

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.: 22-7766

Date: 10-6-22

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

I (We), PETER J. PAVONE residing at 8 REGGIE DR
W.F., NY, 12590, (phone) 845-632-6358, hereby,
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 9-13-2022, and do hereby apply for an area variance(s).

Premises located at: 8 REGGIE DR W.F., NY 12590
Tax Grid No.: 6257-01-115679
Zoning District: R20

1. Record Owner of Property:

PETER J. PAVONE
Address: 8 REGGIE DR W.F. N.Y. 12590
Phone Number: 845-632-6358
Owner Consent dated: 10-6-2022

Signature: Peter J. Pavone
Print Name: PETER J. PAVONE

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 Feet to rear

Applicant(s) can provide: 7 Feet

Thus requesting: 33 Feet

To allow: for the legalization of a 12'x16' gazebo

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 Feet to side (right)
Applicant(s) can provide: 8 Feet
Thus requesting: 12 Feet
To allow: for the legalization of a 12' x 16' gazebo

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 NEGATIVE CHANGE, GAZEBO LOCATED AT
REAR CORNER OF PROPERTY WITH LARGE
EVERGREEN ALONG PROPERTY LINES

- 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.

AT THE TIME GAZEBO WAS BUILT MY BELIEF
WAS 5' MIN WAS REQUIREMENT FROM LINES.
THERE WAS NO OTHER PLACE TO PUT IT, WITH THE
TREE LOCATIONS AND POOL IT MADE THE REAR
CORNER THE ONLY PLACE IT COULD GO.

- 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.

YE IT IS SUBSTANTIAL WITH MY WRONG ASSUMPTION
OF REQUIREMENTS.

- 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.

THERE WOULD BE NO IMPACT. IT DOESN'T AFFECT
RAIN OR SNOW FALL AT ITS LOCATION, NO EFFECT
ON DRAINAGE.

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance

Appeal No.: 22-7766

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

IT WAS SELF-CREATED DO TO MY INCORRECT
UNDERSTANDING OF DISTANCES FROM PROPERTY
LINES.

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

BEING A CORNER LOT, CRETTUS REDUCES
MY USABLE BACKYARD AREA

4. List of attachments (Check applicable information)

- (☒) Survey dated: APRIL 8, 1987, Last revised _____ and
Prepared by: J. CHARLES BOOLUKOS PLS.
- () Plot Plan dated: _____.
- (☒) Photos
- () Drawings dated: _____.
- () Letter of Communication which resulted in application to the ZBA.
(e.g., recommendation from the Planning Board/Zoning Denial)
Letter from: _____ Dated: _____
- () 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: Peter J. Parn
(Appellant)

DATED: 10-6-2022

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: 22-7766
Grid No.: 6257-01-115679

Date: 10-6-22
Zoning District: R20

Location of Project:

8 Reggie Drive

Name of Applicant:

PETER J. PAVONE 845-632-6358

Print name and phone number

Description of

Project: LEGALIZE GARAGE

I Peter J. Pavone, 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.

10-6-22
Date

845-632-6358
Owner's Telephone Number

Peter J. Pavone
Owner's Signature

PETER J. PAVONE
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			
LEGALIZE GAZEBOS			
Name of Action or Project: Peter J. Pavone			
Project Location (describe, and attach a location map): 8 Reggie Drive			
Brief Description of Proposed Action: OBTAIN A VARIANCE FOR GAZEBO LOCATION			
Name of Applicant or Sponsor: PETER J. PAVONE		Telephone: 845-632-6358	
		E-Mail: PPA1109020@AOL.com	
Address: 8 REGGIE DR			
City/PO: WAPPINGER FALLS		State: NY	Zip Code: 12590
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO <input type="checkbox"/>
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.			YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO <input type="checkbox"/>
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? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ 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 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	YES	N/A
5. Is the proposed action,				
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 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 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	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
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 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	YES
	<input checked="" type="checkbox"/>	<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	YES
	<input checked="" type="checkbox"/>	<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	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor/name: <u>Peter J. Pavone</u> Date: <u>10-6-2022</u> Signature: <u>Peter J. Pavone</u> Title: _____		

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

To: Pavone, Peter
8 Reggie Dr

SBL: 6257-01-115679-0000
Date of this Notice: 09/13/2022
Zone:
Application: 42231

For property located at: 8 Reggie Dr

Your application to:
GAZEBO - 12 X 16. NO ELECTRIC.

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 7 feet to the rear property line.
Where 20 feet to the side property line is required, the applicant can provide 8 feet to the side property line for an existing gazebo.

