURE

STATE OF NEW YORK: COUNTY OF ORANGE:

SWORN TO THIS 7th DAY OF May 2015

[Signature]

NOTARY PUBLIC

Martha Katalina Soto
Notary Public, State of New York
No. 01SO6314370
Qualified in Orange County
Commission Expires November 03, 2018

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
LANDS OF JORG UWE FRISCHKNECHT			
Name of Action or Project:			
PROPOSED TWO LOT RESIDENTIAL SUBDIVISION FOR JORG UWE FRESCHKNECHT			
Project Location (describe, and attach a location map): 2 CHEVY LANE (S/B/L: 70-3-1), AT SOUTH WEST CORNER OF INTERSECTION OF CHEVY LANE AND EAST VIEW ROAD.			
Brief Description of Proposed Action: PROPOSED TWO LOT RESIDENTIAL SUBDIVISION OF 28,042 S.F. PARCEL THAT CONTAINS ONE EXISTING BUILDING (LOT #2). BOTH LOTS ARE/ WILL BE SERVICED BY MUNICIPAL WATER AND SEWER. EAST VIEW ROAD AND CHEVY LANE ARE PAPER STREETS THAT HAVE NEVER BEEN ACCEPTED BY THE TOWN, AND ARE OPRATED AS PRIVATE ROADS. THE EXISTING RESIDENCE ON LOT # 2 REQUIRES AREA VARIANCES FOR FRONT YARD SETBACKS T BOTH CHEVY LANE AND EST VIEW ROAD.			
Name of Applicant or Sponsor:		Telephone: 845-222-3884	
JORG UWE FRISCHKNECHT		E-Mail: uwe@leakfinders.org	
Address: 2 OAK RIDGE DRIVE			
City/PO: NEW WINDSOR		State: NEW YORK	Zip Code: 12553
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO	YES
		X	
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: TOWN PLANNING BOARD FOR SUBDIVISION AND TOWN ZONING BOARD OF APPEALS APPROVAL FOR AREA VARIANCES FOR FRONT YARD SETBACKS FOR EXISTING STRUCTURE ON LOT # 2		NO	YES
			X
3.a. Total acreage of the site of the proposed action?		0.64	acres
b. Total acreage to be physically disturbed?		0.34	acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		0.64	acres
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland			

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	X	
11. Will the proposed action create a hazard to environmental resources or human health?	X	

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

TOWN OF NEWBURGH ZONING BOARD OF APPEALS

Name of Lead Agency

Date

GRACE CARDONE

Print or Type Name of Responsible Officer in Lead Agency

CHAIRPERSON

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)

May 5, 2015

To: Town of Newburgh Zoning Board of Appeals
Grace Cardone, Chairperson, and Members of the Board
308 Gardnertown Road
Newburgh, New York 12550

Re.: Area Variance Request for:
Proposed Two Lot Residential Subdivision for Jorg Uwe Frischknecht
2 Chevy Lane (S/B/L: 70-3-1), Town of Newburgh, Orange County, N.Y.

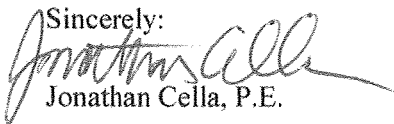
Dear Ms. Cardone and Members of the Board:

Enclosed please find plans for the above referenced project. The subject parcel lies at the southeast corner of East View Road and Fifth Avenue, and has frontage on Fifth Avenue, East View Road, and Chevy Street. The 28,000 square foot parcel contains one existing residential building known as 2 Chevy Lane serviced by municipal water and sewer and lies in the Town of Newburgh R-3 residential zoning district. To obtain subdivision approval area variances are required for the front setbacks of the existing building on Chevy Street and East View Road. In review of this application please consider the following:

- *The subject property contains one existing single family residence and a recent subdivision application for a two lot residential subdivision has been made to the (Town of Newburgh Planning Board Town of Newburgh Planning Board Application Number 2015-06).*
- The area variances requested are for front yard setbacks of the existing building on Lot # 1 to East View Road and Chevy Street. There is no proposed construction on the subject parcel and the area variances sought are for pre-existing non-conforming conditions.
- Per conversations with Town Engineer James Osbourne, P.E., East View Road and Chevy Street *are paper streets that will not be developed by the Town.*
- Per proposed subdivision geometry, both lots meet lot area requirements and there are no variances sought for Lot # 2 of this subdivision.
- Orange County records show that the existing building was constructed in the year 1932.

