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

Application for all Area variance
Appeal No.: 3/3/2023
TO THE ZONING BOARD OF APPEALS, TOWN OF WAPPINGER, NEW YORK:
1 (We), Brian + Cathy Holley residing at 16 applesance Lane
Wappingers falls, NY, (phone) 845-297-2694/845-235-26/2 hereby,
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 3 3 2023 , and do hereby apply for an area variance(s).
Premises located at: 16 apple sauce have Wapp Falls, NY Tax Grid No.: 6258-64-70/00/ Zoning District: R20
1. Record Owner of Property:
Address: 16 applesaucet fane wf NY Phone Number: 845-297-2694 /845-235-2612 Ceil Holley Owner Consent dated: 3-3-23 Print Name: CAHO Holley
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.
(Indicate Article, Section, Subsection and Paragraph)
Required: 20 feet to the Side yard
Applicant(s) can provide: 8,6
Thus requesting: 11, 4'
To allow: for the legalization of a three Season Room

Application for an Area Variance Appeal No.: 33-7788 E. How did your need for an area variance(s) come about? Is your difficulty self-created? Please explain your answer in detail. bring eveni We are truing to F. Is your property unique in the neighborhood that it needs this type of variance? Please explain your answer in detail. We are on a Cul-du-SAC and face 2 different and therefore limited as to where Could be placed 4. List of attachments (Check applicable information) (W Survey dated: 2132023, Last revised _____ and Prepared by: R Plot Plan dated: 3-3-23 Photos () Drawings dated: () Letter of Communication which resulted in application to the ZBA. (e.g., recommendation from the Planning Board/Zoning Denial) Letter from: <u>Karbara Koberti</u> Dated: 3-15-2 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:

SIGNATURE:

Town of Wappinger Zoning Board of Appeals

FOR OFFICE USE ONLY

UNDESIRABLE CHANGE IN THE CHARACTER OF THE NEIGHBORHOOD.
() YES / () NO, SUBSTANTIAL DETRIMENT WILL BE CREATED TO NEARBY PROPERTIES.
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).
THE REQUESTED AREA VARIANCE(S) () IS () ARE) NOT SUBSTANTIAL.
THE PROPOSED VARIANCE(S) () WILL / () WILL NOT HAVE AN ADVERSE EFFECT OR IMPACT ON THE PHYSICAL OR ENVIRONMENTAL CONDITIONS IN THE NEIGHBORHOOD OR DISTRICT.
THE ALLEGED DIFFICULTY () IS NOT SELF-CREATED.
() GRANTED () DENIED ONDITIONS / STIPULATIONS: The following conditions and/or stipulations were adopted the resolution of the Board as part of the action stated above:
FINDINGS & FACTS ATTACHED.
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: $\frac{33-7788}{6458-04-701001}$	Date: 3/3/2023 Zoning District: R20
Location of Project:	Tille W
	ne, wappingers falls, N,
Name of Applicant: Brian and Cather Holley Print name and p	845-297-2694 Mm 845-235-26 12 phone number
Description of Project: Move shed, bring about reconstruct deck by pool, and enclosed 3 season re	
hereby give permission for the Town of Wappinge accordance with local and state codes and ordina	r to approve or deny the above application in
3/3/2023 Date	Owner's Signature Cathy Corp
845-297-2694 Nm. Owner's Telephone Number	Brian and Cathy Holley 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 dead.

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	
Brian and Cather Holley	
Name of Action or Project:	
16 apple sauce Lane, WAPpingers Falls, NY 1250	10
Project Location (describe, and attach a location map):	
Brief Description of Proposed Action:	
We would like to bring our above ground pool up to code we would like to reconstruct pool deck and bring up to code our screened in deck and enclosed 3 season room	
we would like to reconstruct pool deck and bring up to	
Code our screened in deck and enclosed 3 season room	0
and move our shed away from property line. We woullike to obtain permission/approval from our neighbor who boarders our	Sid
Name of Applicant or Sponsor:	100
Name of Applicant or Sponsor: Telephone: 845-297-2694 Hm	
Brian and Cather Holley E-Mail: Cholley 16 @ gmail.com	
Address:	
16 addresauce Lane	
City/PO: State: Zip Code:	
Wappingers talls 1 12590	
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?	7
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that	e
may be affected in the municipality and proceed to Part 2. If no, continue to question 2.	
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:	
3. a. Total acreage of the site of the proposed action?	
b. Total acreage to be physically disturbed? acres	7
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:	
☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)	
Forest Agriculture Aquatic Other(Specify):	
Parkland	

5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan? 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: 8. a. Will the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: 10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: 11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: 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	! V	N/A
b. Consistent with the adopted comprehensive plan? 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? Note that the proposed action result in a substantial increase in traffic above present levels? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: 10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: 11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment:		
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	ł (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?][
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?		YES
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	Ti	
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:			
Shoreline Forest Agricultural/grasslands Early mid-successional			
☐ Wetland ☐ Urban ☐ Suburban			
5. 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?			
16. Is the project site located in the 100-year flood plan?	NO	YES	
10. Is the project site rocated in the 100-year flood plan:	NO	LES	
		Ш	
17. Will the proposed action create storm water discharge, either from point or non-point sources?	NO	YES	
If Yes,			
a. Will storm water discharges flow to adjacent properties?			
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)?	同		
If Yes, briefly describe:			
18. Does the proposed action include construction or other activities that would result in the impoundment of water	NO	YES	
or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:		/	
If Yes, explain the purpose and size of the impoundment:			
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste	NO	YES	
management facility? If Yes, describe:		/	
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or	NO	YES	
completed) for hazardous waste? If Yes, describe:			
		Ш	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE			
D. 1011 111 2/2/22			
Applicant/sponsor/name: Dran and Cathy Holley Date: 3/3	000		
Signature:			

