



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 ORDINANCE.  
240-37

\_\_\_\_\_  
*(Indicate Article, Section, Subsection and Paragraph)*

REQUIRED: 50'

REQUIRED SETBACK: 50'

APPLICANT(S) CAN PROVIDE: 5.9'

THUS REQUESTING A VARIANCE OF: 44.1'

TO ALLOW: for the legalization of an 18' x 33' above ground pool

**VARIANCE NO. 2**

I (WE) HEREBY APPLY TO THE ZONING BOARD OF APPEALS FOR A VARIANCE(S) OF THE FOLLOWING REQUIREMENTS OF THE ZONING ORDINANCE.

\_\_\_\_\_  
*(Indicate Article, Section, Subsection and Paragraph)*

REQUIRED SETBACK: \_\_\_\_\_

APPLICANT(S) CAN PROVIDE: \_\_\_\_\_

THUS REQUESTING A VARIANCE OF: \_\_\_\_\_

TO ALLOW: \_\_\_\_\_

**VARIANCE NO. 3**

I (WE) HEREBY APPLY TO THE ZONING BOARD OF APPEALS FOR A VARIANCE(S) OF THE FOLLOWING REQUIREMENTS OF THE ZONING ORDINANCE.

\_\_\_\_\_  
*(Indicate Article, Section, Subsection and Paragraph)*

REQUIRED SETBACK: \_\_\_\_\_

APPLICANT(S) CAN PROVIDE: \_\_\_\_\_

THUS REQUESTING A VARIANCE OF: \_\_\_\_\_

TO ALLOW: \_\_\_\_\_

<b>APPEAL CONCERNS THE FOLLOWING PROPERTY - RESIDENTIAL PROPERTIES ONLY</b> <b>ENTIRE SECTION MUST BE COMPLETED</b> <b>STRUCTURES UNDER 144 SF, REQUIRE ONLY 10 FT TO THE SIDE AND REAR PROPERTY LINES</b>				
Zoning District:	Minimum allowed by Town Code	Current Setback	New Setback	Variance Required
<u><b>Front Yard Setback</b></u> (R-10, 25 ft) (R-15 & R-20 - 35 ft) (R-40 & R-80, 50ft.) (R3-A, 75 ft) (R-5A - 100ft.) (RMF-3 & RMF-5, 50 ft.)  STATE OR COUNTY ROADS REQUIRE A 75 FT FRONT SETBACK IN ALL DISTRICTS	50' ft.	5 ft. 9 in.	ft. in.	ft. in.
<u><b>Rear Yard Setback</b></u> (R-10, 25 ft) (R-15, 30ft) (R-20 - 40 ft) (R-40 & R-80, 50ft.) (R3-A, 50 ft) (R-5A - 100 ft.) (RMF-3 & RMF-5, 50 ft.)	50' ft.	5 ft. 9 in.	ft. in.	ft. in.
<u><b>Side Yard Setback</b></u> (R-10, 12 ft) (R-15, 15 ft) (R-20, 20 ft) (R-40, 25 ft) (R-80, 40 ft.) (R3-A, 50 ft) (R-5A, 50 ft.) (RMF-3, 50 ft.) (RMF-5, 25 ft.)	ft.	ft. in.	ft. in.	ft. in.
<u><b>Maximum building coverage</b></u> (R-10, 25%) (R-15, 20%) (R-20, 15%) (R-40, 12%) (R-80, 10%) (R3-A, 7%) (R-5A, 5%) (RMF-3, 30%.) (RMF-5, 45%)	%	%	%	%

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 UNDESIRABLE OR A DETRIMENT TO THE NEIGHBORHOOD.? PLEASE EXPLAIN YOUR ANSWER IN DETAIL.

Changes will not affect any neighbor

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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.

A town easement prevents me from placing the pool an any alternative location also have septic tank combined with presence of fields. Additionally, the require setbacks of 50 ft its imposible to meet distance requirements in any other location

all this had been going on for more than 2 years i have provided code emforcement Judith Subrize she dinided this and after a foil request i show to her and been waiting for a response, highway and town engerlier came to the property to comfirm It was a town easement

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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 big and wont affect no neighbors

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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 impact

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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.

