

ST 60574

**BARGAIN AND SALE DEED WITH COVENANT AGAINST
GRANTOR'S ACTS**

(wrsh) 4p65
140
205
4600
405
11520
10305.

THIS INDENTURE, made the 10th day of May, 2022,

between

Mark Janson, of 610 Stanford Road Millbrook New York 12545

party of the first part, and

Daniel Yagard of 255 West 84th Street Apt. 8E New York NY 10024

party of the second part,

WITNESSETH, that the party of the first part, in consideration of Ten and 00/100 Dollars (\$10.00), 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 Washington, County of Dutchess and State of New York, commonly known as 610 Stanford Road and as is more particularly described on Schedule "A", which is attached and made a part hereof.

BEING THE SAME PREMISES as conveyed by Edawrd Froelich and Joanne I. Froelich to Mark Janson, by deed dated June 5, 2018 and recorded in the Dutchess County Clerk's Office on June 8, 2018 in Document No.02-2018-4080.

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,

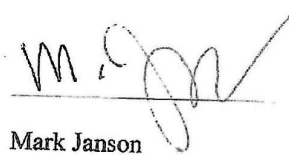
TOGETHER with the appurtenances and all the estate and rights of the party of the first part
in and to said premises,

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.

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.


Mark Janson

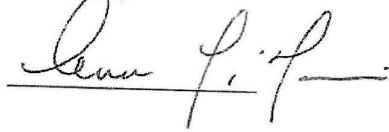
Acknowledgement

State of New York

County of Dutchess

ss:

On the 20th day of May, 2022, before me, the undersigned, a Notary Public in and in for said state, personally appeared **Mark Janson**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.



Notary Public

ANN M. MARVIN
NOTARY PUBLIC-STATE OF NEW YORK
No. 01MA6141607
Qualified in Ulster County
My Commission Expires 02-27-2026

Please return by mail to:

✓ Raymond P. Raiche, Esq
355 main Street
Beacon, NY 12508

TITLE NO. RCA-ST-60574
REVISED 5/18/2022
SCHEDULE A

ALL that certain piece or parcel of land situate in the Town of Washington, County of Dutchess and the State of New York, is more particularly described as follows:

BEGINNING at an iron rod on the easterly bounds of Stanford Drive at the southwest corner of lands, now or formerly, Cornell (Doc #02 2021 53507), said point being the northwest corner of herein described parcel;

THENCE running easterly along a stonewall and the southerly bounds of Cornell, South 75°08'00" East 272.73 feet to an iron pipe on the westerly bounds of lands, now or formerly, Hitchcock Cattle Corp. (Deed Liber 1712, Page 313);

THENCE running southerly along the westerly bounds of Hitchcock Cattle Corp., South 33°38'00" West 336.42 feet to an iron rod on the northerly bounds of lands now or formerly, Toad Hill LLC (Doc #02 2021 4599);

THENCE running westerly along the northerly bounds of Toad Hill Road, North 56°40'00" West 258.82 feet to an iron rod on the easterly bounds of aforementioned Stanford Road;

THENCE running northerly along the easterly bounds of Stanford Road, North 33°46'00" East 250.03 feet to the point or place of **BEGINNING**.

For conveyancing only,
to be conveyed

Together with all right, title if intended and interest of, in and to any streets and road abutting the above described premises, to the center line thereof.

Certificate and Report of Title - New York
FORM 2215-5



TOWN OF WASHINGTON
BUILDING AND ZONING DEPARTMENT
P.O. Box 667, 10 Reservoir Drive
Millbrook, NY 12545
Phone (845) 677-3419 Fax (845) 677-1195
www.washingtonny.org

03/28/2022

River City Abstract of Hudson Valley, Inc.
11 Raymond Avenue
Suite 35
Poughkeepsie, NY 12603

Re: 610 Stanford Rd. Tax Grid # 6766-00-042590

Owner: Mark Janson

Title No. RCA-ST 60574

To Whom it May Concern:

Please be advised that the above mentioned property:

This is to certify that this parcel is coded Residential: One Family Year Round Residence (210)

Description of Property: 1.74 Acres.

