

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.: 25-7862

Date: 9/19/25

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

I (We), Kevin White residing at 67 Forest View,  
Wappingers Falls, NY 12590, (phone) 845 853 3310, hereby,  
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,  
dated 8/15/25, and do hereby apply for an area variance(s).

Premises located at: 67 Forest View, Wappingers Fall, NY 12590

Tax Grid No.: 6256-02-800965-0000

Zoning District: \_\_\_\_\_

1. Record Owner of Property:

Kevin White & Melissa Rose  
Address: 67 Forest View, Wappingers Fall NY 12590  
Phone Number: 845 853 3310  
Owner Consent dated: 8/19/2025

Signature: Kevin White  
Print Name: Kevin White

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: 50 ft set back to the building

Applicant(s) can provide: 43.6 ft set back to the garage

Thus requesting: 6.4 ft variance to allow building

To allow: construction of Garage Pol Barn Garage 24'x24'

**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: No accessory structures in the front yard

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

Thus requesting: to place the new garage in front of the house into the front yard

To allow: Construction of Garage Pole Barn Garage 24'x24'

**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.

No change to the neighborhood or nearby properties.  
Just a garage on the side of our driveway

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 variances are needed to place the garage in front of our house  
and to create the proper spacing to not block the house, windows  
or doors. There is no other area behind the house that a garage  
can be placed

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.

Not substantial. The garage will not block the driveway, ~~only~~  
~~for~~ the garage will ~~only~~ protrude into the set back by  
6.4 feet.

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. Our house is on a dead-end street. No major changes  
to topography will be needed.



Town of Wappinger Zoning Board of Appeals  
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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.

We would to build a garage. There is no way to  
build behind the house

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

Yes, unbuildable behind the house due to topography and  
septic system location.

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

- ( ) Survey dated: \_\_\_\_\_, Last revised \_\_\_\_\_ and  
Prepared by: \_\_\_\_\_.
- ( ) Plot Plan dated: \_\_\_\_\_.
- ( ) Photos
- ( ) Drawings dated: \_\_\_\_\_.
- (X) 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: 25-7862

Date: 9/19/25

Grid No.: 6256-02-800965

Zoning District: R-40

Location of Project:

67 Forest View

Name of Applicant:

Melissa Roe & Kevin White

Print name and phone number

Description of

Project: 24 x 24' 2 car garage

I Melissa, 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.

9/19/25  
Date

[Signature]  
Owner's Signature

315-289-2759 / 845-853-3310  
Owner's Telephone Number

Melissa Roe  
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

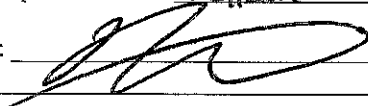
### Instructions for Completing

**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: <b>Polebarn Garage 24' x 24'</b>			
Project Location (describe, and attach a location map): <b>67 Forest View Wappingers Falls, NY 12590</b>			
Brief Description of Proposed Action: <b>24'x24' pole barn detached garage</b>			
Name of Applicant or Sponsor: <b>Melissa Roe + Kevin White</b>		Telephone: <b>315-289-2759 / 845-853-3310</b>	
Address: <b>67 Forest View</b>		E-Mail: <b>KEVWHITE86@GMAIL.com</b> <b>MROE589@GMAIL.com</b>	
City/PO: <b>Wappingers Falls</b>		State: <b>NY</b>	Zip Code: <b>12590</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 <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?		<u>1.16</u> acres	
b. Total acreage to be physically disturbed?		<u>.013</u> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<u>1.16</u> 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			

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 checked="" 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	
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 type="checkbox"/>	<input checked="" 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: <i>not required for this structure</i>	<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: <i>not required for this structure</i>	<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 checked="" 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
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 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 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>Melissa Roe</u> Date: <u>9/19/25</u> Signature: <u></u> Title: <u>owner</u>		

**PRINT FORM**



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

**To:** White, Kevin (Primary) Roe, Melissa  
67 Forest View Rd  
Wappingers Falls, NY

**SBL:** 6256-02-800965-0000  
**Date of this Notice:** 09/30/2025  
**Zone:**  
**Application:** 45856

**For property located at:** 67 Forest View

Your application to:

**GARAGE POLE BARN GARAGE 24' X 24'**

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

Where 50 feet to the front property line is required, the applicant can provide 43.6 feet to the front property line to construct a new garage.

Where no accessory structures are permitted in a front yard, the applicant is looking to place a new garage in front of the house into the front yard.

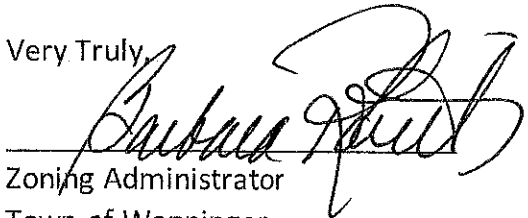
In no instance can the garage obstruct the driveway.