Town of Wappinger

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

To: Holley, Brian 16 Applesauce Ln

SBL: 6258-04-701001-0000

Date of this Notice: 03/15/2023

Zone:

Application: 42848

For property located at: 16 Applesauce Ln

Your application to:

EXISTING DECK/3 SEASON ROOM/SCREENED DECK/ FRONT DECK LEGALIZE EXISTING 18' X 16' DECK, 12' X 16 SCREENED DECK, 12' X 16 3 SEASON ROOM AND FRONT STEPS **NEED INSPECTION BY TOWN BUILDING INSPECTOR**

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

Where 20 feet to the side yard is required, the applicant can provide 8.6' for a three season room. Where 20 feet to the side yard is required, the applicant can provide 8.6' for a covered screened deck. Where 20 feet to the side yard is required, the applicant can provide 9.4' for an open deck.

	WHAT YOU CAN PROVIDE:	REQUIRED:		
	ft. 3 Seaso Dear	________________________________ 	REAR YARD:	
4	8.6 th. 3 Seasof deck	20ft.	SIDE YARD (LEFT):	
	9.7 Alch	ft.	SIDE YARD (RIGHT):	
7	ft.	ft:	FRONT YARD:	
	ft.	ft.	SIDE YARD (LEFT):	
	ft.	Ħ.	SIDE YARD (RIGHT):	
	ft.	ft. ft. ft. ft.	SIDE YARD (RIGHT): FRONT YARD: SIDE YARD (LEFT):	

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 TOWN OF WAPPINGER BUILDING DEPARTMENT

MAR 03 2023

20 Middlebush Road, Wappingers Falls, N.Y. 12590 telephone: 845-297-6256 fax: 845-297-0579

Building Department Town of Wappinger

APPLICATION FOR BUILDING PERMIT

APPLICATION TYPE: Residential	ZONE: <u>R20</u> - DATE: 3/3/2023
New Construction Commercial	· - ·
Renovation/Alteration Multiple Dwelling	GRID: 6258-04-701001
JAPPLICANT NAME: Brian ar ADDRESS: 16 Applesance 1	eno list Not
TEL # 845-297-2694CELL: 845-235-26121	FAX#: E-MAIL: Cholley 16@gmail.co
795 - 10a-11	1 6
NAME OWNER OF BUILDING/LAND: BY V	an and Cathy Holky
PROJECT SITE ADDRESS: 16 CAPPE	Sauce Lare, WF, NY
TEL #: <u>845-297-<i>2694</i></u> CELL: <u>845-235-26</u> (2)	FAX#: N/A E-MAIL: Cholley 16 @gmail.co
	760
ADDRESS:	
TEL #: CELL:	FAX #: E-MAIL:
DESIGN PROFESSIONAL NAME: TEL #: CELL:	FAX #: E-MAIL:
/APPLICATION FOR: (TEAR DOWN A	ind rebuild) existing deck bring
it up to CODE, Brigain	a existing screened in deck
up to rode bringing enclosing	sed 3 season room up to
code hat trant d	ec/l
Xlata	2 *
SETBACKS: FRONT: REAR:	L-SIDEYARD: R-SIDEYARD:
SIZE OF STRUCTURE: 500 attac	thed Survey Map and hand arawi
SESTIMATED COST: WAKNOWN as of	rype of use: residential paper
Nous	10/03
NON-REFUNDABLE APPL. FEE: 150 PAID ON:	3/8/23 CHECK # 9494 RECEIPT #: 2023_00375
3	3/8/23 CHECK # <u>9494</u> RECEIPT #: <u>2023-00</u> 374
APPROVALS: ZONING ADMINISTRATOR:	IRE INSPECTOR:
O Approved O Denied Date: 3-1523	Approved O Denied Date:
Soubara Thut	
Sum Holles, Cath. ADOg _	
Signature of Applicant S	ignature of Building Inspector
Brian and Cathy Holley	
Print Name or Company Name(if applicable)	

TOWN OF WAPPINGER PLOT PLAN

Building Permit # Date_3/3/2023
iddress: 16 apple sauce Lane WFNY Interior Corner Lot) circle one
owner of Land Brian and Cathy Holley Zone: B20
IST ALL EXISTING STRUCTURES ON PROPERTY: (ie: Pool, shed, decks, detached garage)
House, pool, 2 sheds, I deck, hot tub, screened in deck,
enclosed 3 season room
See attached Survey Map and hard draw paper
Rearyard Sideyard
Recognidideyard
House
Frontyard
Draw proposed structure on plot plan. Indicate Location Setbacks to both sides and rear property line measurement of structure you are applying for.
X Brian Holley, Cathy Hollog Signature
pproved:/Rejected:

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

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 yard
Applicant(s) can provide: 8,6
Thus requesting: 11.4'
To allow: for the legalization of a covered screened deck
Variance No. 3
I (We) hereby apply to the Zoning Board of Appeals for a variance(s) of the following requirements of the Zoning Code.
240-31
(Indicate Article, Section, Subsection and Paragraph)
Required: 20 feet to Side yard
Applicant(s) can provide: 9,4
Thus requesting: 10,6
To allow: for the legalization of an open deck
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.
We are requesting to reconstruct, repair and bring up to code our existing deck, screened in deck and 3 season from pool and relocate 1 shed. We do not feel there will be a negative
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 Shed and decks are not within the proper property line requirements of our I weighbor
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 requested area is not substantial and we would like to obtain permission fapproval from our neighbor who boarders our side lot.
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 environmental Condition issues