1-story, built in 1955.

1 kitchen, 4 bedrooms, 3 full and 1 half bathrooms, 1 fireplace, basement is partial and unfinished.

40 square foot covered porch built in 1955.

On 5/06/2020, a Certificate of Occupancy was issued for removing one full bathroom and a laundry room, creating a mudroom and upgrading the electrical service.

224 square foot covered porch built in 1994. A Retroactive Certificate of Occupancy was issued 11/09/2021.

144 and 100 square foot storage sheds built prior to the adoption of either building or zoning enforcement in the Town of Washington. No Certificates of Occupancy could be located, nor are any required.

Copies of Certificates of Occupancy are attached.

A site visit has not been conducted to confirm the findings of this search.

Any improvements made after 1984 require a Building Permit followed by a Certificate of Occupancy or Compliance.

A search of the Town of Washington Building Department records indicates that no building violations exist.

Additionally, the fire department is volunteer.

Stanford Rd is maintained by the Town of Washington.

Sincerely,


James Finley
Building Inspector and Zoning Administrator



**TOWN OF WASHINGTON
BUILDING AND ZONING DEPARTMENT**

10 Reservoir Road
P.O. Box 667
Millbrook, NY 12545
Phone (845) 677-8321 Fax (845) 677-2085
Email: zoning@washingtontny.org

CERTIFICATE OF OCCUPANCY

Certificate No.: 20-2407

Location of Property: 6766-00-042590-0000, 610 Stanford Rd

Property Owner: Mark Janson

Description of Completed Project: ~~remove bathroom and laundry room, create mudroom~~
Electrical service added

I have examined the premises described in the "Application for Building or Zoning Permit" No. 02407 and find the work performed is in compliance with the work described in the approved application; therefore, the completed project may be used for the purposes described in the "Application for Building Permit" No. 02407. There are No Violations on record.

Signature

[Handwritten Signature]
Building Inspector
Town of Washington

Date Signed

5-6-20

Post this Certificate of Occupancy on the property for one month after receipt, so that it may be read by the public.



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BUILDING AND ZONING DEPARTMENT
P.O. Box 667, 10 Reservoir Drive
Millbrook, NY 12545
Phone (845) 677-3419 Fax (845) 677-1195
www.washingtonny.org

CERTIFICATE OF OCCUPANCY

Certificate No: 11921

Location of Property: 6766-00-042595, 610 Stanford Rd

Property Owner: Mark Janson

Description of Project: Retroactive permit of

- Covered porch
- Type of Construction: VB
- Assembly Occupant Load: N/A
- Automatic Sprinkler System-Provided: No-Required: No
- 7' 3"x 27' 9" covered porch built in 1994. Concrete footings, wood framed, painted wood decking, wood ceiling, asphalt shingles.

On 11/09/2021 a cursory walk through was conducted at the above referenced address. The inspection for a Certificate of Occupancy was exposed-to-view conditions, directly visible and no destructive or intrusive techniques were employed, nor special apparatus to explore concealed conditions.

The building(s) do not/does not appear to present a compromise to the safety or well being of any occupants and qualifies for a Certificate of Occupancy. However, this does not imply that the property is free of code violations. Should a future inspection reveal such violations, a building permit must be obtained by the owner and a Certificate of Occupancy or a Certificate of Compliance will be issued when such corrective work as is necessary has been completed.

In the event that erection, construction, enlargement, alteration, removal, improvement, demolition, conversion, or change in the nature of the occupancy, will occur or has occurred, succeeding the issuance of this Certificate, appropriate building permits and Certificates of Occupancy/Compliance will be required.

Signature



Building Inspector
Town Of Washington

Date Signed

11/01/2021

Post this Certificate of Occupancy on the property for one month after receipt, so that it may be read by the public.

