

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.: 23-7782

Date: 2-20-23

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

I (We), Bryan Dufresne residing at 1 Country Pl, Mohegan Lake, NY., (phone) 518 774 5345, hereby,

appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator, dated 1-3-23, and do hereby apply for an area variance(s).

Premises located at: 127 Chelsea Rd Wappinger NY 12590
Tax Grid No.: 6056-03-461483
Zoning District: R-20

1. Record Owner of Property:

Bryan Dufresne
Address: 127 Chelsea Rd Wappinger NY 12590
Phone Number: 518 774 5345
Owner Consent dated: 2-20-23
Signature: [Signature]
Print Name: Bryan Dufresne

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.

Section: 240-37

(Indicate Article, Section, Subsection and Paragraph)

Required: Rear Setback of 40 ft

Applicant(s) can provide: 38.58 ft

Thus requesting: 1.42 ft

To allow: for the construction of a new house

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.

(Indicate Article, Section, Subsection and Paragraph)

Required: _____

Applicant(s) can provide: _____

Thus requesting: _____

To allow: _____

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.

The Character will not change. The requested change is un-substantial. The approx 1st North change is not noticeable from the road or neighbouring properties.

- 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.

The foundation was laid slightly out of alignment with the original site plan. There is no reasonable way to change the structure to conform.

- 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 approx. 1ft, or less than 5% change from requirement. This is not substantial. This change moves the structure further from all actively used areas.

- 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.

No. Moving the building approx. 1ft North is non-noticeable from the road & neighbouring structures. This change also does not change the properties grade.

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance
Appeal No.: 23-7782

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

It is self-created. The foundation was laid accidentally
aprx. 1ft too far North.

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

The degree of uniqueness does not apply to this application.
This is a Single family New construction Build which is
not unique for this neighborhood.

4. List of attachments (Check applicable information)

Previously
submitted
to building
department



Survey dated: 12-15-22, Last revised _____ and _____

Prepared by: Jonathan N. Miller, LHS

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: Barbara Roberti

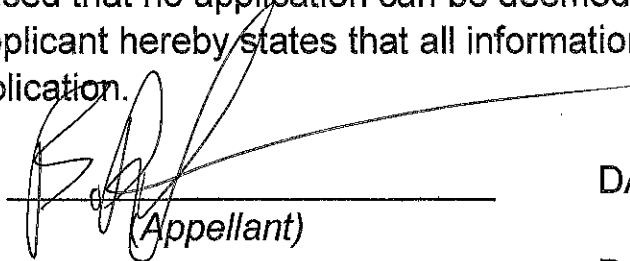
Dated: 1-3-23

() 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: 2-20-23

SIGNATURE: _____

DATED: _____

(If more than one Appellant)

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: 23-7782

Date: 2-20-23

Grid No.: 6056-03-461483

Zoning District: R-20

Location of Project:

127 Chelsea Rd Wappinger NY 12590

Name of Applicant:

Bryan Dufresne 518 774 5345

Print name and phone number

Description of

Project: Single Family New Construction Build

I, B. Dufresne, 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.

2-20-23
Date

B. Dufresne
Owner's Signature

518 774 5345
Owner's Telephone Number

Bryan Dufresne - Owner
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: <div style="font-family: cursive; font-size: 1.2em;">127 Chelsea Rd Wappinger NY - Single Family New Construction</div>			
Project Location (describe, and attach a location map): <div style="font-family: cursive; font-size: 1.2em;">127 Chelsea Rd, Wappinger NY (survey submitted w/ application)</div>			
Brief Description of Proposed Action: <div style="font-family: cursive; font-size: 1.2em;">Zoning Board approval of variance: New construction Dwelling built 1 ft too far North.</div>			
Name of Applicant or Sponsor: <div style="font-family: cursive; font-size: 1.2em;">Bryan Dufresne</div>		Telephone: 518 774 5345 E-Mail: Bryan. Mack. Dufresne@gmail.com	
Address: <div style="font-family: cursive; font-size: 1.2em;">127 Chelsea Rd Wappinger</div>			
City/PO: <div style="font-family: cursive; font-size: 1.2em;">Wappinger</div>		State: <div style="font-family: cursive; font-size: 1.2em;">NY</div>	Zip Code: <div style="font-family: cursive; font-size: 1.2em;">12590</div>
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"/> YES <input 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: <div style="font-family: cursive; font-size: 1.2em;">Town of Wappinger Zoning Board</div>			NO <input type="checkbox"/> YES <input checked="" 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?			25,618 acres sq ft approx 45 acres sq ft 25,618 acres sq ft
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</div> <div style="width: 50%;"><input type="checkbox"/> Rural (non-agriculture)</div> <div style="width: 50%;"><input type="checkbox"/> Industrial</div> <div style="width: 50%;"><input type="checkbox"/> Commercial</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Residential (suburban)</div> <div style="width: 50%;"><input type="checkbox"/> Forest</div> <div style="width: 50%;"><input type="checkbox"/> Agriculture</div> <div style="width: 50%;"><input type="checkbox"/> Aquatic</div> <div style="width: 50%;"><input type="checkbox"/> Other(Specify):</div> <div style="width: 50%;"><input type="checkbox"/> Parkland</div> </div>			

