#### **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** TO THE ZONING BOARD OF APPEALS, TOWN OF WAPPINGER, NEW YORK: I (We), Jay & Dana Venbenschoten residing at 92 Heckensuch Heights Rd Wappingers fulls NY 12590 \_\_\_\_, (phone) <u>845-3</u>97-6285 appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator, dated S(1)0)3\_\_\_\_\_, and do hereby apply for an area variance(s). Premises located at: <u>QZ</u> <u>Huckensanc</u> <u>Mants</u> <u>Rd</u> <u>Ivanningers</u> falls Tax Grid No.: Zoning District: 1. Record Owner of Property: Address: 92 Mackensaux Munts Phone Number: (845) 397 - (6285 Owner Consent dated: 5/11) 02-3 Signature: Print Name: 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: Applicant(s) can provide: 10 F+

Thus requesting:

To allow: Shot

A Variance

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

Appeal No.: 23-7795

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:
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, we do not have surrounding neighbors on backside of
property where Shed resides.
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.
shed is located at the flattest part of the propert.
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.
40 Foot change which places the Shod in the middle
of the yard. Bohird ow property is useded without
rightys.
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.

	E. How did your need for an area variance(s) come about? Is your diffice Please explain your answer in detail.  we hased the profesty with the Shied in the Shield in the	
F. We are Industria	F. Is your property unique in the neighborhood that it needs to variance? Please explain your answer in detail.  Lin a col-de-sac with Residential and it helps as a so	one Side, form
4. List	st of attachments (Check applicable information)	
(1)	Survey dated:, Last revised  Prepared by: M  Plot Plan dated:	1,702\ and
( )	Photos	
( )	Drawings dated:	
( )	Letter of Communication which resulted in application to the (e.g., recommendation from the Planning Board/Zoning Detector from:  Dated: 3- Other (Please list):	enial)
5. Sigi	gnature and Verification	
belo	ease be advised that no application can be deemed complete slow. The applicant hereby states that all information given is e date of application.	-
SIG	GNATURE: DATED:	5/1/2023
SIG	GNATURE: <u>Dyna (Dyn benschoten)</u> DATED:	5/1/2023

Town of Wappinger Zoning Board of Appeals

Application for an Area Variance
Appeal No.: 23-7795

FC	DR OFFICE USE ONLY			
1.	THE REQUESTED VARIANCE(S) ( ) <b>WILL</b> / ( ) <b>WILL NOT</b> PRODUCE AN UNDESIRABLE CHANGE IN THE CHARACTER OF THE NEIGHBORHOOD.			
2.	( ) YES / (V) NO, SUBSTANTIAL DETRIMENT WILL BE CREATED TO NEARBY PROPERTIES.			
3.	THERE ( ) <b>IS</b> ( <b>ARE</b> ) / ( ) <b>IS</b> ( <b>ARE</b> ) 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) ( ) <b>WILL</b> $/$ ( ) <b>WILL NOT</b> HAVE AN ADVERSE EFFECT OR IMPACT ON THE PHYSICAL OR ENVIRONMENTAL CONDITIONS IN THE NEIGHBORHOOD OR DISTRICT.			
6.	THE ALLEGED DIFFICULTY ( ) IS NOT SELF-CREATED.			
CC	CONCLUSION: THEREFORE, IT WAS DETERMINED THE REQUESTED VARIANCE IS			
	() 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.			
DA	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**

1 0 = 0 00 727 500	Date: 5/1/2023 Zoning District: R.40
Location of Project:	
a) Hackensack HehtsRd wappi	ngers failt
Name of Applicant:  Jefficy Van Benschoten 845-392	2-6285
Print name and phone nu	mber
Description of Project: Shed you're of 10 F Shed is enisting was there the property.	From property line. When we purchased
hereby give permission for the Town of Wappinger to approaccordance with local and state codes and ordinances.	ove or deny the above application in
51112023 Date Owner	y Janua landensensenstor
	inbenschoten — Owner lame 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			
Name of Action or Project: Ne - existing 5he D	w/ overhand	7	
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:	Telephone: (45) 392-4	285	-
Dana Jey Vanberschoton	E-Mail: Jaya Jupl	and.	COM
92 Hacken Saur Myhts Rd.			
City/PO:	State: Zip C	ode:	)
Does the proposed action only involve the legislative adoption of a plan, loca administrative rule, or regulation?	Il law, ordinance,	NO	YES
If Yes, attach a narrative description of the intent of the proposed action and the emay be affected in the municipality and proceed to Part 2. If no, continue to ques	environmental resources that stion 2.	$\bigvee$	
2. Does the proposed action require a permit, approval or funding from any other of the second secon		NO	YES
		$\vee$	Ш
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?	acres  acres  acres		
4. Check all land uses that occur on, are adjoining or near the proposed action:	2.4		
	al Residential (suburban)		
Forest Agriculture Aquatic Other(Spe	ecity):		
r arriana			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	П		
b. Consistent with the adopted comprehensive plan?			
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	)	NO	YES
of the proposed detail consistent man the predominant character of the existing built of flatural landscape.			
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:			П
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?			H
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?		NO	YES
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?		NO	YES
If No, describe method for providing potable water:			
11. Will the proposed action connect to existing wastewater utilities?		210	Amo
11. Will the proposed action connect to existing wastewater utilities?		NO	YES
If No, describe method for providing wastewater treatment:			
			Ш
12. a. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or distri	ct	NO	YES
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 th State Register of Historic Places?	e		Ш
State Register of Historie Flaces:			
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		NO	YES
wetlands or other waterbodies regulated by a federal, state or local agency?			
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?			
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres:			
		1270 gA	

