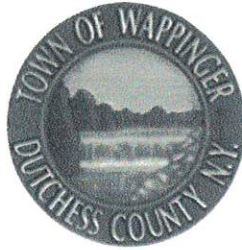


TOWN OF WAPPINGER



RECEIVED

FEB 02 2022

Planning Department
Town of Wappinger

PLANNING BOARD & ZONING BOARD OF APPEALS

20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
PH: 845-297-6256
Fax: 845-297-0579

Application for an Area Variance

Appeal No.: 22-7745

Date: Feb. 2, 2022

TO THE ZONING BOARD OF APPEALS, TOWN OF WAPPINGER, NEW YORK:

I (We), George Schmitt residing at 27 Hilltop Drive, Wappingers Falls, NY 12590, (phone) 845-298-2230, hereby,

appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator, dated January 18, 2022, and do hereby apply for an area variance(s).

Premises located at: 27 Hilltop Drive, Wappingers Falls, NY 12590

Tax Grid No.: 6258-04-930064

Zoning District: R20

1. Record Owner of Property:

George and Anne-Catherine Schmitt

Address: 27 Hilltop Drive, Wappingers Falls, NY 12590

Phone Number: 845-298-2230

Owner Consent dated: 02-02-2022

Signature: [Signature]

Print Name: George Schmitt

2. Variance(s) Request:

Variance No. 1

I (We) hereby apply to the Zoning Board of Appeals for a variance(s) of the following requirements of the Zoning Code.

240-37
(Indicate Article, Section, Subsection and Paragraph)

Required: 40 ft offset to rear yard

Applicant(s) can provide: 30.8 ft offset to rear yard

Thus requesting: 9.2 ft variance to rear yard offset

To allow: installation of new in-ground pool to replace existing in-ground pool in same location

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance
Appeal No.: 22-7745

Variance No. 2

I (We) hereby apply to the Zoning Board of Appeals for a variance(s) of the following requirements of the Zoning Code.

240-37
(Indicate Article, Section, Subsection and Paragraph)

Required: 20 ft offset to Left side yard

Applicant(s) can provide: 15.1 ft offset to Left side yard

Thus requesting: 4.9 ft variance to Left side yard offset

To allow: installation of new in-ground pool to replace existing in-ground pool in same location

3. Reason for Appeal (Please substantiate the request by answering the following questions in detail. Use extra sheet, if necessary):

A. If your variance(s) is (are) granted, how will the character of the neighborhood or nearby properties change? Will any of those changes be negative? Please explain your answer in detail.

No change to character of the neighborhood or to nearby properties. New pool, fence, and deck are being installed in the same locations as the existing pool, fence and deck

B. Please explain why you need the variance(s). Is there any way to reach the same result without a variance(s)? Please be specific in your answer.

Existing in-ground pool was built in 1972 when the rear yard offset requirement was 20 ft and the Left side yard offset requirement was 10 ft. New in-ground pool is being placed in the same footprint as existing pool and cannot be located any closer towards the house structure.

C. How big is the change from the standards set out in the zoning law? Is the requested area variance(s) substantial? If not, please explain in detail why it is not substantial.

The change is not substantial to the standards set in the zoning law, and are replacing the existing structures that were built during the previous zoning law standard.

D. If your variance(s) is (are) granted, will the physical environmental conditions in the neighborhood or district be impacted? Please explain in detail why or why not.

The existing in-ground pool is located behind a 6 ft high privacy fence. The new pool will be located behind a 6 ft privacy fence. The new fence will be more aesthetically pleasing than the existing fence.

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance
Appeal No.: 22-7745

E. How did your need for an area variance(s) come about? Is your difficulty self-created?
Please explain your answer in detail.

The existing in-ground pool was built in 1972 when the rear yard offset requirement was 20 ft

and the Left side yard offset requirement was 10 ft. New in-ground pool is being placed within
the same footprint as existing pool and cannot be located any closer towards the house structure.

F. Is your property unique in the neighborhood that it needs this type of
variance? Please explain your answer in detail.


Most houses face either Hilltop Drive or Edgehill Drive; our house faces Magura Road, which is
a connector road between Hilltop and Edgehill. Because of that, the house has a limited depth to
the rear yard.