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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:	_____ <u>50</u> ft.	_____ <u>43.6</u> 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

AUG 01 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  
☒ New Construction ☐ Commercial  
☐ Renovation/Alteration ☐ Multiple Dwelling

ZONE: B40 DATE: 8/7/25  
APPL #: 45856 PERMIT #  
GRID: 6256-02-800965

APPLICANT NAME: Kevin White + Melissa Roe

ADDRESS: 67 Forest View Wappingers Falls, NY 12590

TEL #: 845-853-3310 CELL: 315-289-2759 FAX #: n/a E-MAIL: kevwhite86@gmail.com  
alt: mroe589@gmail.com

NAME OWNER OF BUILDING/LAND: Kevin White / Melissa Roe

\*PROJECT SITE ADDRESS\*: 67 Forest View Wappingers Falls, NY 12590

MAILING ADDRESS: 67 Forest View Wappingers Falls, NY 12590

TEL #: 845-853-3310 CELL: 315-289-2759 FAX #: n/a E-MAIL: kevwhite86@gmail.com  
alt: mroe589@gmail.com

**BUILDER/CONTRACTOR DOING WORK:**

COMPANY NAME: Kevin White + Melissa Roe (Owners)

ADDRESS: 67 Forest View Wappingers Falls, NY 12590

TEL #: 845-853-3310 CELL: 315-289-2759 FAX #: n/a E-MAIL: kevwhite86@gmail.com  
alt: mroe589@gmail.com

DESIGN PROFESSIONAL NAME: Richard J Iuele P.E.

TEL #: 845-222-7225 CELL: 845-222-7225 FAX #:

E-MAIL:

APPLICATION FOR: Pole Barn Garage 24x24

SETBACKS: FRONT: 42 REAR: 148' 10" L-SIDEYARD: 62 1/2 R-SIDEYARD: 10' 3 1/4

SIZE OF STRUCTURE: 24' x 24'

ESTIMATED COST: \$18,000

TYPE OF USE: detached garage

NON-REFUNDABLE APPL. FEE: 150 PAID ON: 8/7/25 CHECK # 103 RECEIPT #: 2025-01294

BALANCE DUE:  PAID ON:  CHECK #  RECEIPT #:

**APPROVALS:**

**ZONING ADMINISTRATOR:**

☐ Approved ☒ Denied Date: 8.15.25

[Signature]

[Signature]  
Signature of Applicant

Melissa Roe

Print Name or Company Name(if applicable)

**FIRE INSPECTOR:**

☐ Approved ☐ Denied Date:

Signature of Building Inspector

# TOWN OF WAPPINGER PLOT PLAN

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

Date 7/25/25

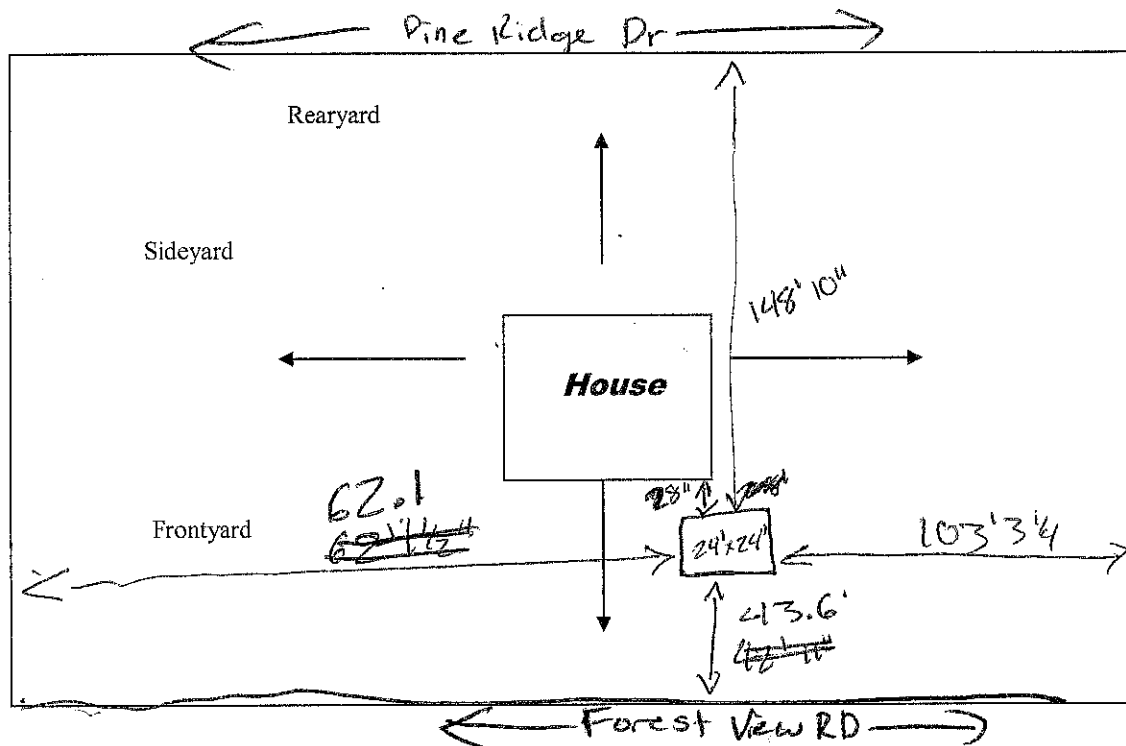
Address: 67 Forest View Wappingers Falls NY 12590 Interior/Corner Lot: circle one

Owner of Land Kevin White + Melissa Roe

Zone: B40

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

I. House,



Draw proposed structure on plot plan.

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

Kevin White  
Signature

Approved:/Rejected: [Signature]  
Zoning Administrator

Date: 8.15.25