Short Environmental Assessment Form

Part 1 - Project Information

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			
Name of Action or Project: Yadgard Swimming Pool			
Project Location (describe, and attach a location map): Directly Behind House (see attached plans)			
Brief Description of Proposed Action: Installation of an 18 x 40 custom inground gunite swimming pool			
Name of Applicant or Sponsor: Daniel Yadgard / Four Seasons Pool Service		Telephone: 518-789-0591	
Address: PO Box 622 / 5935 N. Elm Ave		E-Mail: fourseasonssvc@optonline.net	
City/PO: Millerton		State: NY	Zip Code: 12546
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 <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:			YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?			1.74 acres less than .02 acres 1.74 acres
4. Check all land uses that occur on, are adjoining or near the proposed action: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Urban <input checked="" type="checkbox"/> Rural (non-agriculture)</div> <div style="width: 50%;"><input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)</div> <div style="width: 50%;"><input type="checkbox"/> Forest <input type="checkbox"/> Agriculture</div> <div style="width: 50%;"><input type="checkbox"/> Aquatic <input type="checkbox"/> Other(Specify):</div> <div style="width: 50%;"><input type="checkbox"/> Parkland</div> </div>			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?	NO	YES	
If Yes, identify: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation services available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?	NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?	NO	YES	
If No, describe method for providing potable water: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?	NO	YES	
If No, describe method for providing wastewater treatment: _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	



Town of Washington

Building Department
10 Reservoir Drive • P.O. Box 667
Millbrook, NY 12545

(845) 677-3419 EXT 112 • buildinginspector@washingtontny.org

Application for Building Permit

This application must be completely filled out with ink and submitted to the Building Office at the Town of Washington Town Hall. To be submitted along with this application:

1. Two complete plans of the proposed construction, showing materials and equipment to be used, and the details of structural, mechanical, plumbing, electrical, and Energy Code Compliance, as applicable. The Building Inspector may require that these plans be stamped and signed by a New York State registered architect or engineer.
2. A plot plan showing the proposed construction in relation to the property line boundaries, existing structures, and wetlands, if applicable.
3. Owner's Authorization Form and Insurance information as required, see below.

Applicant: Name 4 Seasons Swimming Pools
Address: 5935 North Elm Ave P.O. Box 622 Millerton NY Phone: 518-789-0591
Email: fourseasonssue@optonline.net

Property Owner: Name: Daniel Yagard
Address: 610 Stanford Rd Millbrook NY 12545 Phone: _____

Signed and Notarized Owner's Authorization Form Attached ☒ OR ☐ Property Owner same as Applicant

Property: Address: 610 Stanford Rd Millbrook NY 12545

Tax Grid ID Number: _____ Zoning District: _____

Is the proposed project located in a wetland or 100 year flood plain? NO

Proposed Work: Setbacks from property line: Front _____, Rear _____, Side 1 _____, Side 2 _____ ☐

New Building ☐ Addition ☐ Alteration/Renovation ☐ Repair ☐ Installation(HVAC, etc) ☐ Demolition ☐ Retroactive C/O

☒ Swimming Pool/Hot Tub ☐ Fireplace/Wood/Pellet Stove ☐ Roofing/Siding ☐ Deck ☐ Tent >400FT² ☐ Agricultural

☐ Propane Tank ☐ Shed or Barn ☐ Solar ☐ Other (please specify) 18 X 40

Builder's Name: 4 Seasons Swimming Pool Phone: 518-789-0591

Builder's Address: 5935 North Elm Ave

Builder's Email: fourseasonssue@optonline.net

Builders must provide proof of Workers Compensation Insurance (C105.2 or U26.3) and proof of Disability Benefits Compensation (DB120.1) Homeowners or Sole Proprietors may provide CE-200 Certificate of Attestation of Exemption. ☐ Builder's Insurance Information attached ☐ Exemption Form Attached

Estimated Cost of Project: \$133,000^{ce} Description of Proposed Work (include square footage as applicable):

Please read, initial, and sign page 2.

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

***** 061663887
FOUR SEASONS POOL SERVICE CORP
PO BOX 622
MILLERTON NY 12546



SCAN TO VALIDATE
AND SUBSCRIBE

POLICYHOLDER FOUR SEASONS POOL SERVICE CORP PO BOX 622 MILLERTON NY 12546		CERTIFICATE HOLDER TOWN OF WASHINGTON 10 RESERVOIR DRIVE, P.O. BOX 667 MILLBROOK NY 12545	
POLICY NUMBER A1430 908-2	CERTIFICATE NUMBER 120856	POLICY PERIOD 08/30/2021 TO 08/30/2022	DATE 8/1/2022

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 1430 908-2, 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](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.

