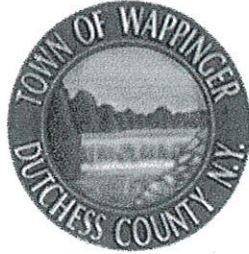


TOWN OF WAPPINGER



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.: 24-7832

Date: 7/12/2024

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

I (We), Careta Phillips residing at 1 Blackthorn Loop
Wappingers Falls NY, (phone) 914-589-7446, hereby,

appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 7/12/2024, and do hereby apply for an area variance(s).

Premises located at: 1 Blackthorn Loop, Wappingers Falls

Tax Grid No.: 6858-03-110107

Zoning District: R-20

1. Record Owner of Property:

Careta Phillips
Address: 1 Blackthorn Loop
Phone Number: 914 589-7446
Owner Consent dated: 7/12/2024

Signature: Careta Phillips
Print Name: Careta Phillips

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.

Section 240-37

(Indicate Article, Section, Subsection and Paragraph)

Required: 20' to side yard (Right)

Applicant(s) can provide: 12.6'

Thus requesting: 7.4 feet

To allow: for the removal and replacement of existing deck and porch in same footprint.

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.

If the variance is granted we would tear down a decrepid unsafe eyesore and build a safe, aesthetically pleasing porch/deck in its place. We believe this will enhance the quality of life in the neighborhood.

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 change we request is to ensure safety and code compliance. Without the variance the structure would not be compliance.

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 area in question is minimal (a few square feet) and would not disturb or negatively impact neighbors or the neighborhood.

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.

If the variance is granted, we believe that rather than a negative impact, the proposed variance would enhance the neighborhood.

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

We are replacing the existing structure within the original footprint. The difficulty was pre-existing.

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

The existing structure is unsafe and an eyesore, so unfortunately it is unique in that it is not longer safe and

4. List of attachments (Check applicable information)

- Survey dated: 8-8-178, Last revised _____ and Prepared by: _____.
- Plot Plan dated: 6-3-24.
- 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 Dated: 7-1-24
- 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: Carole Phillips
(Appellant)

DATED: 7/12/2024

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.

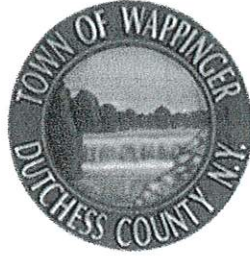
DATED: _____

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: 24-7832

Date: 7/12/2024

Grid No.: 6258-03-110107

Zoning District: R-24

Location of Project:

1 Blackthorn Loop Wappingers Falls

Name of Applicant:

Careta Phillips 914-589-7446

Print name and phone number

Description of

Project: To remove and replace existing deck and adjoining porch (enclosed)

I, Careta Phillips, 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.

7/12/2024

Date

Careta Phillips

Owner's Signature

914-589-7446

Owner's Telephone Number

Careta Phillips

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.

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: <i>Careta Phillips</i>			
Project Location (describe, and attach a location map): <i>1 Blackthorne Loop</i>			
Brief Description of Proposed Action: <i>Remove existing porch and deck and replace with a new structure.</i>			
Name of Applicant or Sponsor: <i>Careta Philips</i>		Telephone: <i>845 287 5470</i>	
Address: <i>1 Blackthorn Loop.</i>		E-Mail: <i>Loubond00703@gmail.com</i>	
City/PO: <i>Wappingers Falls</i>		State: <i>NK.</i>	Zip Code: <i>12590</i>
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 checked="" 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 checked="" 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,	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? If Yes, identify: _____	NO	YES	
	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" 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 checked="" 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 checked="" 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 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? 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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? 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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

To: Phillips, Careta
1 Blackthorn Loop

SBL: 6258-03-110107-0000
Date of this Notice: 07/01/2024
Zone:
Application: 44407

For property located at: 1 Blackthorn Lp

Your application to:

DECK - REMOVAL AND REPLACEMENT OF EXISTING DECK AND PORCH IN SAME FOOTPRINT

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

Where 20 feet is required to the side yard, the applicant has a pre-existing porch with a setback of 12.6'. They are replacing the stairs which will be longer than what was previously there and run further down the side of the house, thus requiring a side yard setback of 12.6'.

