

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.: 25-7855

Date: 7-8-25

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

I (We), Jessica Gamilia residing at 18 Dara Ln Wappingers Falls NY, 12590, (phone) 646-5104053, hereby, appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator, dated 7-3-25, and do hereby apply for an area variance(s).

Premises located at: 18 Dara Ln Wappingers Falls NY 12590  
Tax Grid No.: 6257-01-092744  
Zoning District: R-20

1. Record Owner of Property:

Address: 18 Dara Ln Wappingers Falls NY, 12590  
Phone Number: 646-510-4053  
Owner Consent dated: 7-8-25

Signature: [Signature]  
Print Name: Jessica Gamilia

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' to side (left)

Applicant(s) can provide: 6'

Thus requesting: 14'

To allow: for the legalization of a 12' x 20' shed

**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.

240-37

(Indicate Article, Section, Subsection and Paragraph)

Required: 40' to rear  
Applicant(s) can provide: 8'  
Thus requesting: 32'  
To allow: for the legalization of a 12' x 20' shed

**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 its granted it's not going to affect the character and won't change the neighborhood appearance

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 the variance because the items that I want to get a permit for appear to be near to the property line and I can't move it or destroy it because when I purchase the house was included on it with the house price. I will love not to go to variance if I can legalize the current structure.

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 currently zoning law required 20' on the side and 40' on the back which currently is 8' on the back and 6' on the side. From 6' to 20' equals 14' and 8' to 40' equal 32'

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.

I don't think will affect if it granted because everyone on the neighborhood has one and my shed house is about 200' away from the front line house you can hardly see it on the street.

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

I realize that I need a permit when I received a notice from the town that my shed was builded without a permit, I purchased the house with the sheds included 6 years ago.

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

No, I been walking around my neighborhood and I noticed that every one has one. I'm not trying to change or alterate my neighborhood appearance.

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: 7-3-25

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

DATED: 7

**Variance No. 3**

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: no more than 2 accessory structures on property

Applicant(s) can provide: 3 structures

Thus requesting: for all 3 to remain

To allow: for the legalization of all 3 accessory structures

**Variance No. 4**

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. 5**

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.**

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: \_\_\_\_\_

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: 25-7855  
Grid No.: 6157-01-092744

Date: 7-8-25  
Zoning District: R-20

Location of Project:

18 Dara Ln Wappingers Falls NY 12590

Name of Applicant:

Jessica Gavina 646-510-4053  
Print name and phone number

Description of

Project: legalize a shed 12'x20', and 7'x10'

I Jessica Gavina, 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.

7-3-25  
Date

[Signature]  
Owner's Signature

646-510-4053  
Owner's Telephone Number

Jessica Gavina  
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

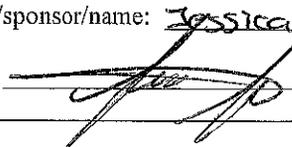
#### Instructions for Completing

**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			
<i>Jessica Gavino</i> Name of Action or Project:			
<i>18 Oara In Wappingers Falls NY 12590</i> Project Location (describe, and attach a location map):			
Brief Description of Proposed Action: <i>legalize or get a permit for shed 12'x20' and 7'x10'</i>			
<i>Jessica Gavino</i> Name of Applicant or Sponsor:		Telephone: <i>646-510-4053</i>	
<i>18 Oara In</i> Address:		E-Mail: <i>jejefer24@aol.com</i>	
<i>Wappingers Falls</i> City/PO:		State: <i>NY</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	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:			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" 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			

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" 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?	<input type="checkbox"/>	<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: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" 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: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<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: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<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?	<input checked="" type="checkbox"/>	<input 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"/>	<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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input 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?	NO	YES
If 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)?	<input checked="" 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)?	NO	YES
If Yes, explain the purpose and size of the impoundment: _____	<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?	NO	YES
If Yes, describe: _____	<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?	NO	YES
If Yes, describe: _____	<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>Jessica Benita</u>	Date: <u>7-7-25</u>	
Signature: 	Title: _____	

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

To: Gaviria, Christian  
117 S Highland Ave Apt 4B

SBL: 6257-01-092744-0000  
Date of this Notice: 07/03/2025  
Zone:  
Application: 45709

For property located at: 18 Dara Ln

Your application to:

**SHED LEGALIZE 12' X 20' STORAGE SHED AND 10' X 7' SHED WITH ELECTRIC \*\*NEED INSPECTION BY TOWN BUILDING INSPECTOR\*\* \*\*NEED ELECTRICAL INSPECTION BY TOWN APPROVED ELECTRICAL INSPECTION AGENCY\*\* Third shed has an amnesty permit.**

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 for sheds over 144 sf, the applicant can provide 6' to the side property line for a 12 X 20 existing shed.

