

TOWN OF WAPPINGER



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JUL 11 2024

Zoning Board of Appeals
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.: 24-7829

Date: 7/5/24

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

I (We), Doreen M. Spano residing at 11 Martin Drive,
Wappingers Falls, NY 12590, (phone) (914) 204-3679, hereby,
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 6-21-24, and do hereby apply for an area variance(s).

Premises located at: 11 Martin Drive, Wappingers Falls, NY 12590
Tax Grid No.: 6258-02-981960
Zoning District: R-20

1. Record Owner of Property:

Doreen M. Spano
Address: 11 Martin Drive, Wappingers Falls, NY 12590
Phone Number: (914) 204-3679
Owner Consent dated: 7-5-24
Signature: Doreen M. Spano
Print Name: Doreen M. Spano

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: 20 feet to side (left)

Applicant(s) can provide: 8 feet

Thus requesting: 12 feet

To allow: for the legalization of a 10' x 16' Shed

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance
Appeal No.: 24-7829

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.

There will be no change as the shed is
in the back yard

- 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 cannot be relocated to meet code
As my shed is 10 years old we just had it
delivered already built and the code I thought
was followed.

- 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.

5 to 8 ft short of code

- 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, as the shed is in my back yard

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance
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E. How did your need for an area variance(s) come about? Is your difficulty self-created?

Please explain your answer in detail.

I wanted to make sure if I sold
my house down the road there would
be no issues

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

No, It's a standard Ranch

4. List of attachments (Check applicable information)

- (☒) Survey dated: March 8, 1990, Last revised _____ and
Prepared by: Peter R. Hustis
- () 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: 6.21.24
- () 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: Doreen M. Spina *

(Appellant)

DATED: 7/5/24

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: 24-7829 Date: 7-5-24
Grid No.: 6258-02-981960 Zoning District: R-20

Location of Project:

11 Martin Drive

Name of Applicant: Doreen M. Spano - (914) 204-3679
Print name and phone number

Description of Project: Legalization of a 10' x 16' Shed

I, Doreen M. Spano, 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.

7/5/24
Date

Doreen M. Spano
Owner's Signature

914-204-3679
Owner's Telephone Number

Doreen M. Spano - 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							
Name of Action or Project: <div style="font-family: cursive; font-size: 1.2em;">Variance for Shed</div>							
Project Location (describe, and attach a location map): <div style="font-family: cursive; font-size: 1.2em;">Shed in Left back yard needs → variance</div>							
Brief Description of Proposed Action: <div style="font-family: cursive; font-size: 1.2em;">Variance for my old shed</div>							
Name of Applicant or Sponsor: <div style="font-family: cursive; font-size: 1.2em;">Doreen M. SPANO</div>		Telephone: <div style="font-family: cursive; font-size: 1.2em;">(914) 204-3679</div>					
		E-Mail: <div style="font-family: cursive; font-size: 1.2em;">dor824@aol.com</div>					
Address: <div style="font-family: cursive; font-size: 1.2em;">11 MARTIN Drive</div>							
City/PO: <div style="font-family: cursive; font-size: 1.2em;">Wappingers Falls</div>		State: <div style="font-family: cursive; font-size: 1.2em;">New York</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.		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">NO</td> <td style="width: 50%;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>		NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">NO</td> <td style="width: 50%;">YES</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>		NO	YES	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NO	YES						
<input type="checkbox"/>	<input checked="" 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 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>							

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: <u>N/A</u> _____	<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 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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO <input checked="" type="checkbox"/>	YES <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"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>Doreen M. Spano</u> Date: <u>7/5/24</u>		
Signature: <u>Doreen M. Spano</u> Title: <u>owner</u>		

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

To: Spano, Doreen
11 Martin Dr

SBL: 6258-02-981960-0000
Date of this Notice: 06/21/2024
Zone:
Application: 44440

For property located at: 11 Martin Dr

Your application to:

SHED LEGALIZE EXISTING 10' X 16' SHED- NO ELECTRIC **NEED FINAL INSPECTION BY TOWN BUILDING INSPECTOR**

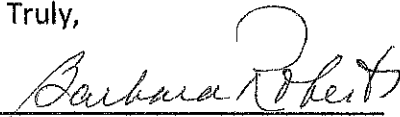
is denied for the following deficiency under Section **240-37** of the Zoning Laws of the Town of Wappinger.

Where 20 feet to the side property line is required, the applicant can provide 8 feet to the side property line for an existing 10' x 16' shed.

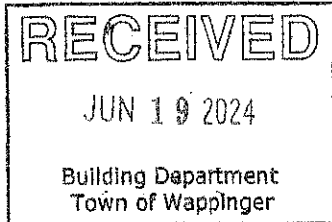
	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	<u>20</u> ft.	<u>8</u> ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.
FRONT YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.

