

**TOWN OF WAPPINGER**

**PLANNING BOARD**

**PROJECT NAME:** Ashcraft & Longobardi Lot Line Re-alignment

**MEETING DATE:** July 6, 2022

**ACCOUNT NUMBER:** 22-5217

**DATE PREPARED:** June 16, 2022

     **SITE PLAN**      **SPECIAL USE PERMIT**   X   **SUBDIVISION**

**THE ATTACHED HAS BEEN REFERRED TO YOU FOR YOUR COMMENTS AND RECOMMENDATIONS. PLEASE SUBMIT ANY COMMENTS TO THE TOWN OF WAPPINGER PLANNING BOARD, 20 MIDDLEBUSH ROAD, WAPPINGERS FALLS, NY 12590 WITHIN FIFTEEN (15) DAYS.**

  1   **TOWN FILE**  
  7   TOWN OF WAPPINGER PLANNING BOARD  
  1   ENGINEER TO THE TOWN  
  1   PLANNER TO THE TOWN  
  1   ATTORNEY TO THE TOWN  
     HIGHWAY SUPERINTENDENT  
     FIRE PREVENTION BUREAU  
     RECREATION  
     ARMY CORP. OF ENGINEERS  
     DUTCHESS COUNTY DEPT. OF PLANNING  
  1   DUTCHESS COUNTY DEPT. OF PUBLIC WORKS  
     NEW YORK STATE DEPT. OF TRANSPORTATION  
  1   DUTCHESS COUNTY DEPT. OF HEALTH  
  1   DUTCHESS COUNTY SOIL & WATER  
     NYS DEPT OF D.E.C  
     TOWN OF FISHKILL  
     TOWN OF EAST FISHKILL  
     TOWN OF LAGRANGE  
     VILLAGE OF WAPPINGER PLANNING BOARD  
     BUILDING INSPECTOR  
  1   ZONING ADMINISTRATOR-BARBARA ROBERTI  
     TOWN CLERK  
     CAMO POLUTION  
     STORM WATER MANAGEMENT (WALTER ARTUS)  
     CENTRAL HUDSON

\*\*\*\*\* PLEASE NOTE ANY VIOLATIONS UPON YOUR REVIEW\*\*\*\*\*

# TOWN OF WAPPINGER

## ZONING ADMINISTRATOR

Barbara Roberti  
Ext. 128

## PLANNING BOARD SECRETARY

Bea Ogunti  
Ext. 122



PLANNING DEPARTMENT  
20 MIDDLEBUSH ROAD  
WAPPINGERS FALLS, NY 12590  
(845) 297-6256 ext. 122  
Fax (845) 297-0579  
www.townofwappinger.us

RECEIVED

JUN 14 2022

Planning Department  
Town of Wappinger

TOWN SUPERVISOR  
Richard Thurston

TOWN BOARD  
William H. Beale  
Angela Bettina  
Robert Johnston  
Michael Kuzmich

## PRELIMINARY LAYOUT APPLICATION FOR SUBDIVISION OF LAND

Application # 22-5217  
Application Fee: \$ 500.00

DATE: 6/8/2022  
ESCROW FEES 1,500.00

**Note:** This application shall conform in all respects to the Land Subdivision Regulations of the Planning Board of the TOWN OF WAPPINGER.

1. Proposed Name of Subdivision: Ashcraft & Longobardi Lot Line Re-alignment
  2. Location of Property: 58 Balfour Dr Wappingers Falls, NY 12590  
Tax Section: 6257-02-668542 Block \_\_\_\_\_ Lot (2) 6257-02-664553
  3. Name and Address of Applicant: Kim Ashcraft  
58 Balfour Dr Wappingers Falls, NY 12590  
Phone No. 914-474-8112 Email: kim.ashcraft1@gmail.com  
Corporation, give name of agent: \_\_\_\_\_  
Phone No. \_\_\_\_\_
  4. Name and Address of Record Owner: (58) Kimberky ashcraft & JoAnn Longobardi  
(56) LAURA ALEXANDER TYLER AS TRUSTEE OF THE 8ELOIN PAPIO TRUST AGREEMENT  
Phone No. 845-214-5893 Email: laura91586@hotmail.com
  5. A statement of liens, mortgages, or other encumbrances are attached hereto -  
(If none, so state) none
  5. A statement of any easements relating to the property is attached hereto -  
(If none, so state) none
  6. Deed or deeds recorded in County Clerk's Office:  
Date: 1997 (58) Liber: 1998 (58) Page: 9 (58) 02-2021 2400 5/20/2021 (56)
  7. I own or have an interest in abutting property as stated on the attached sheet.  
(If none, so state) \_\_\_\_\_
  8. Name, address, and license number of Engineer or Land Surveyor: SHERIDAN LAND SURVEYORS  
49721 Phone No. (845) 849 - 2217
- According to the Dutchess County Soil Survey, the following soil types are found on the property:  
\_\_\_\_\_

9. According to the Dutchess County Soil Survey, the following soil types are found on the property:

This Property is in the B-20 Zone.