	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):	<u>20</u> ft.	<u>12.6</u> 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

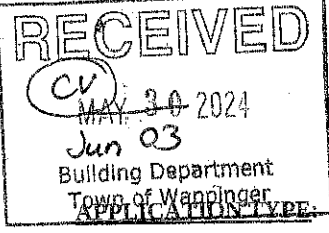
Very Truly,



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

- Residential
- New Construction
- Commercial
- Renovation/Alteration
- Multiple Dwelling

ZONE: R20 DATE: 6/17/2024
 APPL #: 44407 PERMIT # _____
 GRID: 6258-03-110107

APPLICANT NAME: Luis Sosa, Jr.
 ADDRESS: 3322 Route 52, Stormville, NY 12582
 TEL #: 407-301-5871 CELL: 407-301-5871 FAX #: N/A E-MAIL: loubond00703@gmail.com

NAME OWNER OF BUILDING/LAND: Careta Phillips
 PROJECT SITE ADDRESS: 1 Blackthorn Loop, Wappingers Falls, NY 12590
 MAILING ADDRESS: 1 Blackthorn Loop, Wappingers Falls, NY 12590
 TEL #: N/A CELL: 914-589-7446 FAX #: N/A E-MAIL: carphil66@gmail.com

BUILDER/CONTRACTOR DOING WORK:
 COMPANY NAME: Sosacorp LLC
 ADDRESS: 3322 Route 52, Stormville, NY 12582
 TEL #: 407-301-5871 CELL: 407-301-8571 FAX #: N/A E-MAIL: loubond00703@gmail.com

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

APPLICATION FOR: The removal and replacement of existing deck and porch. *same footprint as existing
ADDING additional stairs - req. a variance

SETBACKS: FRONT: 50'+/- REAR: 50'+/- L-SIDEYARD: 50'+/- R-SIDEYARD: 12'6"
 SIZE OF STRUCTURE: _____
 ESTIMATED COST: \$15,000 TYPE OF USE: _____

NON-REFUNDABLE APPL. FEE: 150 PAID ON: 6/17/24 CHECK # 0102 RECEIPT #: 2024-00940
 PAID ON: _____ CHECK # _____ RECEIPT #: _____

APPROVALS:
 ZONING ADMINISTRATOR:
 Approved Denied Date: 6-18-24
[Signature]

FIRE INSPECTOR:
 O Approved O Denied Date: _____

[Signature]
 Signature of Applicant

Signature of Building Inspector

Sosacorp LLC / Luis Sosa
 Print Name of Company Name(if applicable)

TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date _____

Address: 1 Blackthorn Loop.

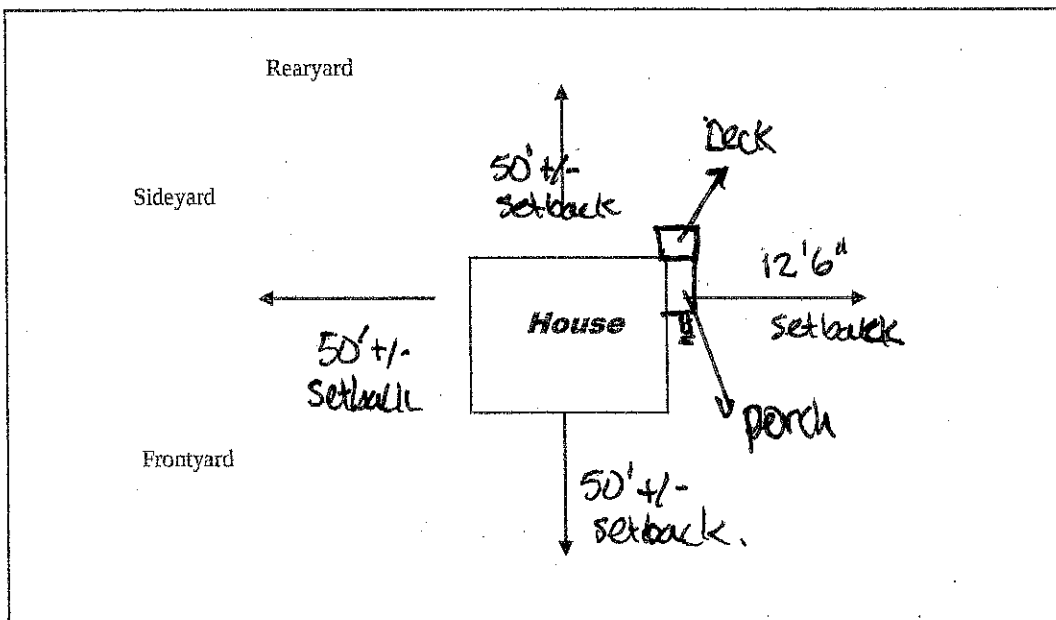
Interior/Corner Lot: *circle one*

Owner of Land Careta Phillips

Zone: R20

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

1. House, Deck + enclosed porch.



Draw proposed structure on plot plan.
Indicate Location Setbacks to both sides and rear property line
measurement of structure you are applying for.

Careta Phillips
Signature

Approved: Rejected: Careta Phillips 6/18/24
Zoning Administrator Date: 6/3/24

based on additional stairs