



TOWN OF SHELTER ISLAND
P.O. BOX 1549
SHELTER ISLAND, NY 11964

SHELBY MUNDY
TOWN CLERK

631-749-1166
FAX 631-749-3436
TOWNCLERK@SHELTERISLANDTOWN.GOV

APPLICATION FOR PERMIT TO CONDUCT BUSINESS ON TOWN PROPERTY TO THE TOWN BOARD OF THE TOWN OF SHELTER ISLAND

APPLICATIONS ARE DUE BY FEBRUARY 27, 2026

Fees:	Commercial Trucks	\$350	Transient use	\$50/season
	10x10 space:	\$350	(1 day per week, no more than 2 hours)	
	20x20 space:	\$500	Transient use	\$100/season
			(2 days per week, no more than 2 hours each day)	

This application must be completed in its entirety. Any missing or incomplete information will prevent this application from being presented to the Town Board.

Applicant Information:

Please provide a copy of applicant's photo I.D.

Applicant Name: Bon Spa (Bonheur Supreme Spa) Alexson Co
 Address: 55 W 116th St. #150 New York NY 10026
 Email: bonheursupremespa@gmail.com Cell #: [REDACTED] Office #: 440 253 9766
 Contact Person (if different from applicant): Alexandra "Alexson" Roy
 Email: [REDACTED] Cell #: [REDACTED] Office #: _____

If the applicant is other than the owner, please provide the following information:

Owner Name: _____

Attached hereto and designated as Exhibit A, is an affidavit from the owner giving the applicant authority to make this application.

Nature of the Business – Please review the following guidelines and provide a description of services:

- Retail is not permitted on Town Beaches
- Shelter Island Brick's & Mortar's will be considered to have priority
- RFP's will be accepted for competing businesses

Relaxing and Therapeutic massages and physical therapy on the beach

Number of Employees: 1-4 independant contractors

Does your business require you to obtain a permit from:
(If yes to any of the below please attach copy of permit)

DEC FEMA Suffolk County Department of Health
 ABC (Liquor License) Other (Please Specify _____)

No other permits required with the exception of this application.

Requested Location(s)

Name, Address, Location of Town property where business will be conducted

Crescent Beach (front of Sunset Beach Hotel) 35 N. Ferry Rd Shelter Island, NY 11964

Wades Beach- This location has a two business limit with 20'x20' area, which includes a maximum tent size of 10'x10'. Duplication of services will not be permitted. No utilization of the beach or pavilion.

Crescent Beach- This location has a five business limit with a 20'x20' area, which includes a maximum tent size of 10'x10'. Duplication of services will not be permitted.

Site Map Required - Please supply a site map of where the proposed business will be located including the configuration of the property; the names and record owners of the adjoining properties; the streets or highways abutting said property; the size and location of any existing buildings.

Site Map Attached Yes No

Operating Hours

Permitted hours are 9AM - 7PM

Setup date MAY 15, 2026

Opening date MAY 22, 2026

Hours

* S	Start	<u>9am</u>	Finish	<u>7pm</u>
S	Start	<u>9am</u>	Finish	<u>7pm</u>
M	Start	<u>9am</u>	Finish	<u>7pm</u>
T	Start	<u>9am</u>	Finish	<u>7pm</u>
(W	Start	<u>9am</u>	Finish	<u>7pm</u>
* T	Start	<u>9am</u>	Finish	<u>7pm</u>
F	Start	<u>9am</u>	Finish	<u>7pm</u>

Closing Date: September 13, 2026

Cleanup date: September 14, 2026

Parking

Expected number of vehicles intended to use the Town property at any one time 2

Provide a parking plan including a map showing how parking shall be arranged including the layout of any parking area for motor vehicles, including the means of ingress and egress to such parking area.
A separate parking permit is required for use of parking space.

Parking Map Attached Yes No

Operations

Describe all structures or equipment to be erected for the business use including any tents, huts, trailers, chairs, etc. Provide photos of special equipment

2 tents 10x10 and storage bin to store supplies

Describe the Number and Types of Vehicles involved in business. Provide photos if not standard car or pickup truck.

Toyota Sienna (CRC 3766-GA)

Expected maximum number of people intended to use the Town property at one time 2

Describe the method and manner in which sanitary facilities are to be provided for the disposal of human waste, garbage and other debris.

Spray and whips area several times daily Hospital grade disinfectants, Sanitizer available mask optional, paper towels and paper cups properly disposed @ sunset hotel

Noise: Are you requesting a sound system or is there equipment that is part of the business operation that generates noise (i.e. generator or engine) amplified music or other noise

Yes No Description of device _____

If yes to above provide a diagram and statement showing the type, number and location of any sound amplifiers, loud speakers, sound trucks or other similar sound equipment, generator, engine or other device that will be creating said noise

Sound/Noise Diagram Attached Yes No

Lighting; if there are to be outdoor lights or signs provide, a map showing the number, location, size, type and illuminating powers of such lights and signs.

Lighting Map Attached Yes No

Liter / Debris: The area must be completely cleaned when business is completed each day and at the end of the season.

Insurance: Please supply a copy of a certificate of insurance in compliance with §33-2 of the Shelter Island Town Code. Town of Shelter Island must be listed as co-insured and state services offered.