At this time we respectfully request that the members of the Zoning Board of Appeals review the submitted material and consider the area variances requested for lot #1. Please do not hesitate to contact me with any questions or concerns related to this matter. Thank you.

Sincerely:



Jonathan Cella, P.E.

Project Engineer

51 Hunt Road, Wallkill, New York 12589

845-741-0363, jonathancell@hotmai.com

May 7, 2015

To: Town of Zoning Board of Appeals
1496 New York State Route 300
Newburgh, New York 12550

Re.: **Request for Area Variances**
Proposed Two Lot Residential Subdivision for Jorg Uwe Frischknecht
2 Chevy Lane (S/B/L: 70-3-1), Town of Newburgh, Orange County, N.Y.
Town of Newburgh Planning Board application number 2015-06

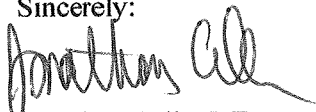
Dear Chairman and Planning Board Members:

Enclosed please find application fees for the initial submission of the above referenced subdivision that includes fourteen (14) copies of each of the following:

1. One (1) copy of Zoning Board of Appeals Application Package
2. One (1) copy of Short Form Environmental Assessment Form
3. One (1) copy of cover letter dated May 5, 2015
4. Eleven (11) copies of plot plan titled "Request for Area Variances, Proposed Two Lot Residential Subdivision for Jorg Uwe Frischknecht," Sheet 1 of 1 dated 01/26/2015 and last revised 05/04/2015.
5. Four (4) copies of property photos (3 sheets dated 05-03-2015)
6. Deed (original provided at submission)
7. Letter of Referral from the Town of Newburgh planning Board
8. \$200.00 Application fees

At this time we respectfully request that this application be placed on the next available Town of Newburgh Zoning Board of Appeals for review and public hearing. Please do not hesitate to contact me with any questions or concerns related to this matter. Thank you.

Sincerely:



Jonathan Cella, P.E.

Project Engineer

51 Hunt Road, Wallkill, New York 12589

845-741-0363, jonathancellahotmail.com

Dickover, Donnelly & Donovan, LLP
Attorneys and Counselors at Law

David A. Donovan
Michael H. Donnelly
Robert J. Dickover

Successor Law Firm To:
Alexander Appelbaum, P.C., Florida, N.Y. (1915-1988)
Ludmerer & Vurno, Esqs., Warwick, N.Y.

28 Bruen Place
P.O. Box 610
Goshen, NY 10924
Phone (845) 294-9447
mail@dddllaw.com
Fax (845) 294-6553
(Not for Service of Process)

April 3, 2015

Town of Newburgh
Zoning Board of Appeals
308 Gardnertown Road
Newburgh, New York 12550

RE: Frischknecht Subdivision
70-3-1 (Zone R-3)
2 Chevy Street (15.06)

Members of the Board:

I write to you on behalf of and at the direction of the Town of Newburgh Planning Board. The above referenced applicant appeared before the planning board during its meeting of April 2, 2015. The applicant proposes a two lot subdivision. Proposed Lot #2 is improved by an existing house. It is a corner lot and thus has two front yards pursuant to the Town of Newburgh Zoning Code. Neither of those front yards satisfies the setback requirement of 40 feet. Therefore, the planning board has asked me to refer this matter to you for consideration of the following front yard setback variances for that lot:

1. A front yard setback of 28 feet where 40 feet is required (East View Road);
2. A front yard setback of 32 feet where 40 is required (Chevy Street).

The planning board has no particular matters to bring to your attention. Your review of this matter is a Type II Action under the New York State Environmental Quality Review Act.

Very truly yours,



MICHAEL H. DONNELLY

MHD/lrm

cc: Town of Newburgh Planning Board
Jonathan Cella, P.E.
David A. Donovan, Esq.