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 ☐ Renovation/Alteration ☐ Commercial ☐ Multiple Dwelling
ZONE: R20 DATE: 6/21/24
APPL #: 44440 PERMIT # _____
GRID: 6258-02-981960

APPLICANT NAME: Doreen Spano
ADDRESS: 11 martin dr Wappingers Falls N.Y 12590
TEL #: _____ CELL: 914-204-3679 FAX #: _____ E-MAIL: dor824@aol.com
dspano@acsdny.org
NAME OWNER OF BUILDING/LAND: _____

PROJECT SITE ADDRESS: Same
MAILING ADDRESS: _____
TEL #: _____ CELL: _____ FAX #: _____ E-MAIL: _____

BUILDER/CONTRACTOR DOING WORK:
COMPANY NAME: _____
ADDRESS: Already installed 10 year ago
TEL #: _____ CELL: _____ FAX #: _____ E-MAIL: _____

DESIGN PROFESSIONAL NAME:
TEL #: _____ CELL: _____ FAX #: _____ E-MAIL: _____

APPLICATION FOR: * Variance for shed
10 by 16 pre built shed
Installed 10 years ago need variance
* No electric *
160SF
SETBACKS: FRONT: 60ft REAR: 90ft L-SIDEYARD: 8 to 10 ft R-SIDEYARD: 80ft
SIZE OF STRUCTURE: 10 by 16 shed already installed need a variance
ESTIMATED COST: 4000 TYPE OF USE: Storage

NON-REFUNDABLE APPL. FEE: 100 PAID ON: 6/21/24 CHECK # 1871 RECEIPT #: 2024-00989
BALANCE DUE: 250 PAID ON: 6/21/24 CHECK # 1871 RECEIPT #: 2024-00988

APPROVALS:

ZONING ADMINISTRATOR:
☐ Approved ☒ Denied Date: 6-21-24

FIRE INSPECTOR:
☐ Approved ☐ Denied Date: _____

[Signature]
Signature of Applicant

Signature of Building Inspector



TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date _____

Address: 11 Martin Dr.