Insurance Certificate Attached Yes No

Applicant Signature

Date

02-20-2020



PARKING

LOCATION

Crescent Beach



**Venture Out Paddle
Board Rentals**



Sunset Beach Hotel



**massage therapy
Bonheur Supreme Spa**

Shore Rd



Crescent Beach

LIFEGUARD

BAR SPA

VOLLEYBALL

PARKING

42

Crescent Beach

2-Tents 10'x10' each

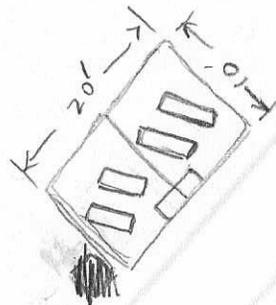
2x4-Massage Tables

1 - LARGE TABLE

1 - Storage for supplies



42



20 feet from stairs



Sunset Beach Hotel

Paddle Rentals



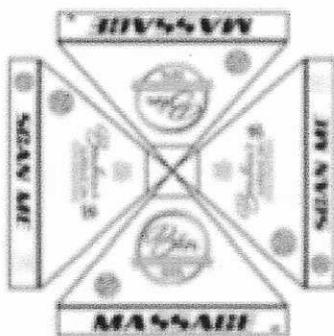
Shore Rd



www.eurmax.com

Customized

Size:10x10



Handwritten notes or scribbles in the top left corner.

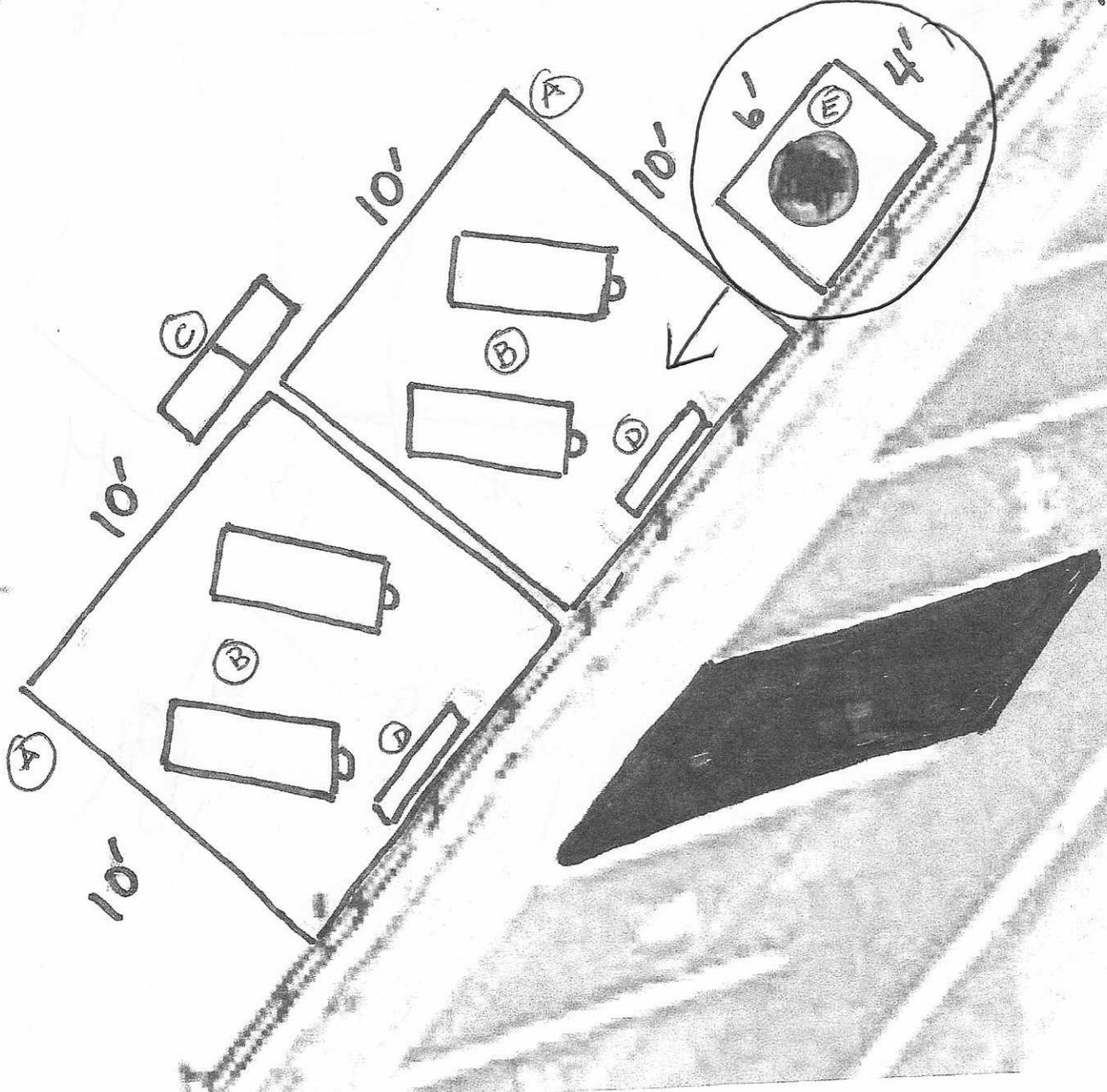


Crescent Beach



- A 2 - Tents 10'x10' each
- B 2-4 - Massage Tables
- C 1 - Large Table
- D 2 - Small Benches

- E 1 - Shed (small) (parking spot)
- P



*The University of the State of New York
Education Department
Office of the Professions*

REGISTRATION CERTIFICATE
Do not accept a copy of this certificate

License Number: 020537-01

Certificate Number: 3792933



ROY TYRONE ALEXANDRE
55 WEST 116TH ST
APT 150
NEW YORK

NY 10026-0000

is registered to practice in New York State through 02/28/2029 as a(n)
MASSAGE THERAPIST

LICENSEE/REGISTRANT

Paul W. C. Thompson
EXECUTIVE SECRETARY

COMMISSIONER OF EDUCATION

David S. Heath
DEPUTY COMMISSIONER
FOR THE PROFESSIONS

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