	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	<u>40</u> ft.	<u>7</u> ft.
SIDE YARD (LEFT):	<u> </u> ft.	<u> </u> ft.
SIDE YARD (RIGHT):	<u>20</u> ft.	<u>8</u> ft.
FRONT YARD:	<u> </u> ft.	<u> </u> ft.
SIDE YARD (LEFT):	<u> </u> ft.	<u> </u> ft.
SIDE YARD (RIGHT):	<u> </u> ft.	<u> </u> 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



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 ☐ Renovation/Alteration ☐ Commercial ☐ Multiple Dwelling
ZONE: R80 R20 DATE: 9/7/2022
APPL #: 42231 PERMIT #
GRID: 6257-01-115679

APPLICANT NAME: PETER J PAVONE
ADDRESS: 8 REGGIE DR
TEL # 845-632-6358 CELL 845-464-5874 FAX #: E-MAIL: PPA4109020@AOL.COM

NAME OWNER OF BUILDING/LAND: PETER J PAVONE
PROJECT SITE ADDRESS: 8 REGGIE DR
MAILING ADDRESS: 8 REGGIE DR W.F., N.Y., 12590
TEL # 845-632-6358 CELL 845-464-5874 FAX #: E-MAIL: PPA4109020@AOL.COM

BUILDER/CONTRACTOR DOING WORK:
COMPANY NAME: SELF
ADDRESS:
TEL #: CELL: FAX #: E-MAIL:

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

APPLICATION FOR: GAZEBO LEGALIZATION
12x16 - no electric.

192 SF

SETBACKS: FRONT: 137' 18" REAR: 7' L-SIDEYARD: 80' R-SIDEYARD: 8'
SIZE OF STRUCTURE: 12'x16'
ESTIMATED COST: \$2000.00 TYPE OF USE:

NON-REFUNDABLE APPL. FEE: 150 PAID ON: 9/7/22 CHECK # 4677 RECEIPT #: 2022-01690
BALANCE DUE: PAID ON: CHECK # RECEIPT #

APPROVALS:
ZONING ADMINISTRATOR:
☐ Approved ☒ Denied Date: 9/13/22
Barbara Smith
Peter J Pavone
Signature of Applicant

FIRE INSPECTOR:
☐ Approved ☐ Denied Date:
Signature of Building Inspector

TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date 8-29-2022

Address: 8 REGGIE DR

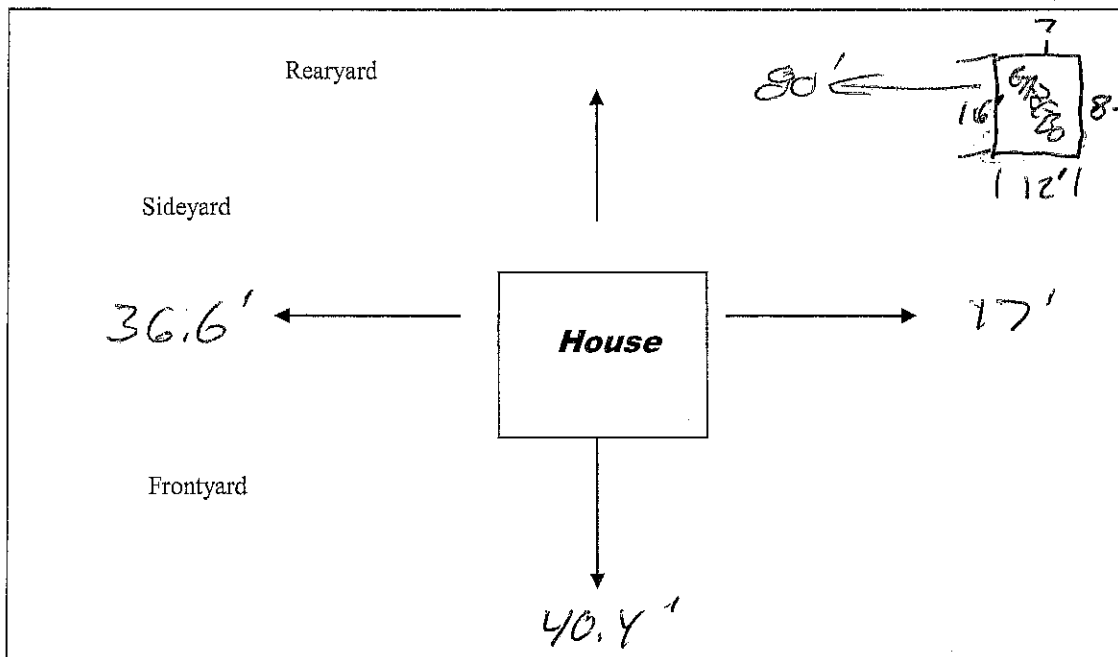
Interior/Corner Lot: circle one

Owner of Land PETER J PAVONE

Zone: R80 R20

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

1. House, POOL, SHED, GAZEBO



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

Peter J Pavone
Signature

Approved: / Rejected

Barbara Roberts
Zoning Administrator

Date: 9-13-22

LOT 59

LANE

N 67° 30' 00" E

CHAINLINE FENCE 1.5' 100.00'

135.00'

9.3'

SHED

AREA
15866 SQ.FT.
0.364± ACRES

160.00'

LOT 57

DARA

N 32° 30' 00" W

N 35.00'

LC=39.27'

24

RAISED RANCH

46

2.40H

36.6'

CONC. WALK

40.4'

MACADAM DRIVE

S 32° 30' 00" E

S 57° 30' 00" W

75.00'

REGGIE

DRIVE

LAND SURVEY MAP

PREPARED

FOR

PETER PAVONE

SITUATE

IN THE

TOWN OF WAPPINGER

DUTCHESS COUNTY

NEW

YORK

SCALE 1 INCH = 20 FEET

APRIL 8, 1987

REFERENCE TO LOT 58 OF MAP 4352