4. List of attachments (*Check applicable information*)

- (x) Survey dated: December 2021, Last revised _____ and
Prepared by: Sheridan Land Surveyors.
- (x) Plot Plan dated: 10-29-21.
- () Photos
- () Drawings dated: _____.
- (x) Letter of Communication which resulted in application to the ZBA.
(e.g., recommendation from the Planning Board/Zoning Denial)
Letter from: Zoning Board of Appeals Dated: January 18, 2022
- () Other (*Please list*): _____

5. Signature and Verification

Please be advised that no application can be deemed complete unless signed
below. The applicant hereby states that all information given is accurate as of
the date of application.

SIGNATURE: 
(Appellant)

DATED: 2/2/22

SIGNATURE: _____
(If more than one Appellant)

DATED: _____

FOR OFFICE USE ONLY

1. THE REQUESTED VARIANCE(S) ☐ **WILL** / ☐ **WILL NOT** PRODUCE AN UNDESIRABLE CHANGE IN THE CHARACTER OF THE NEIGHBORHOOD.
2. ☐ **YES** / ☐ **NO**, SUBSTANTIAL DETRIMENT WILL BE CREATED TO NEARBY PROPERTIES.
3. THERE ☐ **IS (ARE)** / ☐ **IS (ARE)** NO OTHER FEASIBLE METHODS AVAILABLE FOR YOU TO PURSUE TO ACHIEVE THE BENEFIT YOU SEEK OTHER THAN THE REQUESTED VARIANCE(S).
4. THE REQUESTED AREA VARIANCE(S) ☐ **IS** ☐ **ARE** NOT SUBSTANTIAL.
5. THE PROPOSED VARIANCE(S) ☐ **WILL** / ☐ **WILL NOT** HAVE AN ADVERSE EFFECT OR IMPACT ON THE PHYSICAL OR ENVIRONMENTAL CONDITIONS IN THE NEIGHBORHOOD OR DISTRICT.
6. THE ALLEGED DIFFICULTY ☐ **IS** / ☐ **IS NOT** SELF-CREATED.

CONCLUSION: THEREFORE, IT WAS DETERMINED THE REQUESTED VARIANCE IS
☐ **GRANTED** ☐ **DENIED**

CONDITIONS / STIPULATIONS: The following conditions and/or stipulations were adopted by the resolution of the Board as part of the action stated above:

☐ **FINDINGS & FACTS ATTACHED.**

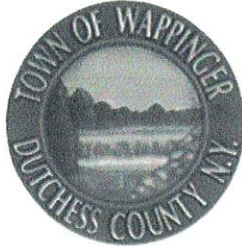
DATED: _____

ZONING BOARD OF APPEALS
TOWN OF WAPPINGER, NEW YORK

BY: _____
(Chairman)

PRINT: _____

TOWN OF WAPPINGER



PLANNING BOARD & ZONING BOARD OF APPEALS

20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
PH: 845-297-6256
Fax: 845-297-0579

Owner Consent Form

Project No: _____

Date: Feb. 2, 2022

Grid No.: 6258-04-930064

Zoning District: R20

Location of Project:

27 Hilltop Drive, Wappingers Falls, NY 12590

Name of Applicant:

George Schmitt 845-298-2230

Print name and phone number

Description of

Project: Replace existing 18' x 36' in-ground swimming pool with 23' x 36' kidney shaped pool, gas pool heater and pool lights, replace 16' x 16' deck and new fence.

I, George Schmitt, owner of the above land/site/building hereby give permission for the Town of Wappinger to approve or deny the above application in accordance with local and state codes and ordinances.

02/02/2022

Date


Owner's Signature

845-298-2230

Owner's Telephone Number

George Schmitt

Print Name and Title ***

*** If this is a Corporation or LLC, please provide documentation of authority to sign.

If this is a subdivision application, please provide a copy of the deed.

Short Environmental Assessment Form

Part 1 - Project Information

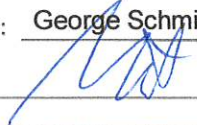
Instructions for Completing

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: Schmitt residence; replacement of in-ground pool, fence, deck			
Project Location (describe, and attach a location map): 27 Hilltop Drive, Wappingers Falls, NY 12590			
Brief Description of Proposed Action: Replace existing 18' x 36' in-ground swimming pool with 23' x 36' kidney shape pool, gas pool, gas pool heater and pool lights, replace 16' x 16' deck and new fence.			
Name of Applicant or Sponsor: George Schmitt		Telephone: 845-298-2230	
		E-Mail: georgeschmitt1966@gmail.com	
Address: 27 Hilltop Drive			
City/PO: Wappingers Falls		State: New York	Zip Code: 12590
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?		NO	YES
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.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?		NO	YES
If Yes, list agency(s) name and permit or approval:		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		<u>0.43</u>	acres
b. Total acreage to be physically disturbed?		<u>0.05</u>	acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>0.43</u>	acres
4. Check all land uses that occur on, are adjoining or 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			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input checked="" type="checkbox"/>	<input 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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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 checked="" type="checkbox"/>	<input 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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: _____ _____ _____			