No it came after i installed the pool and was imfoemed by town inspector the pool cant be there but i did expalined several times why i wasnt able to move it

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Property within 500' of any of the following? If so, they are to be notified.

- Town of Fishkill     Town of Poughkeepsie     Town of East Fishkill  
 Village of Wappinger     Town of LaGrange  
 State or County Road (Rt 9, Rt 9D, Rt 376,  
DC Route 28, DC Rt 92, DC Rt 93, DC Rt 94,  
DC Rt 104 and DC Rt 1

4. LIST OF ATTACHMENTS (*Check applicable information*)

- SURVEY DATED 04/08/2026, LAST REVISED \_\_\_\_\_ AND PREPARED BY \_\_\_\_\_.
- PLOT PLAN DATED 03-30-26.
- PHOTOS
- DRAWINGS DATED \_\_\_\_\_.
- LETTER OF COMMUNICATION WHICH RESULTED IN APPLICATION TO THE ZBA.

(*e.g., recommendation from the Planning Board / Zoning Denial*)

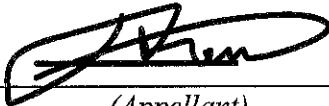
LETTER FROM Judith Subrize DATED: 04/16/2026  
LETTER FROM \_\_\_\_\_ DATED: \_\_\_\_\_

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  DATED: 04/16/2026  
*(Appellant)*

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

.....  
.....

DETERMINATION OF ZBA BASED ON THE ABOVE FACTORS:

The ZBA, after taking into consideration the above five factors, finds that:

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)** / ( ) **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**  
**BE**  
**( ) GRANTED ( ) DENIED.**

Reasons: \_\_\_\_\_

\_\_\_\_\_

The ZBA further finds that a variance of \_\_\_\_\_ from Section of the Zoning Code \_\_\_\_\_ is the minimum variance that should be granted in order to preserve and protect the character of the neighborhood and the health, safety and welfare of the community because:

\_\_\_\_\_

\_\_\_\_\_

CONDITIONS: The ZBA finds that the following conditions are necessary in order to minimize adverse impacts upon the neighborhood or community, for the following reasons:

Condition No. 1. \_\_\_\_\_

\_\_\_\_\_

Adverse impact to be minimized: \_\_\_\_\_

\_\_\_\_\_

Condition No. 2: \_\_\_\_\_

\_\_\_\_\_

Adverse impact to be minimized: \_\_\_\_\_

\_\_\_\_\_

( ) FINDINGS & FACTS ATTACHED.

DATED: \_\_\_\_\_

ZONING BOARD OF APPEALS  
TOWN OF WAPPINGER, NEW YORK

BY: \_\_\_\_\_  
*(Chairman)*

PRINT: \_\_\_\_\_

**RECORD OF VOTE**

	MEMBER NAME	AYE	NAY
Chair	John Lorenzini	_____	_____
Co-Chair	David Barr	_____	_____
Member	Tom DellaCorte	_____	_____
Member	Don Denardo	_____	_____
Member	Christopher Hernandez	_____	_____

**TOWN OF WAPPINGER**  
**ZONING BOARD OF APPEALS**  
**OWNER'S CONSENT**

**AFFIDAVIT TO BE COMPLETED BY OWNER**

State of New York }  
County of Dutchess } ss:

Rose Mander being duly sworn, deposes and says:

1. That I/we are the Owner(s) of the within property as described in the foregoing application for Zoning Board of Appeals approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That I/we hereby authorize \_\_\_\_\_, to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
3. That I/we understand that by submitting this application for Zoning Board of Appeals approval that I/we expressly grant permission to the Zoning Board of Appeals and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Zoning Board of Appeals action.
4. That I/we understand that by submitting this application I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Town related to this application.
5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the
6. Town Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Zoning Board of Appeals, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Town of Wappinger, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Town official(s) entering the property for the purpose of conducting inspections.
7. That I/we understand that the Zoning Board of Appeals intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