Preliminary Layout covers .0429 acres.

Approximate number of lots 2.

Does owner propose to submit Final Subdivision Plat to cover entire Preliminary Layout, or file same in sections?

ys

Does the Preliminary Layout cover the entire holding of the applicant? yes

Does the applicant propose to dedicate to the public all streets, highways, and parks shown on the Preliminary Layout?

n/a

Give number of acres which applicant proposes to dedicate to public use for parks and/or playground purposes.

none

Does owner intend to request any waivers of the requirements of the Land Subdivision Regulations of this Board upon the submission of the Final Plat for approval? no

If any waivers of any requirements are to be requested, list them and give reasons why such requirements should be waived.

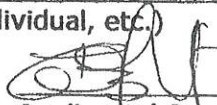
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Kim ashcraft

Print name ( Corporation, LLC, Individual, etc.)

6/8/2022

Date



Applicant / Owner or representative's signature

Kim Ashcraft owner  
Type Name and Title \*\*\*\*\*

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



# TOWN OF WAPPINGER



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## FINAL SUBDIVISION PLAT APPROVAL APPLICATION

Application # 22-5217 DATE: 6/8/2022  
Received by: \_\_\_\_\_

1. The undersigned hereby makes application for approval of a subdivision plat entitled:

—changing the lot lines—  
which covers Section \_\_\_\_\_ Comprising 071 acres, the entire area of  
429 acres shown on the Preliminary Layout approved by the Planning Board on  
\_\_\_\_\_, (cross out words not applicable) which has been completed in accordance  
with the Land Subdivision Regulations of the Planning Board of \_\_\_\_\_, and the  
details of which are as stated in the application for consideration of the Preliminary Layout, and are  
hereby reaffirmed with the same force and effect as though stated herein. (If any differences, attach  
statement of same.)

Name of Owner: Kim Ashcraft

Name of Subdivision: \_\_\_\_\_

Tax Grid No. 6257-02-668542 Phone No. 914-474-8112

2. The applicant's itemized estimate of the cost of the required public improvements is attached  
herein.

a. Road \$ 0 b. Water \$ 0  
c. Sewer \$ 0 d. Drainage \$ 0

3. Road names if applicable

a. Dedicate  
b. Private

4. Resolution of Preliminary Plat Approval dated \_\_\_\_\_, expires \_\_\_\_\_

(Signed) [Signature]  
Owner/Applicant

Kim Ashcraft  
Type Name and Title

By: \_\_\_\_\_  
(To be used only by Corporation Agent)

6/8/22  
Date

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: 22-5217

Date: 6/8/2022

Grid No.: 6257-02-668542 & 6257-02-664553

Zoning District: R-20

Location of Project:

56-58 Balfour Dr Wappingers Fall, NY 12590

Name of Applicant:

Kim Ashcraft 914-474-8112

Print name and phone number

Description of

Project: Upon approval from the Zoning board; I am purchasing part of my neighbor's  
( 56 Balfour Dr. ) property so I would like the lot line changed to reflect the both of our  
new lots sizes.

I Kimberly Ashcraft, 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.

6/8/22  
Date

[Signature]  
Owner's Signature

914-474-8112  
Owner's Telephone Number

Kimberly Ashcraft Owner 58 Balfour  
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.



TOWN OF WAPPINGER



PLANNING BOARD & ZONING BOARD OF APPEALS

30 MIDDLEBUSH ROAD  
WAPPINGER FALLS, NY 12590  
PH: 845-257-8256  
Fax: 845-257-8579

Owner Consent Form

Project No: 22-5217 Date: 6/7/2022

Grid No.: 6257-02-668542 & 6257-02-664553 Zoning District: R-20

Location of Project:

56-58 Balfour Dr Wappingers Fall, NY 12590

Name of Applicant:

Kim Ashcraft 914-474-8112  
Print name and phone number

Description of

Project: Upon approval from the Zoning board, I am purchasing part of my neighbor's  
(56 Balfour Dr.) property so I would like the lot line changed to reflect the both of our  
new lots sizes.

Alexander LAT  
I, Laura Tyler (trustee), 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.

Date: 6/7/22

Laura Alexander Tyler  
Owner's Signature

845-214-5893  
Owner's Telephone Number

Alexander LAT  
Laura Tyler Trustee  
Print Name and Title \*\*\*

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