ORANGE COUNTY CLERK'S OFFICE RECORDING PAGE

THIS PAGE IS PART OF THE INSTRUMENT - DO NOT REMOVE

TYPE IN BLACK INK: NAME(S) OF PARTY(S) TO DOCUMENT

Anestasia Websdell aka Stacey Websdell, Dean Komondorea and Bossi Komondorea TO Jozey Uwe Frischknecht

SECTION 70 BLOCK 3 LOT 1

RECORD AND RETURN TO: (name and address)

Kenneth Johnson Esq. 15 Scotts Corners Dr. Montgomery NY 12549



THIS IS PAGE ONE OF THE RECORDING

ATTACH THIS SHEET TO THE FIRST PAGE OF EACH RECORDED INSTRUMENT ONLY

DO NOT WRITE BELOW THIS LINE

Handwritten notes: Saw original 5/7/15 [Signature]

INSTRUMENT TYPE: DEED [checked] MORTGAGE SATISFACTION ASSIGNMENT OTHER

PROPERTY LOCATION

Table with columns for address, city, state, and other details. Includes entries like 2089 BLOOMING GROVE (TN) 4289 MONTGOMERY (TN) and 4003 HARRIMAN (VLG).

Handwritten signature of Donna L. Benson

DONNA L. BENSON ORANGE COUNTY CLERK

Received From [Handwritten Name]

RECORDED/FILED 07/02/2009 10:34:10 DONNA L. BENSON County Clerk ORANGE COUNTY, NY FILE#20090063413 DEED R / BK 12854PG 0058 RECORDING FEES 84.00 TTX# 006667 T TAX 880.00 Receipt#1044891 joanned

STATE OF NEW YORK (COUNTY OF ORANGE) SS: I, ANN G. RABBITT, COUNTY CLERK AND CLERK OF THE SUPREME AND COUNTY COURTS, ORANGE COUNTY, DO HEREBY CERTIFY THAT I HAVE COMPARED THIS COPY WITH THE ORIGINAL THEREOF FILED OR RECORDED IN MY OFFICE ON July 02, 2009 AND THE SAME IS A CORRECT TRANSCRIPT THEREOF. IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED MY OFFICIAL SEAL.

Handwritten signature and date: Ann G. Rabbitt May 06, 2015

COUNTY CLERK & CLERK OF THE SUPREME COUNTY COURTS, ORANGE COUNTY



H10 41748

BARGAIN AND SALE DEED WITH COVENANT AGAINST GRANTOR'S ACTS (INDIVIDUAL OR CORPORATION)

FORM 8002 (short version), FORM 8007 (long version)

CAUTION: THIS AGREEMENT SHOULD BE PREPARED BY AN ATTORNEY AND REVIEWED BY ATTORNEYS FOR SELLER AND PURCHASER BEFORE SIGNING.

THIS INDENTURE, made the 26th day of June, 2009,

BETWEEN

Anastasia Websdell a/k/a Stacey Websdell, of 49 Valley Avenue, Newburgh, New York 12550, Dean Komondorea of 7 O'Dell Circle, Newburgh, New York 12550, and Basil Komondorea of 41 Continental Drive, New Windsor, New York 12553 as Trustees of the WILLIAM S. KOMONDOROA Irrevocable Living Trust, party of the first part, and

Jorg Uwe Frischknecht of 2 Oak Ridge Drive, New Windsor, New York 12553, party of the second part;

WITNESSETH, that the party of the first part, in consideration of Two Hundred Twenty Thousand Dollars and No Cents (\$220,000.00), lawful money of the United States, paid by the party of the second part, does hereby grant and release unto the party of the second part, the heirs or successors and assigns of the party of the second part forever;

ALL that certain plot, piece or parcel of land, with the buildings and improvements thereon erected, situate, lying and being in the Town of Newburgh, County of Orange, State of New York and being more particularly bounded and described in Schedule 'A' attached hereto and made a part hereof.;

BEING AND INTENDED to be the same premises conveyed to Anastasia Websdell A/K/A Stacey Websdell and Dean Komondorea and Basil Komondorea as Trustees of the Declaration of Trust of Even Date herewith "William S. Komondorea Irrevocable Living Trust" who acquired title by deed from William S. Komondorea by deed dated March 21, 2006 and recorded on April 27, 2006 in the Orange County Clerk's Office in Liber 12139 at page 1996.

WILLIAM S. KOMONDOROA died a resident of Orange County, New York on June 1, 2009 as evidenced by the annexed Death Certificate.