[Signature]  
Applicant/Owner

Rose Mander  
Applicant/Owner

[Signature]  
Notary Public

Lee A. Freno  
Notary Public, State of New York  
No. 01FR6327313  
Qualified in Dutchess County  
Commission Expires 7/6/ 2027

## 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>			
Pool legalization			
Name of Action or Project: Pool Variance			
Project Location (describe, and attach a location map): 12 Brothers Rd			
Brief Description of Proposed Action: Keep pool at the current location due to a town easement ditch			
Name of Applicant or Sponsor: Rene Mendez		Telephone: 9144864011 E-Mail: mm23@hotmail.com	
Address: 12 Brothers Rd			
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? 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 type="checkbox"/>
			YES <input checked="" 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 type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		0.7 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			

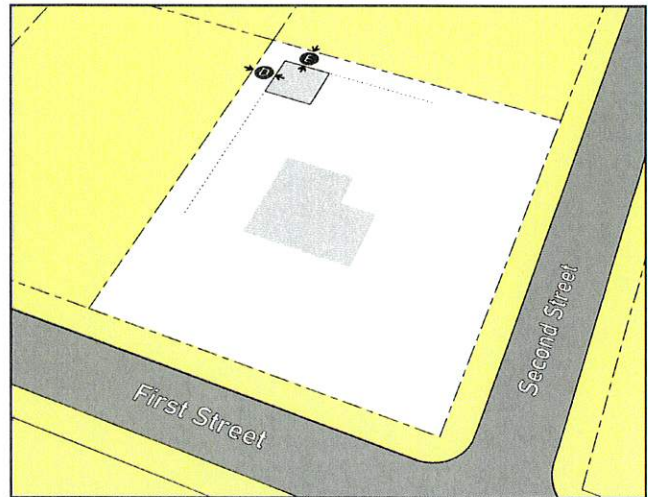
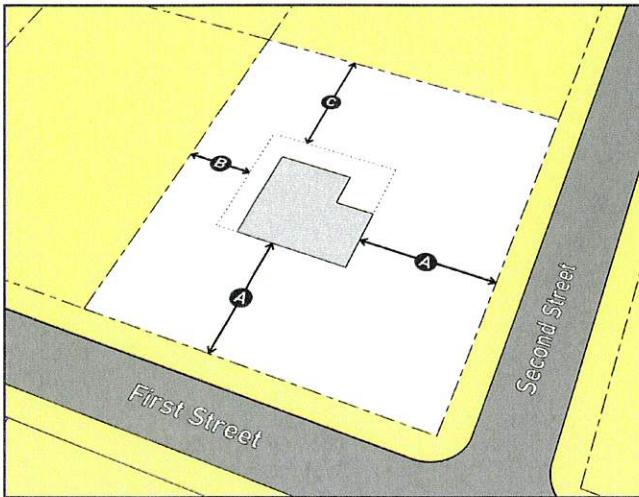
	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations? b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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"/>	



# R-40 One-Family Residence District

## Building Placement and Composition

### CORNER LOT



#### PRIMARY BUILDING SETBACKS

<b>A</b> Front yard from front line of street [min]	50'
<b>B</b> Side yard [min]	25'
<b>C</b> Rear yard [min]	50'

