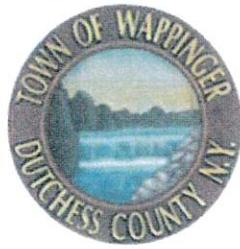


TOWN OF WAPPINGER



RECEIVED

NOV 12 2025

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.: 25-7866

Date: 11/15/2025

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

I (We), Jessica Bruno + Jason Cafaldo residing at 1 Red Hawk Hollow Rd  
Wappingers falls NY 12590, (phone) 914-275-8577, hereby,  
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,  
dated 9/19/2025, and do hereby apply for an area variance(s).

Premises located at: 1 Red Hawk Hollow Rd Wappingers falls NY  
Tax Grid No.: 135689-6359-02-759645-0000  
Zoning District: R-40/80

1. Record Owner of Property:

Jessica Bruno + Jason Cafaldo

Address: 1 Red Hawk Hollow Rd Wappingers falls NY, 12590

Phone Number: 914-275-8577

Owner Consent dated: 9-19-25

Signature: J. Cafaldo

Print Name: Jason Cafaldo

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: 40' Set back

Applicant(s) can provide: 35'

Thus requesting: 5'

To allow: In ground swimming pool to be compliant

Town of Wappinger Zoning Board of Appeals  
Application for an Area Variance  
Appeal No.: 25-7866

**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.

No Changes to the neighborhood or nearby properties will take place

---

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.

We were unable to obtain 40' from Side Setback and still provide for the Septic setback. One corner of the pool approaches to the 40' Setback

---

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' is the total. The 5' total is for the corner of the pool only

---

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.

It will not physically impact the environment. All grading is done correctly to the original contour of the property and flows downhill as original

---

**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 (ARE)** 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:** \_\_\_\_\_

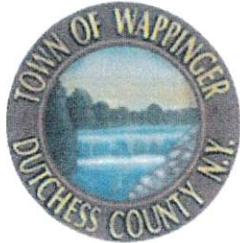
**ZONING BOARD OF APPEALS  
TOWN OF WAPPINGER, NEW YORK**

**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: 25-7866

Date: 11/5/2025

Grid No.: 6359-02-759645

Zoning District: R-40/80

Location of Project:

1 Red Hawk Hollow Rd Wappingers Falls NY 12590

Name of Applicant: Jessica & Jason Cafaldo

Print name and phone number

Description of

Project: In Ground Swimming Pool

I Jason Cafaldo, 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

11/12/2025

J. Cafaldo

Owner's Signature

Owner's Telephone Number

914-275-8577

Jason Cafaldo

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.

Town of Wappinger Zoning Board of Appeals  
Application for an Area Variance  
Appeal No.: 25-9866

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

The error came about after construction and was not realized until we had our "as-built" Survey done. We believed we were within the requirements during the build.

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

Our lot is of triangular shape sloping downhill in the rear yard.  
Our lot borders the town of Lagrangeville

4. List of attachments (Check applicable information)

Survey dated: 12/17/24, Last revised 12/17/24 and Prepared by: Oiele.

Plot Plan dated: \_\_\_\_\_.

Photos

Drawings dated: 6/7/24.

Letter of Communication which resulted in application to the ZBA.  
(e.g., recommendation from the Planning Board/Zoning Denial)  
Letter from: Zoning Administrator Dated: 9/19/2025

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: Jessica Bruno  
(Appellant)

DATED: 11/5/2025

SIGNATURE: J. Capaldo  
(If more than one Appellant)