TOGETHER with all right, title and interest, if any, of the party of the first part in and to any streets and roads abutting the above described premises to the center lines thereof,

TOGETHER with the appurtenances and all the estate and rights of the party of the first part in and to said premises,

TO HAVE AND TO HOLD the premises herein granted unto the party of the second part, the heirs or successors and assigns of the party of the second part forever.

AND the party of the first part, covenants that the party of the first part has not done or suffered anything whereby the said premises have been encumbered in any way whatever, except as aforesaid.

Schedule A Description

Title Number HN 41748

Page 1

All that certain plot, piece or parcel of land, with the buildings and improvements thereon erected, situate, lying and being in Town of Newburgh, County of Orange, State of New York, more particularly described in Schedule A attached hereto:

BEGINNING at a point in the center of the road known as Fifth Avenue, said point being in range with the southerly side of a Lane known as East View Road, and running thence south 74 degrees 25 minutes east along the southerly line of said East View Road for 293.4 feet to the westerly line of Chevy Street; thence south 6 degrees 30 1/2 minutes west along the westerly line of said Chevy Street 123.3 feet to a point; thence north 66 degrees 12 minutes west 320 feet to the center line of Fifth Avenue; thence north 18 degrees 29 minutes east 76.2 feet to the point of beginning.


TOGETHER with a Right of Way over private road to & from public highway.

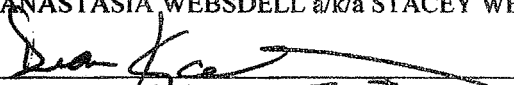
HILL-N-DALE ABSTRACTERS, INC.
20 SCOTCHTOWN AVENUE
P.O. BOX 547
GOSHEN, NEW YORK 10924
(845) 294-5110
FAX (845) 294-9581

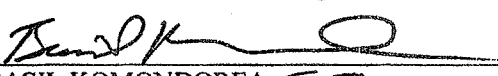
AND the party of the first part, in compliance with Section 13 of the Lien Law, covenants that the party of the first part will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.

IN WITNESS WHEREOF, the party of the first part has duly executed this deed the day and year first above written.


 ANASTASIA WEBSDELL a/k/a STACEY WEBSDELL *Trustee*


 DEAN KOMONDOREA *Trustee*


 BASIL KOMONDOREA *Trustee*

Acknowledgment by a Person Within New York State (RPL § 309-a)

STATE OF NEW YORK)
) ss.:
 COUNTY OF ORANGE)

On the 26th day of June in the year 2009, before me, the undersigned, personally appeared Anastasia Websdell a/k/a Stacey Websdell, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that she executed the same in her capacity(ies), and that by her signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

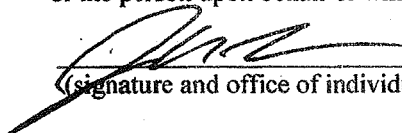

 (signature and office of individual taking acknowledgment)

JOSEPH M. SAFFIOTI
 Notary Public - State of New York
 No. 4985013
 Qualified in Orange County
 Commission Expires August 05, 2009

Acknowledgment by a Person Within New York State (RPL § 309-a)

STATE OF NEW YORK)
) ss.:
COUNTY OF ORANGE)

On the 26th day of June in the year 2009, before me, the undersigned, personally appeared Dean Komondorea, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he executed the same in his capacity(ies), and that by his signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.



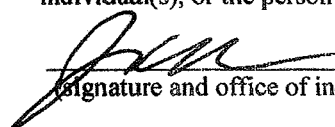
(signature and office of individual taking acknowledgment)

JOSEPH M. SAFFIOTI
Notary Public - State of New York
No. 4985013
Qualified in Orange County
Commission Expires August 05, 2009

Acknowledgment by a Person Within New York State (RPL § 309-a)

STATE OF NEW YORK)
) ss.:
COUNTY OF ORANGE)

On the 26th day of June in the year 2009, before me, the undersigned, personally appeared Basil Komondorea, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that she executed the same in his capacity(ies), and that by his signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.