Where 40 feet to the rear property line is required for sheds over 144 sf, the applicant can only provide 8 feet to the rear property line for an existing 12 x 20 shed.

Where a residential parcel can only have two accessory structures, the applicant has three sheds.

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	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	<u>40</u> ft.	<u>8</u> ft.
SIDE YARD (LEFT):	<u>20</u> ft.	<u>6</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](http://www.townofwappingerny.gov)

Very Truly,



Zoning Administrator  
Town of Wappinger

**RECEIVED**  
 JUL 03 2025  
 Building Department  
 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 **ZONE:** B20 **DATE:** 7-3-25  
 New Construction  Commercial **APPL #:** 45709 **PERMIT #** \_\_\_\_\_  
 Renovation/Alteration  Multiple Dwelling **GRID:** 6257-01-092744

**APPLICANT NAME:** Jessica Fernanda Gavina  
**ADDRESS:** 18 Dara Ln. Wappingers Falls NY, 12590  
**TEL #:** \_\_\_\_\_ **CELL:** 646-510-4053 **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**NAME OWNER OF BUILDING/LAND:** Jessica Gavina  
**\*PROJECT SITE ADDRESS\*:** 18 Dara Ln Wappingers Falls NY 12590  
**MAILING ADDRESS:** \_\_\_\_\_  
**TEL #:** \_\_\_\_\_ **CELL:** 646-510-4053 **FAX #:** \_\_\_\_\_ **E-MAIL:** jefer24@aol.com

**BUILDER/CONTRACTOR DOING WORK:**  
**COMPANY NAME:** existing  
**ADDRESS:** \_\_\_\_\_  
**TEL #:** \_\_\_\_\_ **CELL:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**DESIGN PROFESSIONAL NAME:** \_\_\_\_\_  
**TEL #:** \_\_\_\_\_ **CELL:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**APPLICATION FOR:** Get permit for existing-shed storage 12'x20'  
-shed 10'x7' - shed 10'x7' w/ electric  
(other rear shed has amnesty permit)  
(plastic 3rd shed will be removed)  
Amnesty Shed 5/3/19 2003-1635-

*2 sheets*

**SETBACKS:** FRONT: \_\_\_\_\_ REAR: \_\_\_\_\_ L-SIDEYARD: \_\_\_\_\_ R-SIDEYARD: \_\_\_\_\_  
**SIZE OF STRUCTURE:** \_\_\_\_\_  
**ESTIMATED COST:** 1,000- **TYPE OF USE:** \_\_\_\_\_

**NON-REFUNDABLE APPL. FEE:** 196- **PAID ON:** 1/3/25 **CHECK #** 180 **RECEIPT #:** 2025-01055

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

**APPROVALS:** \*Legalization paid on separate permit app. for pool & deck\*

**ZONING ADMINISTRATOR:**  
 Approved  Denied **Date:** 7-3-25

**FIRE INSPECTOR:**  
 Approved  Denied **Date:** \_\_\_\_\_

*[Signature]*  
 Signature of Applicant  
 \_\_\_\_\_  
*Jessica Gavina*  
 Print Name or Company Name(if applicable)

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

# TOWN OF WAPPINGER PLOT PLAN

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

Date \_\_\_\_\_

Address: 18 Dara Ln.