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>George Schmitt</u> Date: <u>02/02/2022</u>		
Signature: <u></u> Title: _____		

Town of Wappinger
20 Middlebush Rd.
Wappingers Falls, NY 12590
(845) 297-6256

To: Schmitt, George
27 Hilltop Dr

SBL: 6258-04-930064-0000
Date of this Notice: 01/18/2022

Zone:
Application: 40982

For property located at: 27 Hilltop Dr

Your application to:

***** See Notes in Comment ***** REPLACE EXISTING 18' X 36' IN-GROUND SWIMMING POOL WITH 23' X 36' KIDNEY SHAPE POOL, GAS POOL HEATER AND POOL LIGHTS, REPLACE 16' X 16' DECK AND NEW FENCE
POOL ALARM ASTM F 2208 REQUIRED **ALARM AFFIDAVIT REQUIRED** **FINAL INSPECTION BY CERTIFIED ELECTRICAL INSPECTOR** **FINAL INSPECTION BY BUILDING INSPECTOR** **MUST HAVE TEMPORARY BARRIER INSTALLED IMMEDIATELY AFTER COMMENCEMENT OF CONSTRUCTION**
PERMANENT BARRIER MUST BE INSTALLED WITHIN 90 DAYS OF COMMENCEMENT OR 90 DAYS OF PERMIT ISSUANCE **POOL NOT TO BE USED WITHOUT CERTIFICATE OF COMPLIANCE****

is denied for the following deficiency under Section **240-37** of the Zoning Laws of the Town of Wappinger.

Where 40 feet to the rear property line is required, the applicant can provide 30.8 ft., for a new IG Pool.

Where 20 feet to the side property line is required, the applicant can provide 15.1 ft., for a new IG Pool.

	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	<u>40</u> ft.	<u>30.8</u> ft.
SIDE YARD (LEFT):	<u>20</u> ft.	<u>15.1</u> ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.
FRONT YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.

You have the right to appeal this decision to the Zoning Board of Appeals within 60 days of the date of this letter. This Zoning Board of Appeals meets the second and fourth Tuesday of the month. The area variance appeal will require at least two meetings, one for discussion and one for a Public Hearing. The required forms can be obtained at this office or on our website at www.townofwappingerny.gov

Very Truly,



Zoning Administrator
Town of Wappinger

RECEIVED

SEP 01 2021

Building Department
TOWN OF WAPPINGER

TOWN OF WAPPINGER BUILDING DEPARTMENT

20 Middlebush Road, Wappingers Falls, N.Y. 12590

telephone: 845-297-6256 fax: 845-297-0579

APPLICATION FOR BUILDING PERMIT

APPLICATION TYPE: ☒ Residential
☐ New Construction ☐ Commercial
☐ Renovation/Alteration ☐ Multiple Dwelling

ZONE: R20 DATE: 9/7/2021
APPL #: 40982 PERMIT # _____
GRID: 6258-04-930064

APPLICANT NAME: Aqua-Men Pool Construction *David
ADDRESS: #10 Martin St Pine Bush NY 12566
TEL #: 8456367665 CELL: 8452341178 FAX #: _____ E-MAIL: david@aquamenpool.com

*
NAME OWNER OF BUILDING/LAND: George Schmitt & Anne-Catherine Schmitt
PROJECT SITE ADDRESS: 27 Hilltop Drive, Wappingers Falls, NY 12590
MAILING ADDRESS: _____
TEL #: 845-298-2230 CELL: 347-585-4281 FAX #: _____ E-MAIL: george.schmitt1966@gmail.com

*
BUILDER/CONTRACTOR DOING WORK:
COMPANY NAME: Aqua-Men Pool Construction
ADDRESS: #10 Martin St. Pine Bush NY 12566
TEL #: 6367665 CELL: 2341178 FAX #: N/A E-MAIL: david@aquamenpool.com

DESIGN PROFESSIONAL NAME: _____
TEL #: _____ CELL: _____ FAX #: _____ E-MAIL: _____

APPLICATION FOR: Replace Existing Pool w/new fence,
and 16'x16' new deck (65) 10/29/21
and gas pool heater and pool lights (65) 10/29/21