(signature and office of individual taking acknowledgment)

JOSEPH M. SAFFIOTI
Notary Public - State of New York
No. 4985013
Qualified in Orange County
Commission Expires August 05, 2009

NEW YORK STATE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH
 LOCAL REGISTRAR COPY

REGORDED DISTRICT: 322
 REGISTERED NUMBER: 253

RESIDENCE: [Blank]

1. NAME: FIRST: William S. MIDDLE: Komondorea LAST: Komondorea
 2. SEX: MALE FEMALE
 3A. DATE OF DEATH: MONTH: 06 DAY: 01 YEAR: 2009
 3B. HOUR: 8:15 a.m.

4A. PLACE OF DEATH: HOSPITAL DOA ER HOSPITAL OUTPATIENT HOSPITAL INPATIENT NURSING HOME PRIVATE RESIDENCE HOSPICE FACILITY OTHER (Specify):
 4B. IF FACILITY, DATE ADMITTED: MONTH: 05 DAY: 29 YEAR: 2009

4C. NAME OF FACILITY: (If not facility, give address) St. Luke's Cornwall Hospital
 4D. LOCALITY: (Check one and specify) CITY: Newburgh VILLAGE: TOWN: Orange
 4E. COUNTY OF DEATH: Orange

4F. MEDICAL RECORD NO. L557282
 4G. WAS DECEDENT TRANSFERRED FROM ANOTHER INSTITUTION? (If yes, specify institution name, city or town, county and state) Wingate at Beacon, Beacon, Dutchess, NY

5. DATE OF BIRTH: MONTH: 12 DAY: 12 YEAR: 1929
 6A. AGE IN YEARS: 79 yrs.
 6B. IF UNDER 1 YEAR ENTER: months days
 6C. IF UNDER 1 DAY ENTER: hours minutes
 7A. CITY AND STATE OF BIRTH: (If not USA, Country and Region/Province) Brooklyn, NY
 7B. IF AGE UNDER 1 YEAR, NAME OF HOSPITAL OF BIRTH: [Blank]

8. SERVED IN U.S. ARMED FORCES? (Specify years) NO YES
 9. DECEDENT OF HISPANIC ORIGIN? Check the boxes and best describe whether the decedent is Spanish/Hispanic/Latino.
 A No, not Spanish/Hispanic/Latino B Yes, Mexican, Mexican American, Chicano
 C Yes, Puerto Rican D Yes, Cuban
 E Yes, Other Spanish/Hispanic/Latino (Specify):
 10. DECEDENT'S RACE: Check one or more races to indicate what the decedent considered himself or herself to be.
 A White/Caucasian B Black or African American C Asian Indian D Chinese
 E Filipino F Japanese G Korean H Vietnamese
 J Native Hawaiian I Guamanian or Chamorro M Samoan
 N American Indian or Alaska Native (specify):
 P Other Asian (specify):
 S Other (specify):

11. DECEDENT'S EDUCATION: Check the box that best describes the highest degree or level of school completed at the time of death.
 1 8th grade 2 9th-12th grade; no diploma 3 High school graduate or GED
 4 Some college credit, but no degree 5 Associate's degree 6 Bachelor's degree
 7 Master's degree 8 Doctorate/Professional degree

12. SOCIAL SECURITY NUMBER: [Redacted]
 13. MARITAL STATUS: NEVER MARRIED 1 MARRIED 2 WIDOWED 3 DIVORCED 4 SEPARATED 5
 14. SURVIVING SPOUSE: Enter name if married or separated. If surviving spouse is wife, enter maiden name.
 15A. USUAL OCCUPATION: (Do not enter retired) Owner
 15B. KIND OF BUSINESS OR INDUSTRY: Restaurant
 15C. NAME AND LOCALITY OF COMPANY OR FIRM: Callie & Bill's Diner Newburgh, NY

16A. RESIDENCE: (State or Country if not USA) NY
 16B. County or Region/Province if not USA: Orange
 16C. LOCALITY: (Check one and specify) CITY: Newburgh VILLAGE: TOWN:
 16D. STREET AND NUMBER OF RESIDENCE: 2 Chevy Street
 16E. ZIP CODE: 12550
 16F. IF CITY OR VILLAGE, IS RESIDENCE WITHIN CITY OR VILLAGE LIMITS? CITIES NO IF NO, SPECIFY TOWN:

17. NAME OF FATHER: FIRST: Steven MI: LAST: Komondorea
 18. MAIDEN NAME OF MOTHER: FIRST: Anastasia MI: LAST: Unknown

19A. NAME OF INFORMANT: Dean Komondorea
 19B. MAILING ADDRESS: (Include zip code) 298 Carter Ave., Newburgh, NY 12550