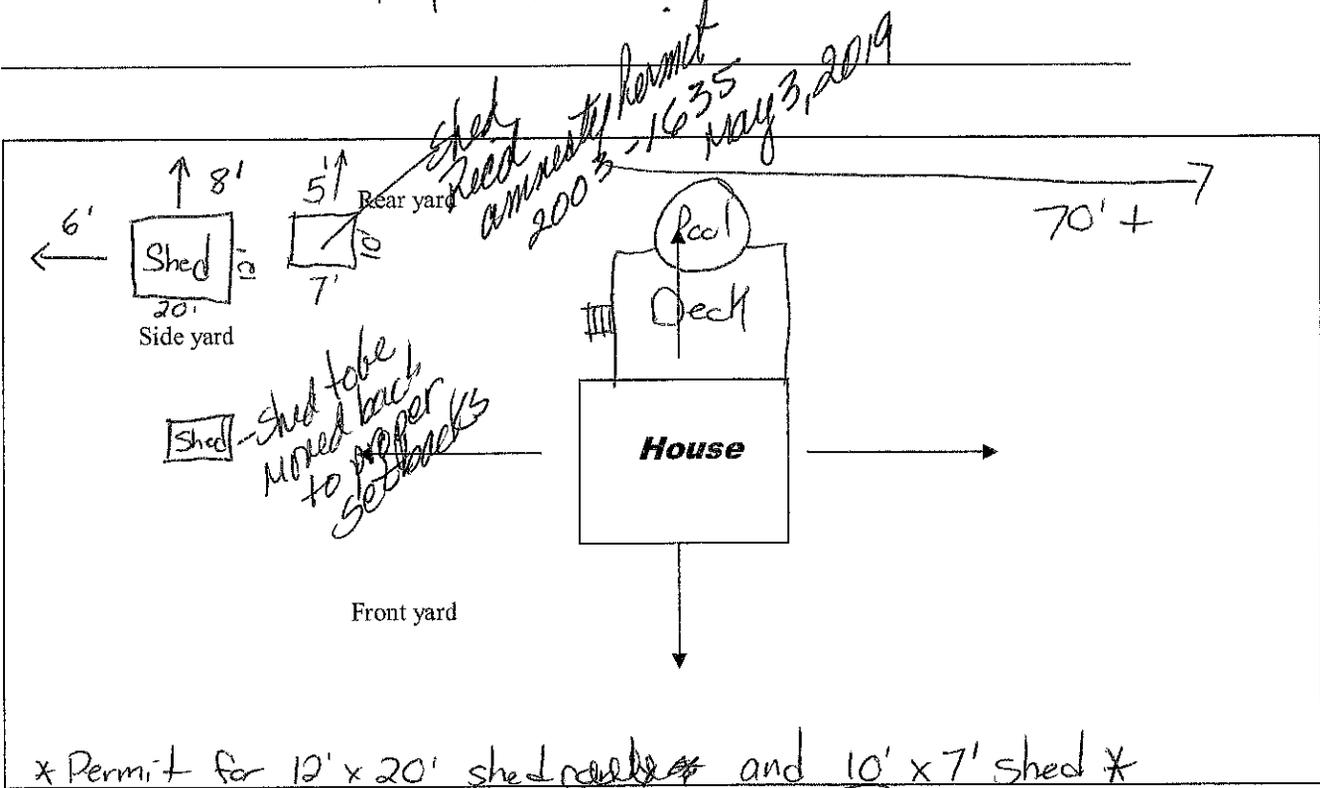
Interior/Corner Lot: *circle one*

Owner of Land Gaviria

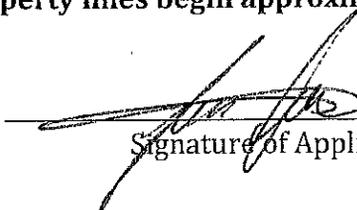
Zone: B20

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

1. House, 2 sheds, pool, deck



- Draw proposed structure/pool on plot plan
- Indicate location with setbacks to both sides and rear property line
- Show dimensions of structure/pool you are applying for
- If property is corner lot, show both streets
- Show utility, well and sewage systems (Call 811 before you dig - www.digsafelynewyork.com)
- \*\*Most front yard property lines begin approximately 12 feet from the pavement\*\***

  
 \_\_\_\_\_  
 Signature of Applicant

Approved/Reflected:   
 Zoning Administrator

Date: 7-3-25