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

VALIDATION NUMBER: 551151763

AFFIDAVIT TO BE COMPLETED BY APPLICANT/OWNER

State of NY }
County of NY } ss:

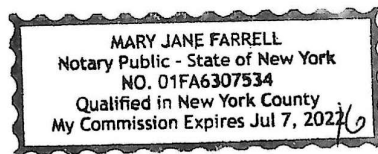
DANIEL YADGAROV being duly sworn, deposes and says:

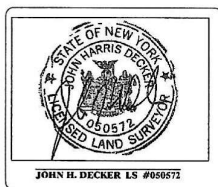
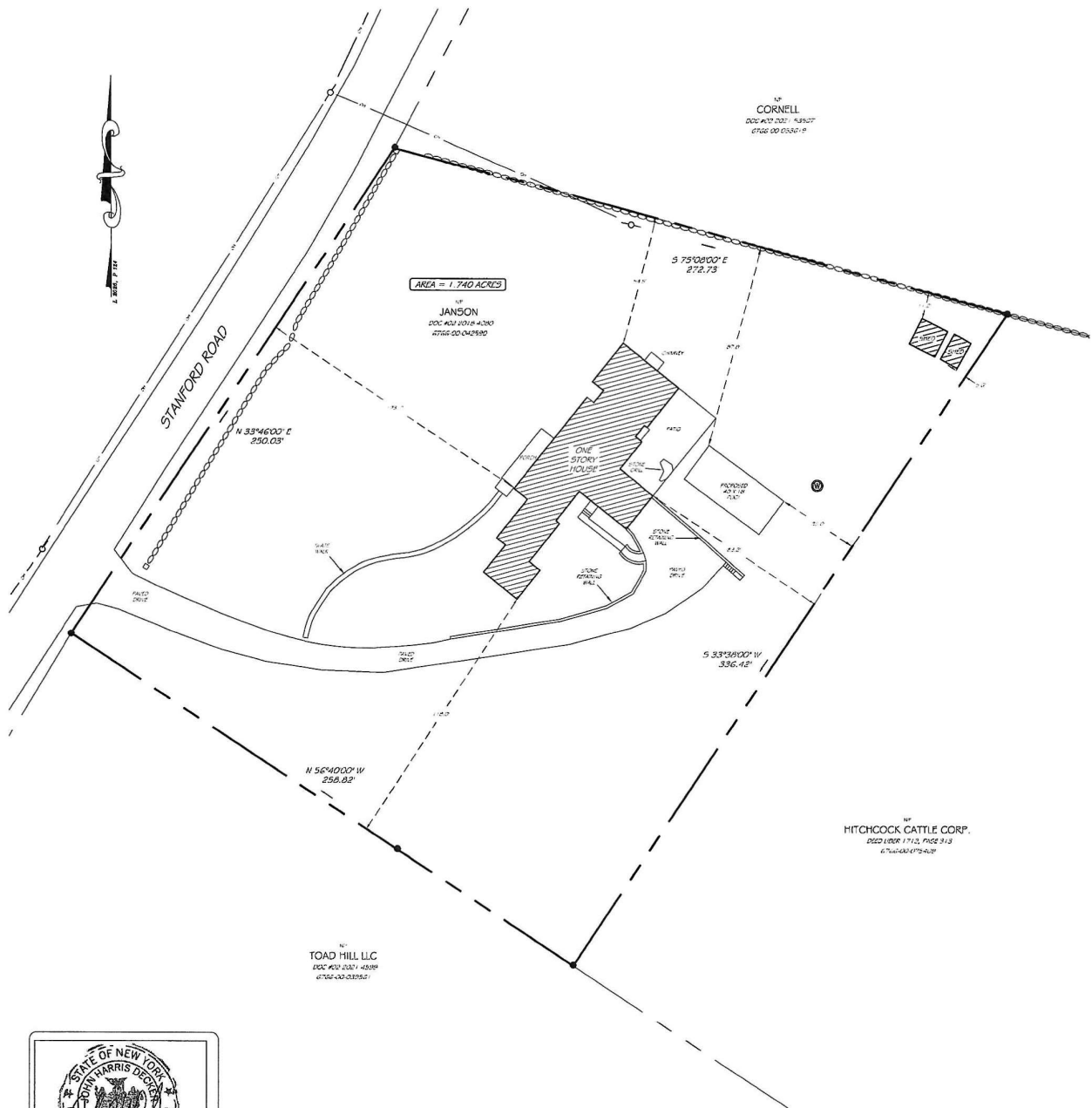
1. That he/she resides at 610 STANFORD RD. in the County of DUTCHESS and the State of NEW YORK. That he/she is the Owner / Agent of the Owner of the within property as described in the foregoing application for Subdivision / Site Plan / Special Use Permit approval(s) and that the statements contained therein are true to the best of his/her knowledge and belief.
2. That we hereby authorize KEVIN EISENMANN of FOUR SEASONS to act as our representative in all matters regarding the application that may come before the Town of Washington Planning Board.
3. That he/she has the legal right to make or authorize the making of said application.
4. That he/she understands that the Town of Washington Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury he/she declares that he/she has examined this affidavit and that it is true and correct.