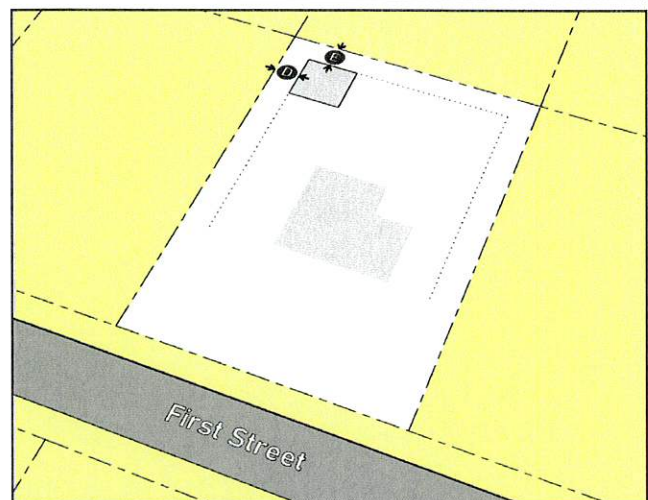
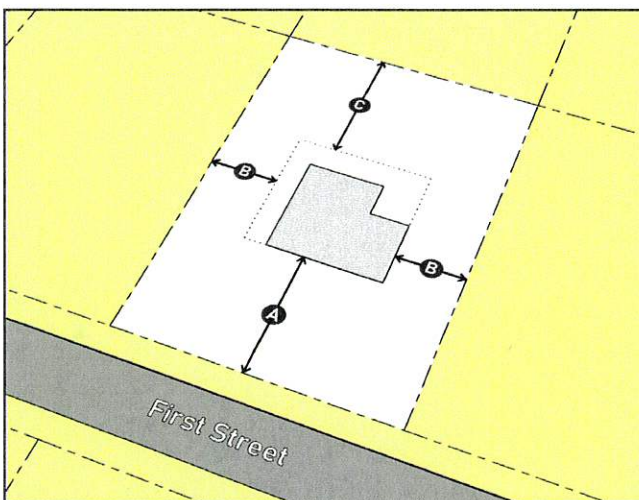
#### ACCESSORY BUILDING SETBACKS

Accessory Building < 15' high and < 144 sq.ft.

<b>D</b> Side yard [min]	10'
<b>E</b> Rear yard [min]	10'

**Notes** - For a Corner Lot, the back yard and side yard can be determined by the Owner in consultation with the building department. This decision is then formalized by the placement of an accessory structure such as a shed, garage, pool, etc.  
 - Accessory structures above this size must comply with the primary structure setback requirements.

### INTERIOR LOT



#### PRIMARY BUILDING SETBACKS

<b>A</b> Front yard from front line of street [min]	50'
<b>B</b> Side yard [min]	25'
<b>C</b> Rear yard [min]	50'

#### ACCESSORY BUILDING SETBACKS

Accessory Building < 15' high and < 144 sq.ft.

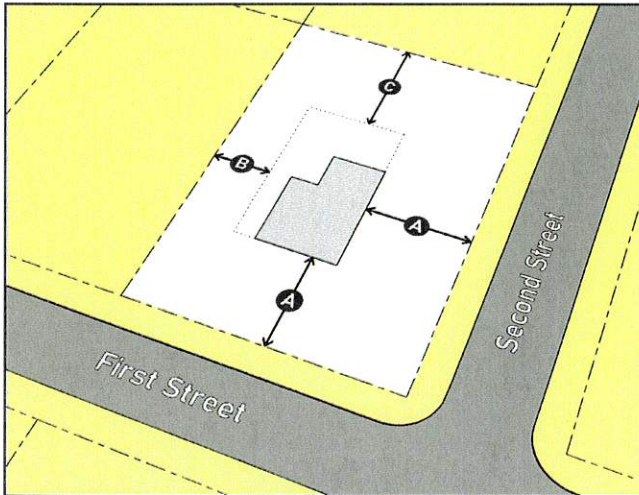
<b>D</b> Side yard [min]	10'
<b>E</b> Rear yard [min]	10'

**Note** - Accessory structures above this size must comply with the primary structure setback requirements.

# R-20 One-Family Residence District

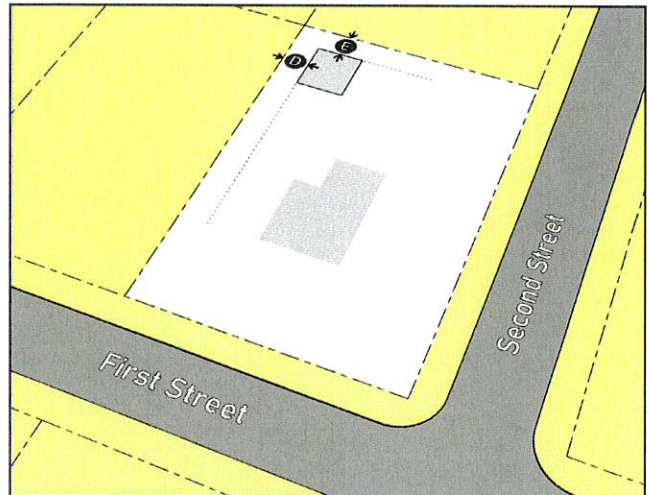
## Building Placement and Composition

### CORNER LOT



#### PRIMARY BUILDING SETBACKS

<b>A</b> Front yard from front line of street [min]	35'
<b>B</b> Side yard [min]	20'
<b>C</b> Rear yard [min]	40'