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		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or	NO	YES
Federal government as threatened or endangered?		
		<u> </u>
16. Is the project site located in the 100-year flood plan?	NO	YES
		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)?		
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 Tes, 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:		
If it's, 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:		
II Tes, describe.		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE B MY KNOWLEDGE	EST O	F
Applicant/sponsor/name: Juy/Dava Vanberghoten Date: 5/1/20	23	
Signature: Auturn Title: Owner		

# Town of Wappinger

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

Dava & Lay Van Benscholase To: Perpetua, Donna

92 Hackensack Heights Rd

SBL: 6259-02-732509-0000

Date of this Notice: 03/30/2023

Zone:

Application: 42924

For property located at: 92 Hackensack Heights Rd

Your application to:

POOL & SHED - 27' ROUND ABOVEGROUND POOL AND 12x16 SHED WITH 10x16 OVERHANG ON RIGHT SIDE WITHOUT ELECTRIC. 352 SF - Deck w/ overhang - LEGALIZATION - \*\*CALL 811 PRIOR TO EXCAVATION\*\* \*\*NEED ELECTRICAL INSPECTION BY TOWN APPROVED ELECTRICAL INSPECTOR\*\* \*\*POOL ALARM MUST MEET ASTM F 2208 REQUIREMENTS\*\* \*\*SHED MUST BE ON GRAVEL, CONCRETE SLAB OR PAVERS\*\* \*\*CALL INTO OUR OFFICE FOR FINAL INSPECTION BY TOWN BUILDING INSPECTOR\*\* \*\*POOL NOT TO BE USED WITHOUT CERTIFICATE OF COMPLIANCE\*\* \*\*SHED MUST BE ON GRAVEL, CONCRETE \$LAB OR **PAVERS\*\*** 

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

Where 50 feet to the rear property line is required, the applicant can provide 10 feet for a shed with overhang which is 352 SF.

	REQUIRED:	WHAT YOU CAN PROVIDE:	
REAR YARD:	ft.	/O ft.	
SIDE YARD (LEFT)	tft	ft.	
SIDE YARD (RIGH	T); ft,	ft.	
FRONT YARD:	ft,	ft.	
SIDE YARD (LEFT)	r ft.	ft.	
SIDE YARD (RIGHT		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: O Residential ZONE: R40 DATE: 330 2023	
O New Construction O Commercial APPL #: 42724 PERMIT #	
O Renovation/Alteration O Multiple Dwelling GRID: 10259-02-732509	
APPLICANT NAME: UMA MA JOY JOYBONSCHOLEN	
ADDRESS: 92 Hackensack Weights Rd Wappingers Falls	
TEL#: CELL: (345) 656- FAX#: E-MAIL: JOY 6 JUB OOD, CON	
6930	1
NAME OWNER OF BUILDING/LAND: Dana and Jay Van Benschoten - Per Parel Access 3/29	)C
*PROJECT SITE ADDRESS*: 92 HACKONSACK Heights P.d. Wappingers Falls 12590	)
MAILING ADDRESS:SOMME OS CAMMO.	
TEL#: CELL: 645) 656-6930 FAX#: E-MAIL: JOY @ JVB 1000. COM	
BUILDER/CONTRACTOR DOING WORK: COMPANY NAME: SWY WO COSTUCTION	
ADDRESS: Air port drive wappingers falls, MY, 12590	
TEL#: CELI(: 8\5)397-6285 FAX#: E-MAIL:	
DESIGN PROFESSIONAL NAME: MOUNI Ar Chitects PC	
TEL #(845) 452-1030 CELL: FAX #: E-MAIL: MOUNT - architects. COM	ļ
APPLICATION FOR:	
nght Side No electric. = 352 SF	
* existing *	
SETBACKS: FRONT: REAR: L-SIDEYARD: R-SIDEYARD:	
SIZE OF STRUCTURE:	
ESTIMATED COST: \( \frac{1}{\alpha}, \( \frac{1}{\infty} \). \( \sigma \) TYPE OF USE: \( \frac{1}{\infty} \).	
NON-REFUNDABLE APPL. FEE: D-PAID ON: 3/30/33CHECK # 57/ RECEIPT #: 2003-00507	
LOGAL ZAND BALANCE DUE: 150 PAID ON: 3/30/3 CHECK # 57/ RECEIPT #: 203 -0000	
COPPE CAGIO BALANCE DUB: 1000 PAID ON: 215000 CHECK # 1777 RECEIPT #: 2005 October	
APPROVALS:	
ZONING ADMINISTRATOR: FIRE INSPECTOR:	
O Approved O Denied Date: O Approved O Denied Date:	
- Julain -	
Dava Stanbonce high on ?	
Signature of Applicant Signature of Building Inspector	

# TOWN OF WAPPINGER PLOT PLAN

Building Permit # Date 3.30.73
Address: 92 Hackensack Hights Rd Willis. Interior/Corner Lot: circle one
Owner of Land Zone: R4O
LIST ALL EXISTING STRUCTURES ON PROPERTY: (ie: Pool, shed, decks, detached garage)
1. House, POOI, Shed
Rearyard Shell 12x16 Marks 10 x16 overlang
$\frac{22416}{23525}$ Draw proposed structure on plot plan.
Indicate Apocation Setbacks to both sides and rear property line
measurement of structure you are applying for.
a construction in a construction of the constr
Signature
Approved:/Rejected: Date: 3.30.23
Zoning Administrator