DATED: 11/5/2025

# ***Short Environmental Assessment Form***

## ***Part 1 - Project Information***

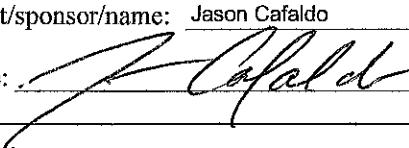
### **Instructions for Completing**

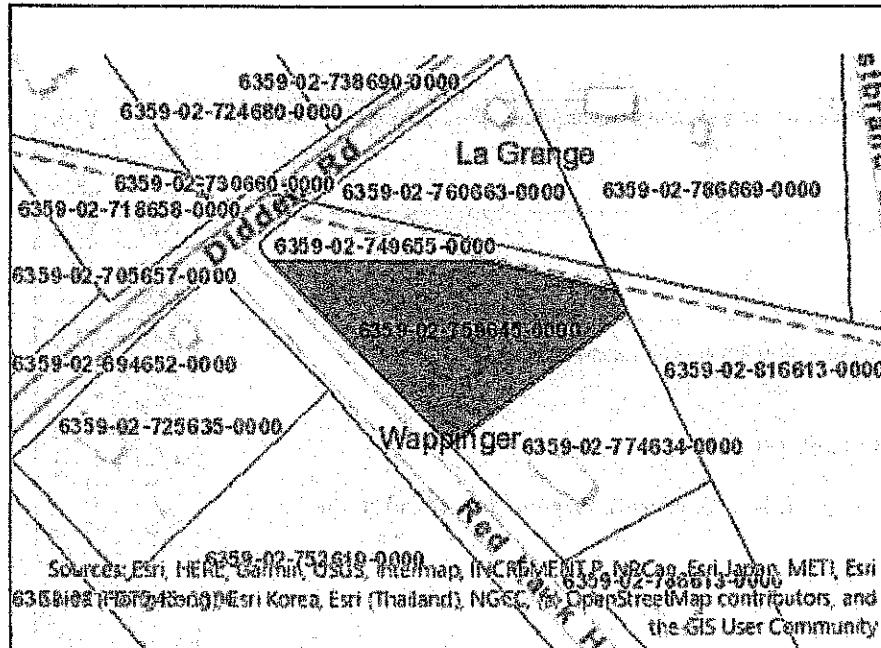
**Part 1 – Project Information.** The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. 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.

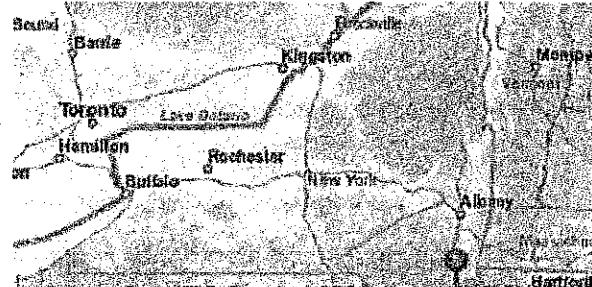
<b>Part 1 – Project and Sponsor Information</b>			
Jason Cafaldo			
Name of Action or Project: Cafaldo Pool			
Project Location (describe, and attach a location map): 1 Red Hawk Hollow Road, Wappingers Falls NY, 12590			
Brief Description of Proposed Action: Variance request for side yard set back on in ground swimming pool.			
Name of Applicant or Sponsor: Jason Cafaldo		Telephone: 914-275-8577 E-Mail: jasoncafaldo@gmail.com	
Address: 1 Red Hawk Hollow Road			
City/PO: Wappingers Falls		State: NY	Zip Code: 12590
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?		NO	YES
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.		<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
3. a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		1.02 acres .0378 acres 1.02 acres	
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <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 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?	NO	YES	
<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?	NO	YES	
<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: _____ _____	<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: _____ _____	<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?	NO	YES	
<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 type="checkbox"/>	<input checked="" type="checkbox"/>		
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	NO	YES	
<input checked="" type="checkbox"/>	<input type="checkbox"/>		
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____	<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 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?			
Indiana Bat <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES			
16. Is the project site located in the 100-year flood plan?			
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			
17. Will the proposed action create storm water discharge, either from point or non-point sources?			
If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <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: <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: <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: <hr/> <hr/>			
<b>I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</b>			
Applicant/sponsor/name: Jason Cafaldo		Date: 11/5/2025	
Signature: 		Title: Owner	



**Disclaimer:** The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources to confirm data provided by the Mapper or to obtain data not provided by the Mapper.



Sources: Esri, HERE, Garmin, USGS, Intermap, INCREMENTUM, Bartenfelder, MDTech, RCan, Esri Japan, NTCI, Esri, China / Hong Kong, Esri Korea, Esri Thailand, Esri, NAVTEQ, OpenStreetMap contributors and the GIS User Community, Esri, HERE, Garmin, USGS, NPS

Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	No
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local, New York State, and federal wetlands and waterbodies is known to be incomplete. Refer to the EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	Yes
Part 1 / Question 15 [Threatened or Endangered Animal - Name]	Indiana Bat
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	No