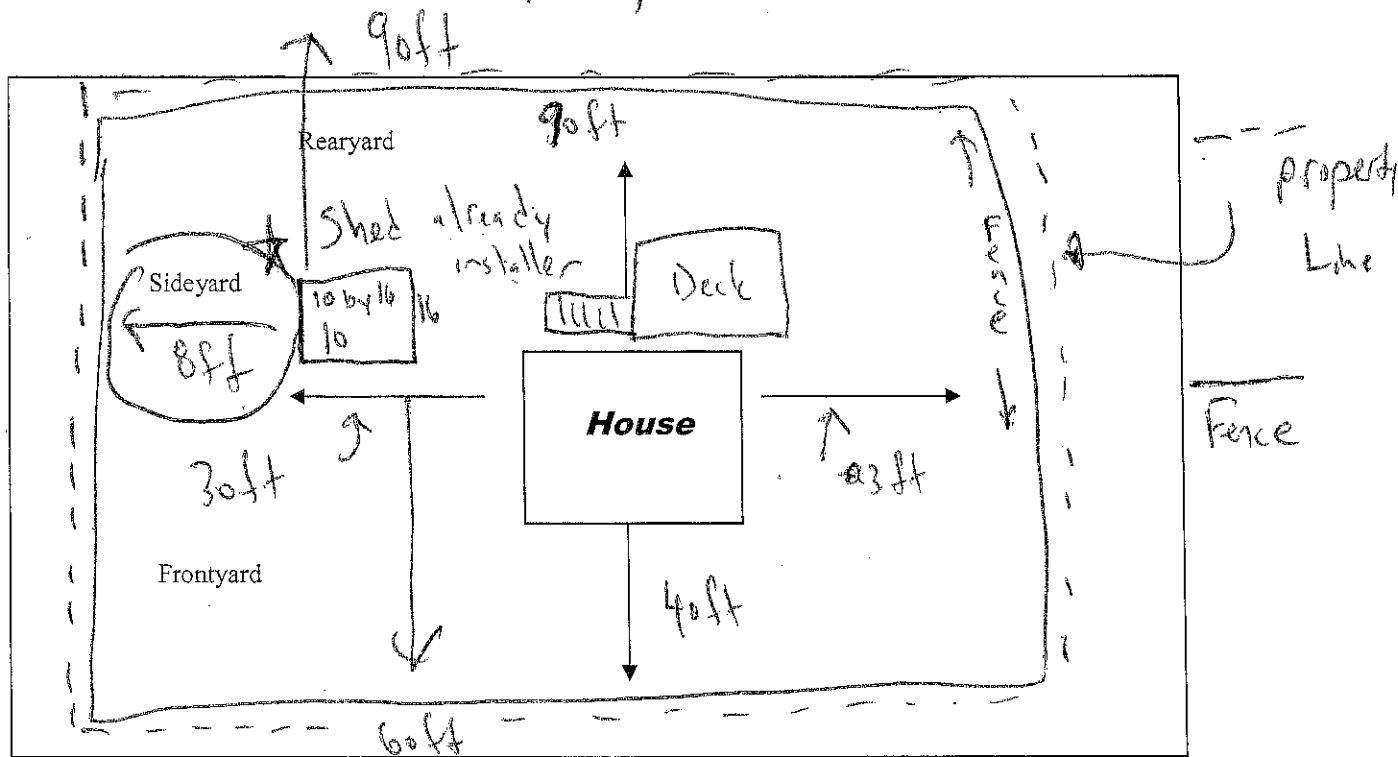
Interior/Corner Lot: *circle one*

Owner of Land Spano

Zone: B20

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

1. House, _____
Shed is 8ft^{to 10ft} from property line Need a Variance



Draw proposed structure on plot plan.

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

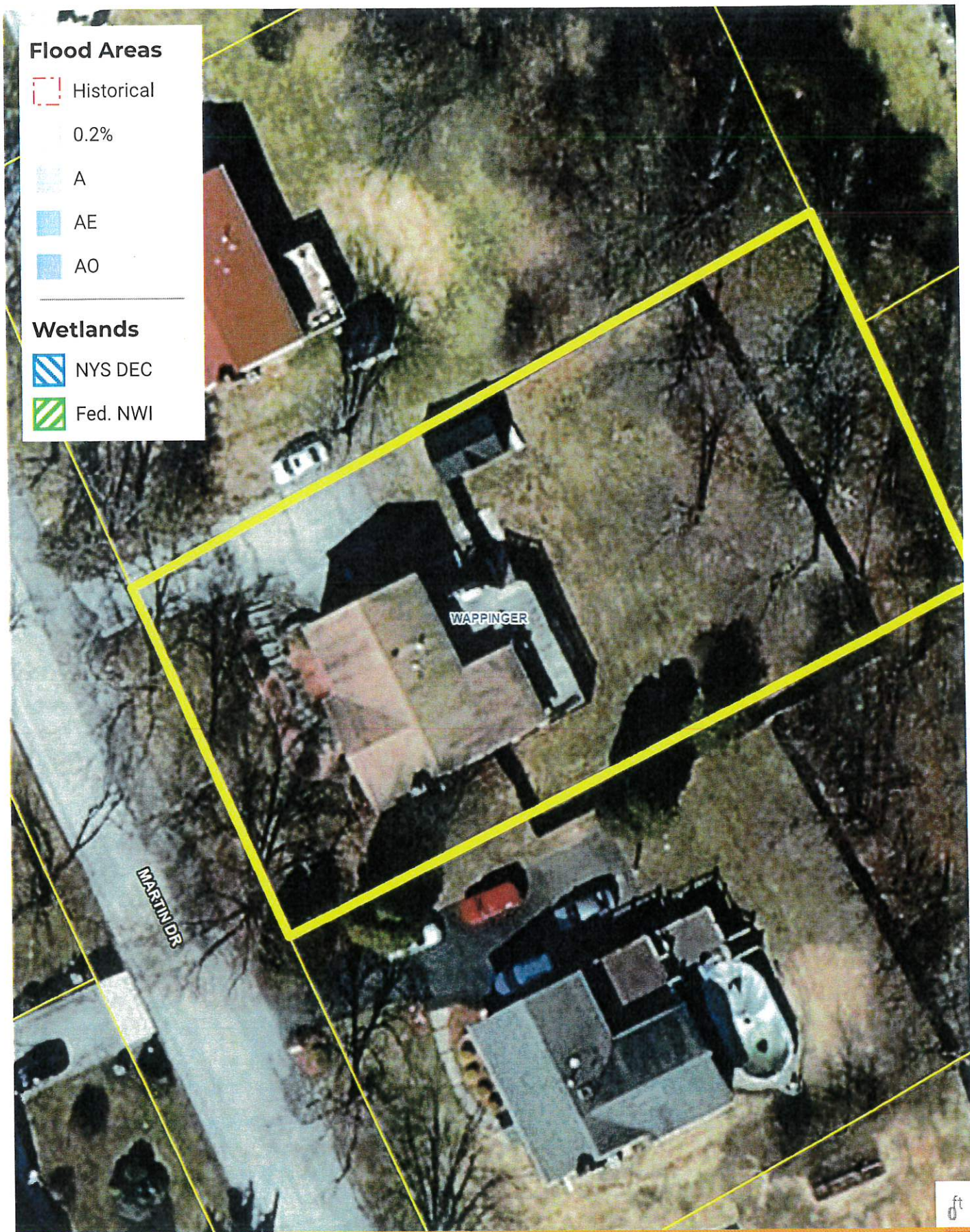
Doreen M. Spano

Signature

Approved: / Rejected:

Barbara Roberts
Zoning Administrator

Date: 6/21/24



Dutchess County
New York

Parcel Lines

Dutchess County, NY

Printed By:
ParcelAccess

N
ParcelAccess
6/21/2024