Applicant/Owner

Applicant/Owner

Notary Public





LEGEND	
---	PROPERTY BOUNDS
OH	OVERHEAD WIRES
○	UTILITY POLE
●	WELL
●	IRON ROD/PIPE
✱	TREE - SHRUB

DECKER
SURVEYING

JOHN H. DECKER, L.S.
291 FRALIGH LANE
BRIE HOOK, NY 11711
Phone No. (645) 758-4442
deckersurveying@comcast.net

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UNAUTHORIZED ALTERATION OR ADDITION TO A SURVEY MAP BEARING A LICENSED LAND SURVEYOR'S SEAL IS A VIOLATION OF SECTION 7109, SUB-DIVISION 2, OF THE NEW YORK STATE EDUCATION LAW.

ONLY COPIES OF THE ORIGINAL OF THIS SURVEY MAP MARKED WITH AN ORIGINAL OF THE LAND SURVEYOR'S INKED SEAL OR HIS EMBOSSED SEAL SHALL BE CONSIDERED TO BE VALID TRUE COPIES.

IT IS HEREBY CERTIFIED THAT THIS SURVEY WAS PREPARED IN ACCORDANCE WITH THE EXISTING CODE OF PRACTICE FOR LAND SURVEYORS ADOPTED BY THE NEW YORK STATE ASSOCIATION OF PROFESSIONAL LAND SURVEYORS.

CERTIFICATIONS INDICATED HEREON SIGNIFY THAT THIS SURVEY WAS PREPARED IN ACCORDANCE WITH THE EXISTING CODE OF PRACTICE FOR LAND SURVEYORS. SAID CERTIFICATIONS SHALL RUN ONLY TO THE PERSON FOR WHOM THE SURVEY IS PREPARED, AND ON HIS BEHALF TO THE TITLE COMPANY, LENDING INSTITUTION AND THE GOVERNMENTAL AGENCY LISTED HEREON, AND TO THE ASSIGNEES OF THE LENDING INSTITUTION. CERTIFICATIONS ARE NON-TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS.

SURVEYED AS PER MAPS AND DEEDS OF RECORD AND AS IN INDICATED POSSESSION ON OR BEFORE MAY 7, 2022.

THIS SURVEY WAS PREPARED WITHOUT BENEFIT OF AN ABSTRACT OF TITLE REPORT AND IS SUBJECT TO WHATEVER STATE OF FACTS SUCH A REPORT MAY REVEAL.

CERTIFIED TO:

- DANIEL YADGARD
- STEWART TITLE INSURANCE COMPANY
- RONDOUT SAVINGS BANK, ISAQA, ATIMA

PROPOSED POOL LOCATION

LANDS OF YADGARD

TOWN OF WASHINGTON DUTCHESS COUNTY, NEW YORK

SEPTEMBER 26, 2022 1" = 30'