

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.: 23-7805

Date: 9-25-23

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

I (We), DOUGLAS MANN residing at 20 WIDMER ROAD  
WAPPINGERS FALLS N.Y. 12590 (phone) 914-563-6135, hereby,  
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,  
dated 9-27-23, and do hereby apply for an area variance(s).

Premises located at: 20 WIDMER ROAD, WAPPINGERS FALLS N.Y. 12590  
Tax Grid No.: 6658-04-686447  
Zoning District: R-20

1. Record Owner of Property:

DOUGLAS MANN

Address: 20 WIDMER ROAD WAPPINGERS FALLS N.Y. 12590

Phone Number: 914 563-6135

Owner Consent dated: 9-25-23

Signature: Douglas Mann

Print Name: DOUGLAS MANN

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: \_\_\_\_\_

Applicant(s) can provide: \_\_\_\_\_

Thus requesting: 400 sf

To allow: for a 30' x 40' garage

**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.

GIVEN THE FACT THAT THE CURRENT GARAGE IS AN  
EYE SOAR, I FEEL A NEW STRUCTURE WOULD ADD TO  
THE CURB APPEAL AND BE A CONSIDERABLE IMPROVEMENT

- 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.

I NEED TO STORE MY 34 FOOT ENCLOSED TRAILER INDOORS  
FOR BOTH PRIVACY & SECURITY PURPOSES

- 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.

IF THE VARIANCE IS GRANTED THE PROPOSED BUILDING  
WOULD BE 400 SQUARE FEET LARGER THAN THE 800 SQUARE  
FEET ALLOWED FOR MY LOT SIZE

- 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.

NOT TO MY KNOWLEDGE



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

AS EXPLAINED IN SECTION "B" A 28' X 28' 800 SQUARE  
FOOT BUILDING WOULD NO BE SUFFICIENT FOR STORING  
MY TRAILER

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

THERE IS NOTHING UNIQUE ABOUT MY PROPERTY THAT I  
KNOW OF.

4. List of attachments (Check applicable information)

- (☒) **Survey** dated: 8-25-22, Last revised \_\_\_\_\_ and  
Prepared by: Robert V. Oswald  
(☒) **Plot Plan** dated: 9-20-23  
( ) Photos  
( ) Drawings dated: \_\_\_\_\_  
(☒) Letter of Communication which resulted in application to the ZBA.  
(e.g., recommendation from the Planning Board/Zoning Denial)  
Letter from: Barbara Roberti **Dated:** 9-27-23  
( ) 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:** Amylas Mon  
(Appellant)

**DATED:** 9-25-23

SIGNATURE: \_\_\_\_\_  
(If more than one Appellant)

DATED: \_\_\_\_\_

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: 23-7805  
Grid No.: 6158-04-686447

Date: SEPT. 25, 2023  
Zoning District: R20

Location of Project:

20 WIDMER ROAD WAPPINGERS FALLS N.Y. 12590

Name of Applicant: DOUGLAS MANN 914-563-6135

Print name and phone number

Description of Project: REPLACING OLD GARAGE WITH NEW GARAGE.

I DOUGLAS MANN, 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.

Sept 25, 2023  
Date

914-563-6135  
Owner's Telephone Number

Douglas Mann  
Owner's Signature

DOUGLAS MANN (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.

**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:** \_\_\_\_\_



# 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			
<b>Name of Action or Project:</b> <div style="font-family: cursive; font-size: 1.2em;">DOUGLAS MANN</div>			
<b>Project Location (describe, and attach a location map):</b> <div style="font-family: cursive; font-size: 1.2em;">20 WIDMER ROAD, WAPPINGERS FALLS, N.Y. 12590</div>			
<b>Brief Description of Proposed Action:</b> <div style="font-family: cursive; font-size: 1.2em;">CONSTRUCTING OF A 30 WIDE BY 40 LONG DETACHED GARAGE</div>			
<b>Name of Applicant or Sponsor:</b> <div style="font-family: cursive; font-size: 1.2em;">DOUGLAS MANN</div>		<b>Telephone:</b> <div style="font-family: cursive; font-size: 1.2em;">914-863-6135</div> <b>E-Mail:</b>	
<b>Address:</b> <div style="font-family: cursive; font-size: 1.2em;">20 WIDMER ROAD WAPPINGERS FALLS N.Y. 12590</div>			
<b>City/PO:</b>		<b>State:</b> <b>Zip Code:</b>	
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	YES
		<input checked="" type="checkbox"/>	<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:		NO	YES
		<input checked="" type="checkbox"/>	<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: <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 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>			

5. Is the proposed action,	NO	YES	N/A
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 checked="" 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	
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 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 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 checked="" 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"/>
_____		
_____		
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>		
Applicant/sponsor/name: <u>DOUGLAS MANN</u> Date: <u>9-25-23</u>		
Signature: <u>Douglas Mann</u> Title: <u>Owner</u>		



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

To: Mann, Douglas  
20 Widmer Rd

SBL: 6158-04-686447-0000  
Date of this Notice: 09/27/2023  
Zone:  
Application: 43631

For property located at: 20 Widmer Rd

Your application to:

**GARAGE METAL GARAGE 30X40X12 TO REPLACE EXISTING 20X20 GARAGE (TO BE REMOVED) WITH ELECTRIC \*\*NEED FINAL INSPECTION BY TOWN BUILDING INSPECTOR\*\* \*\*NEED ELECTRICAL INSPECTION BY TOWN APPROVED ELECTRICAL INSPECTION AGENCY\*\***

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


Where no accessory structure on one acre shall be more than 800 sf, the applicant can provide 1200 sf for a new 30' x 40' garage.