20A. 1 BURIAL 2 CREMATION 3 REBURYAL 4 HOLD 5 DONATION
 6 ENTOMBMENT
 20B. PLACE OF BURIAL, CREMATION, REMOVAL OR OTHER DISPOSITION: Cedar Hill Cemetery
 20C. LOCATION: (City or town and state) Newburgh, NY
 20E. DATE FILED: MONTH: 06 DAY: 04 YEAR: 2009
 20F. BURIAL OR REMOVAL PERMIT ISSUED BY: [Signature]
 20G. DATE ISSUED: MONTH: 02 DAY: 20 YEAR: 2009

21A. NAME AND ADDRESS OF FUNERAL HOME: Brooks Funeral Home 481 Gidney Ave., Newburgh, NY 12550
 21B. REGISTRATION NUMBER: 00213
 22A. NAME OF FUNERAL DIRECTOR: Michael Brooks
 22B. SIGNATURE OF FUNERAL DIRECTOR: [Signature]
 22C. REGISTRATION NUMBER: 00384
 23A. SIGNATURE OF REGISTRAR: [Signature]
 23B. DATE FILED: MONTH: 07 DAY: 02 YEAR: 2009
 23C. SIGNATURE OF CORONER/CONSUMER'S PHYSICIAN OR MEDICAL EXAMINER: [Signature]
 23D. DATE ISSUED: MONTH: 07 DAY: 02 YEAR: 2009

ITEMS 25 THRU 33 COMPLETED BY CERTIFYING PHYSICIAN -- OR -- CORONER/CORONER'S PHYSICIAN OR MEDICAL EXAMINER

25A. CERTIFICATION: To the best of my knowledge, death occurred at the time, date and place and due to the causes stated.
 Certifier's Name: Thomas M. Ross, M.D. License No.: 159881 Signature: [Signature]
 Month: 06 Day: 01 Year: 2009
 Certifier's Title: Attending Physician Physician acting on behalf of Attending Physician
 Coroner Medical Examiner / Deputy Medical Examiner
 Address: 3078 79th Ave New York, NY
 25B. If coroner is not a physician, enter Coroner's Physician's name & title:
 License No.:
 Signature:
 Address:
 25C. If certifier is not attending physician, enter Attending Physician's name & title:
 License No.:
 Signature:
 Address:

26A. Attending physician attended deceased: FROM: MONTH: 07 DAY: 01 YEAR: 2009 TO: MONTH: 06 DAY: 01 YEAR: 2009
 26B. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26C. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26D. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26E. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26F. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26G. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26H. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26I. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26J. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26K. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26L. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26M. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26N. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26O. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26P. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26Q. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26R. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26S. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26T. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26U. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26V. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26W. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26X. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26Y. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009
 26Z. Pronounced Dead by attending physician: MONTH: 06 DAY: 01 YEAR: 2009

