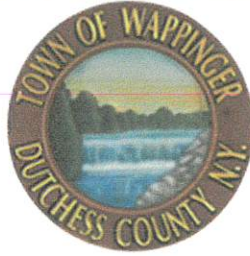


**ZONING BOARD OF APPEALS
AREA VARIANCE
CHECKLIST**

THE FOLLOWING ITEMS MUST BE PRESENTED ON THE SUBMISSION DATE:

- ___ Application: Must state if the applicant is the owner, if not, consent will be required
- ___ Signatures: Must be original signatures
- ___ Letter of Consent: If required
- ___ EAF: Short Form is required (Environmental Assessment Form)
- ___ Survey: Survey of property is required
- ___ Application Fee: Application fee may be paid in cash, check or by credit card. Checks over \$500.00 must be a certified check, bank, or money order made payable to the "Town of Wappinger" (Separate checks are required for application fees and escrow)
- ___ Escrow: Escrow may be paid in cash, or if paying by check, it must be certified check, bank, or money order made payable to the "Town of Wappinger" (Separate checks are required for the application fees and escrow)
- 8 Plans: Number of Plans to be delivered with application to ZBA Secretary

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.: _____

Date: _____

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

I (We), _____ residing at _____

_____, (phone) _____, hereby,

appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,

dated _____, and do hereby apply for an area variance(s).

Premises located at: _____

Tax Grid No.: _____

Zoning District: _____

1. Record Owner of Property:

Address: _____

Phone Number: _____

Owner Consent dated: _____

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: _____

Thus requesting: _____

To allow: _____

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.

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.

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.

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 difficulty self-created?
Please explain your answer in detail.

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

4. List of attachments (*Check applicable information*)

- Survey dated: _____, Last revised _____ and
Prepared by: _____.
- 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: _____
(Appellant)

DATED: _____

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.

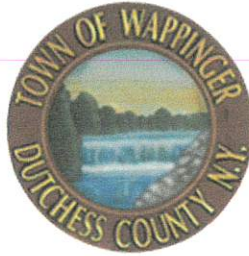
DATED: _____

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: _____

Date: _____

Grid No.: _____

Zoning District: _____

Location of Project:

Name of Applicant:

Print name and phone number

Description of

Project: _____

I _____, 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.

_____ Date

_____ Owner's Signature

_____ Owner's Telephone Number

_____ 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			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
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 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:			NO <input type="checkbox"/>
			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			

5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input 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? If Yes, identify: _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
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?	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
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: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	NO	YES	
	<input 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? 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?	NO	YES	
	<input 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? 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: _____ _____ _____	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

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 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
	<input 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)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes, briefly describe: _____ _____		
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 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 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 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: _____ Date: _____ Signature: _____ Title: _____		

TOWN OF WAPPINGER



PLANNING BOARD
ZONING BOARD OF APPEALS
20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
PH: 845-297-6256
Fax: 845-297-0579

ZONING BOARD OF APPEALS

All application fees are non-refundable

Variance Fee:

Residential:

Area / Use Variance Fee:

\$375.00 per Application**

Commercial:

Area / Use Variance Fee:

\$1,000.00 per application**

Interpretations Fee:

Residential:

\$150.00 per Application**

Commercial:

\$500.00 per Application**

All applications are subject to an escrow account and associated fees when denied by the ZBA

PLEASE NOTE that all applicants will be billed by the local newspaper for their Legal Notice.

**Zoning Board of Appeals
Town of Wappinger
2024
Meetings & Submission Dates**

Meeting Dates

Tuesday, January 9, 2024
Tuesday, January 23, 2024
Tuesday, February 13, 2024
Tuesday, February 27, 2024
Tuesday, March 12, 2024
Tuesday, March 26, 2024
Tuesday, April 9, 2024
Tuesday, April 23, 2024
Tuesday, May 14, 2024
Tuesday, May 28, 2024
Tuesday, June 11, 2024
Tuesday, June 25, 2024
Tuesday, July 23, 2024
Tuesday, August 27, 2024
Tuesday, September 10, 2024
Tuesday, September 24, 2024
Tuesday, October 8, 2024
Tuesday, October 22, 2024
Tuesday, November 12, 2024
Tuesday, November 26, 2024
Tuesday, December 10, 2024

Submission Dates

Tuesday, December 19, 2023
Tuesday, January 9, 2024
Tuesday, January 16, 2024
Tuesday, February 6, 2024
Tuesday, February 20, 2024
Tuesday, March 5, 2024
Tuesday, March 19, 2024
Tuesday, April 2, 2024
Tuesday, April 16, 2024
Tuesday, May 7, 2024
Tuesday, May 14, 2024
Tuesday, June 11, 2024
Tuesday, July 3, 2024
Tuesday, August 6, 2024
Tuesday, August 17, 2024
Tuesday, September 3, 2024
Tuesday, September 17, 2024
Tuesday, October 1, 2024
Tuesday, October 15, 2024
Tuesday, November 12, 2024
Tuesday, November 26, 2024

PLEASE BE AWARE, submissions are due by noon on the submission date.

Zoning Board of Appeals meetings are held on 2nd and 4th Tuesday of each month unless there is a holiday on that Tuesday at 7:00pm, and then it will move to the Wednesday of the same week.

(Revised 11/17/23)