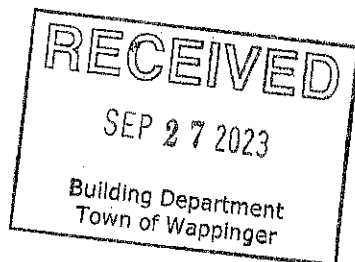
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	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.
FRONT YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.

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](http://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: R-20 DATE: 9-20-23  
APPL #: 43631 PERMIT #  
GRID: 6158-04-686447

APPLICANT NAME: DOUGLAS MANN

ADDRESS: 20 WIDMER ROAD WAPPINGERS FALLS N.Y. 12590

TEL #: NONE CELL: 914-563-6135 FAX #: NONE E-MAIL: NONE  
X-914-563-6135

NAME OWNER OF BUILDING/LAND: DOUGLAS MANN

\*PROJECT SITE ADDRESS\*: 20 WIDMER ROAD WAPPINGERS FALLS N.Y. 12590

MAILING ADDRESS: 20 WIDMER ROAD

TEL #: NONE CELL: 914-563-6135 FAX #: NONE E-MAIL: NONE

### BUILDER/CONTRACTOR DOING WORK:

COMPANY NAME: BOSS BUILDINGS

ADDRESS: 116 EAST MARKET STREET SUITE 200 ELKIN, NORTH CAROLINA 28621

TEL #: 866-888-2009 CELL: NONE FAX #: NONE E-MAIL: SUPPORT@BossBuildings.com

### DESIGN PROFESSIONAL NAME:

TEL #: 866-888-2009 CELL: NONE FAX #: NONE E-MAIL: SAME AS ABOVE

APPLICATION FOR: Metal Garage 30x40x12 to replace  
existing 20x20 garage (to be removed)  
with electric ROOF

SETBACKS: FRONT: 100' REAR: 89' short L-SIDEYARD: 151' R-SIDEYARD: 21'

SIZE OF STRUCTURE: 30x40x12

ESTIMATED COST: \$17,000.00 TYPE OF USE: GARAGE

NON-REFUNDABLE APPL. FEE: 150 PAID ON: 9/27/23 CHECK # 856 RECEIPT #: 2023-01863

BALANCE DUE: \_\_\_\_\_ PAID ON: \_\_\_\_\_ CHECK # \_\_\_\_\_ RECEIPT #: \_\_\_\_\_

### APPROVALS:

#### ZONING ADMINISTRATOR:

☐ Approved ☒ Denied Date: 9-27-23

#### FIRE INSPECTOR:

☐ Approved ☐ Denied Date: \_\_\_\_\_

Douglas Mann  
Signature of Applicant

\_\_\_\_\_  
Signature of Building Inspector

# TOWN OF WAPPINGER PLOT PLAN

Building Permit # \_\_\_\_\_

Date 9-20-23

X Address: 20 WIDMER ROAD

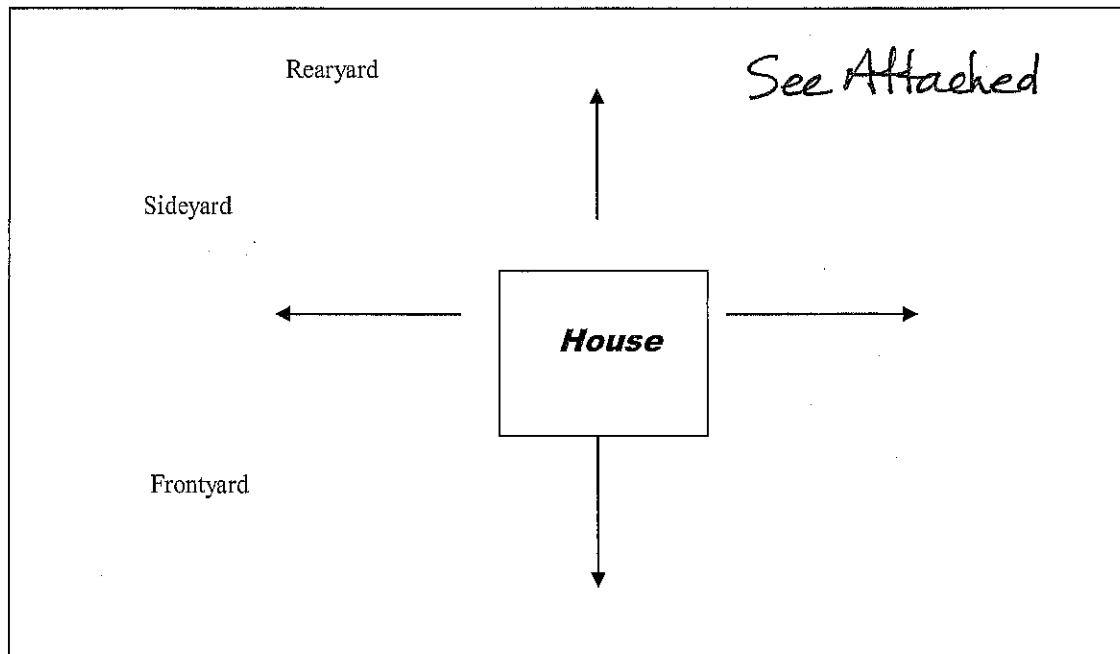
Interior/Corner Lot: *circle one*

X Owner of Land DOUGLAS MANN

Zone: R20

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

1. House, 20x20 DETACHED GARAGE



Draw proposed structure on plot plan.

Indicate Location Setbacks to both sides and rear property line measurement of structure you are applying for.

Douglas Mann  
Signature

Approved:/Rejected: \_\_\_\_\_

Date: \_\_\_\_\_

Zoning Administrator