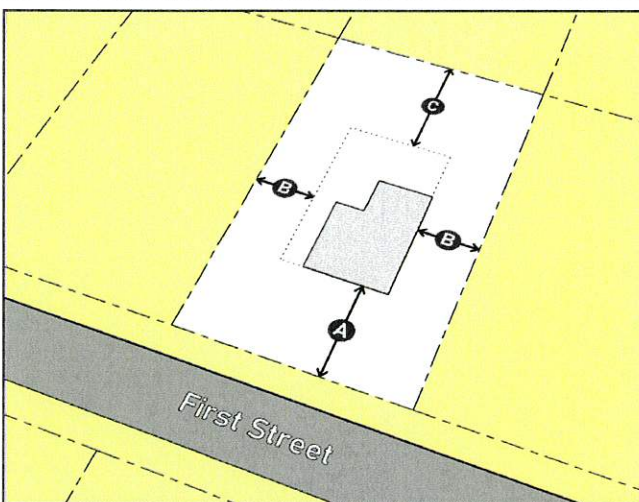
#### ACCESSORY BUILDING SETBACKS

Accessory Building < 15' high and < 144 sq.ft.

<b>D</b> Side yard [min]	10'
<b>E</b> Rear yard [min]	10'

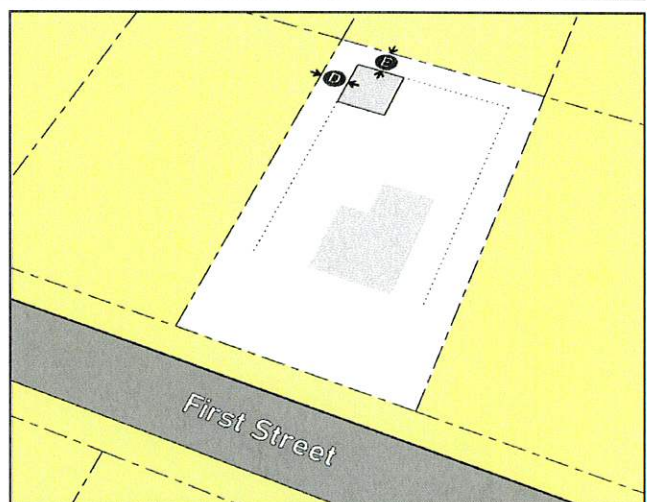
Notes • For a Corner Lot, the back yard and side yard can be determined by the Owner in consultation with the building department. This decision is then formalized by the placement of an accessory structure such as a shed, garage, pool, etc.  
 • Accessory structures above this size must comply with the primary structure setback requirements.

### INTERIOR LOT



#### PRIMARY BUILDING SETBACKS

<b>A</b> Front yard from front line of street [min]	35'
<b>B</b> Side yard [min]	20'
<b>C</b> Rear yard [min]	40'



#### ACCESSORY BUILDING SETBACKS

Accessory Building < 15' high and < 144 sq.ft.