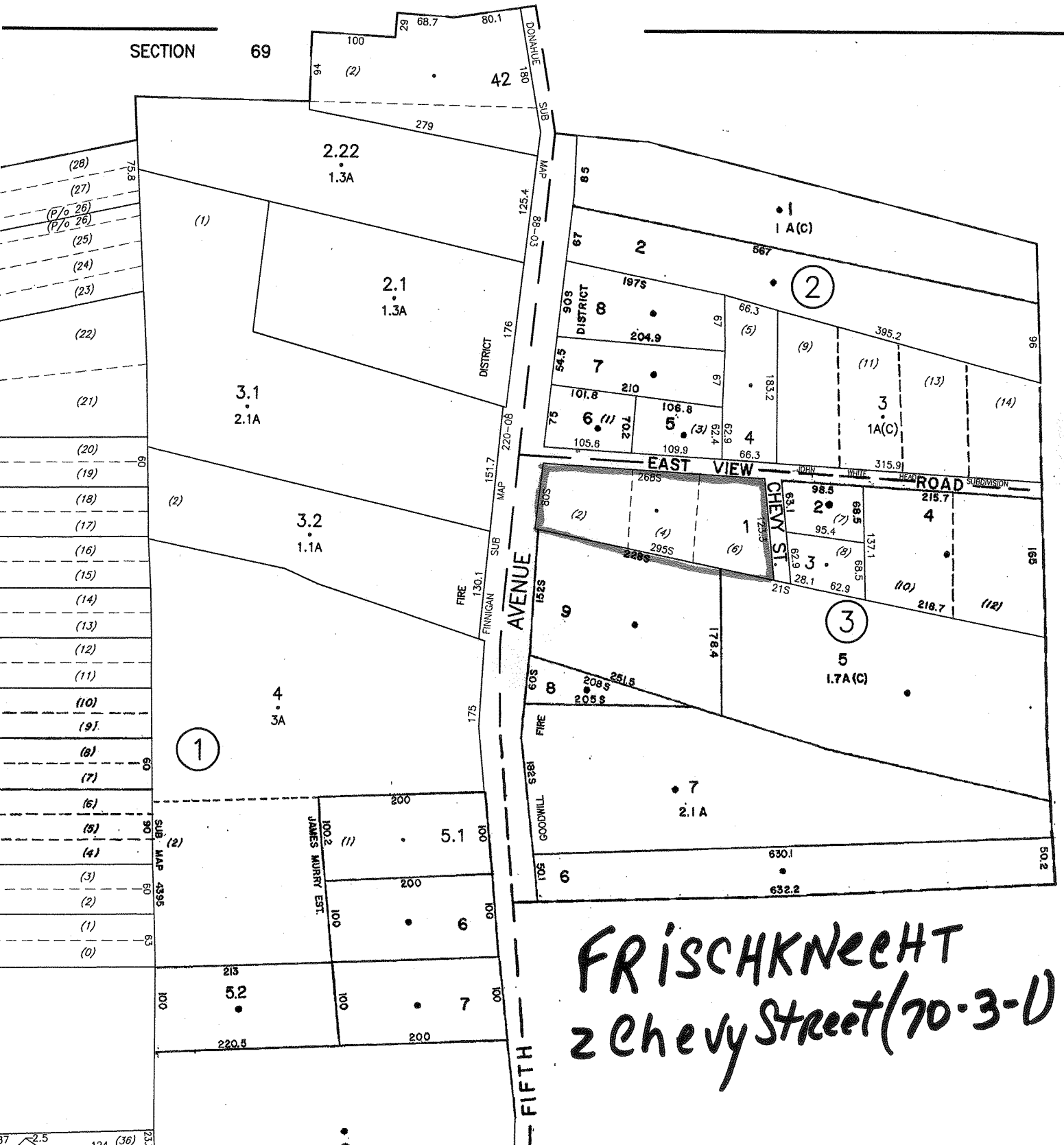
27. MANNER OF DEATH: NATURAL CAUSE 1 ACCIDENT 2 HOMICIDE 3 SUICIDE 4 UNDETERMINED CIRCUMSTANCES 5 PENDING INVESTIGATION 6
 28. WAS CASE REFERRED TO CORONER OR MEDICAL EXAMINER? NO YES
 29A. AUTOPSY? YES NO
 29B. IF YES, WERE FINDINGS USED TO DETERMINE CAUSE OF DEATH? NO YES

30. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), AND (C))
 PART I. IMMEDIATE CAUSE:
 (A) CARDIOPULMONARY ARREST
 (B) MYELOBLASTOSIS
 (C) ATHEROSCLEROTIC HEART DISEASE
 PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I(A):
 DID TOBACCO USE CONTRIBUTE TO DEATH? NO YES PROBABLY UNKNOWN

31A. IF INJURY, DATE: MONTH: DAY: YEAR:
 31B. INJURY LOCALITY: (City or town and county and state)
 31C. DESCRIBE HOW INJURY OCCURRED:
 31D. PLACE OF INJURY:
 31E. INJURY AT WORK? NO YES

31F. IF TRANSPORTATION INJURY, SPECIFY: 1 Driver/Operator 2 Passenger 3 Pedestrian
 32. WAS DECEDENT HOSPITALIZED IN LAST 2 MONTHS? NO YES
 33A. IF FEMALE: Not pregnant within last year 1 Pregnant at time of death 2 Not pregnant, but pregnant within 42 days of death
 33B. DATE OF DELIVERY: MONTH: DAY: YEAR:

SECTION 69



FRISCHKNECHT
 2 Chevy Street (70-3-U)