		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 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? N/A		<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? N/A		<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?			NO	YES
If No, describe method for providing wastewater treatment: private septic		<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?		<input checked="" type="checkbox"/>	NO	YES
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?		<input checked="" type="checkbox"/>	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: _____				

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	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" 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
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input 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>B-Dufresne</u> Date: <u>2/20/23</u>		
Signature: <u>[Signature]</u> Title: <u>owner</u>		

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

To: Dufresne, Bryan
131 Chelsea Rd

SBL: 6056-03-461483-0000
Date of this Notice: 01/03/2023

Zone:
Application: 42642

For property located at: 127 Chelsea Rd

Your application to:

VARIANCE FOR NEW HOUSE LOCATION- SEE PERMIT 2022-1083

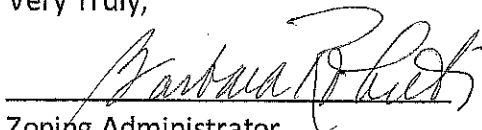
is denied for the following deficiency under Section **240-37** of the Zoning Laws of the Town of Wappinger.

Where 40 feet to the rear property line is required, the applicant can provide 38.58 feet for a new 2 story residence.

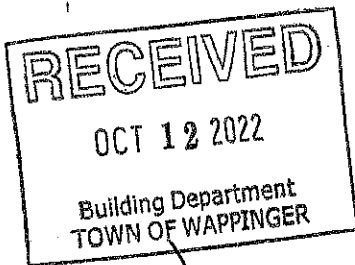
	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	<u>40</u> ft.	<u>38.58</u> ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.
FRONT YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.

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



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:** 10/12/2022
APPL #: 39642 **PERMIT #:** 2022-1083
GRID: 10870-03-461483

APPLICANT NAME: Bryan Dufresne
ADDRESS: 127 Chelsea Rd Wappinger NY 12590
TEL #: X **CELL:** 518 774 5345 **FAX #:** 45 **E-MAIL:** X

NAME OWNER OF BUILDING/LAND: Bryan Dufresne
***PROJECT SITE ADDRESS*:** 127 Chelsea Rd Wappinger NY 12590
MAILING ADDRESS: 11
TEL #: X **CELL:** 518 774 5345 **FAX #:** **E-MAIL:** X

BUILDER/CONTRACTOR DOING WORK:
COMPANY NAME: same as above
ADDRESS:
TEL #: **CELL:** **FAX #:** **E-MAIL:**
DESIGN PROFESSIONAL NAME:
TEL #: **CELL:** **FAX #:** **E-MAIL:**

APPLICATION FOR: Building permit renewal from 2020-0984
New Single Family 2 Story Mansard home.

SETBACKS: FRONT: REAR: L-SIDEYARD: R-SIDEYARD:
SIZE OF STRUCTURE:
ESTIMATED COST: **TYPE OF USE:**

NON-REFUNDABLE APPL. FEE: 150- **PAID ON:** 10/12/22 **CHECK #:** CC **RECEIPT #:** 2022-01951
BALANCE DUE: **PAID ON:** **CHECK #:** **RECEIPT #:**

APPROVALS:

ZONING ADMINISTRATOR:
☐ Approved ☐ Denied **Date:**

[Signature]
Signature of Applicant

FIRE INSPECTOR:
☐ Approved ☐ Denied **Date:**

[Signature]
Signature of Building Inspector