23x36 Kidney Shape

*
SETBACKS: FRONT: 32.4ft REAR: _____ L-SIDEYARD: 57.4ft R-SIDEYARD: _____

SIZE OF STRUCTURE: _____

ESTIMATED COST: _____ TYPE OF USE: _____

NON-REFUNDABLE APPL. FEE: 200 PAID ON: 9/7/21 CHECK # 1122 RECEIPT #: 2021-24562

BALANCE DUE: _____ PAID ON: _____ CHECK # _____ RECEIPT #: _____

APPROVALS:

ZONING ADMINISTRATOR:

☐ Approved ☒ Denied Date: 9-18-22

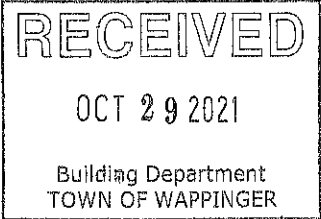
FIRE INSPECTOR:

☐ Approved ☐ Denied Date: _____

Signature of Applicant

Signature of Building Inspector

TOWN OF WAPPINGER
PLOT PLAN



Building Permit # _____

Date _____

Address: 27 Hilltop Drive, Wappingers Falls, NY 12590

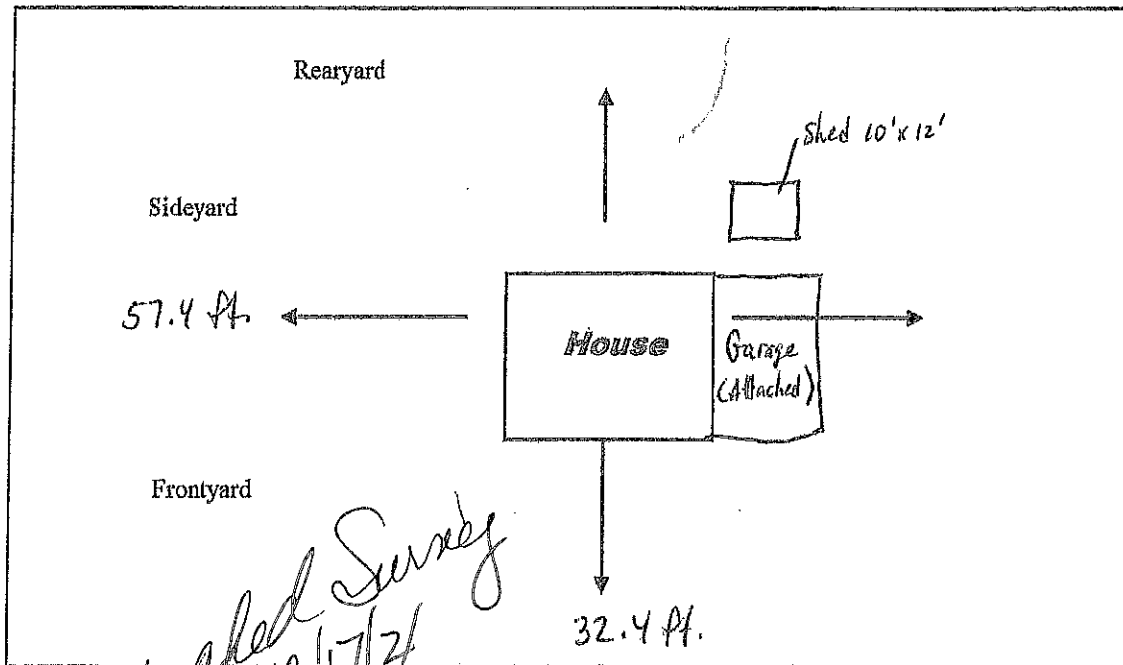
Interior/Corner Lot. circle one

Owner of Land George Schmitt

Zone: R20

LIST ALL EXISTING STRUCTURES ON PROPERTY: (ie: Pool, shed, decks, detached garage)

- ✕ 1. House, garage, shed (8x14), in-ground pool, stockade fence (6ft), deck (16x16), patio, See Attached existing conditions drawing October 2021



See
Attached
Existing
Conditions
Drawing Oct 2021

see attached Survey
dated 12/17/21

Draw proposed structure on plot plan.
Indicate Location Setbacks to both sides and rear property line
measurement of structure you are applying for.

[Signature]
Signature

Approved:/Rejected: _____

Date: _____

Zoning Administrator

REVISED