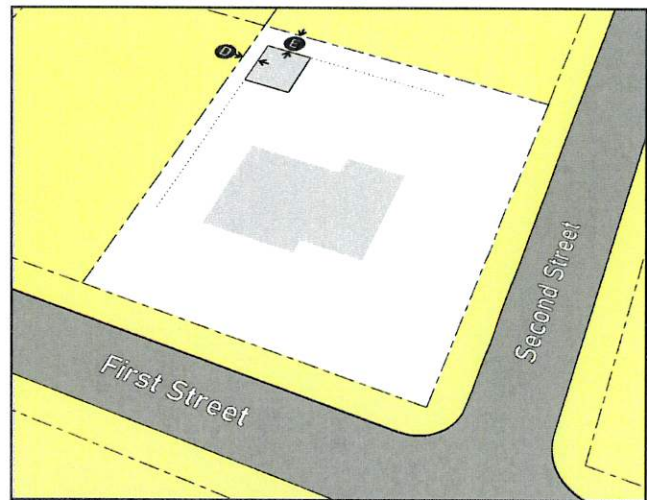
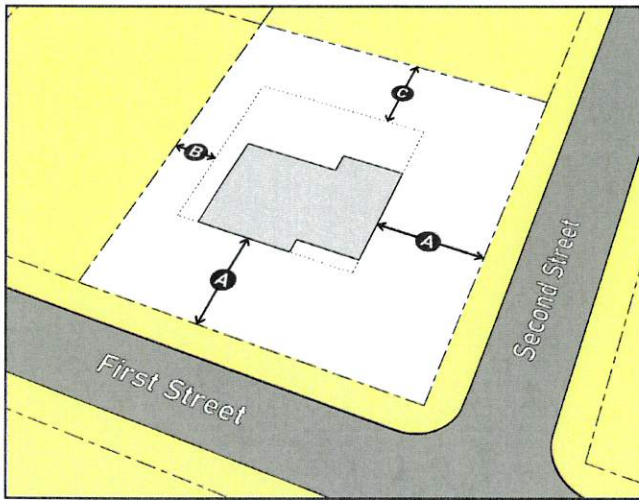
<b>D</b> Side yard [min]	10'
<b>E</b> Rear yard [min]	10'

Note • Accessory structures above this size must comply with the primary structure setback requirements.

# R-15 One-Family Residence District

## Building Placement and Composition

### CORNER LOT



#### PRIMARY BUILDING SETBACKS

<b>A</b> Front yard from front line of street [min]	35'
<b>B</b> Side yard [min]	15'
<b>C</b> Rear yard [min]	30'

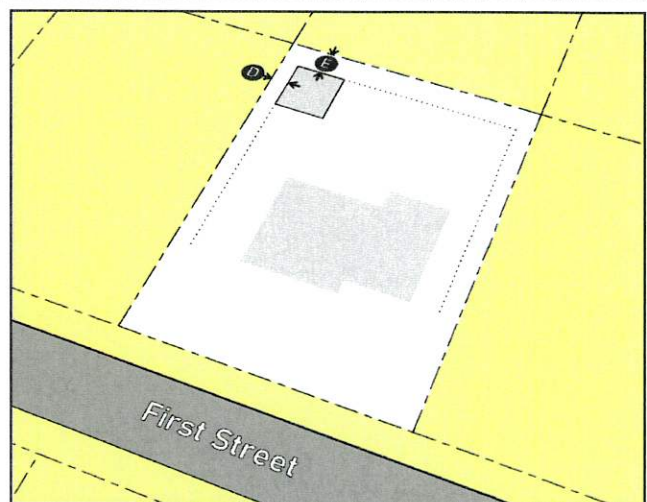
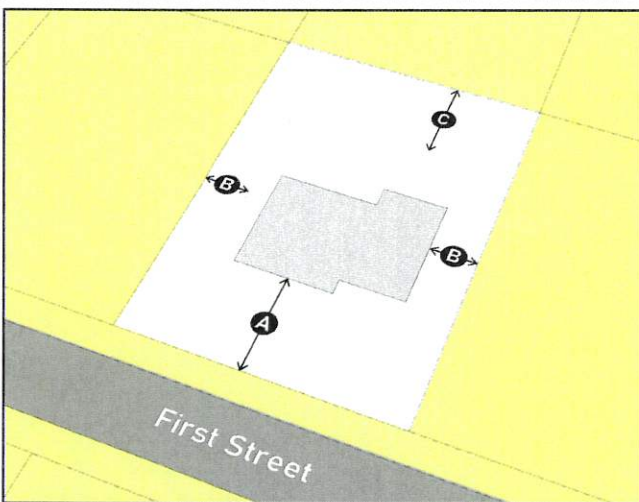
#### ACCESSORY BUILDING SETBACKS

Accessory Building < 15' high and < 144 sq.ft.

<b>D</b> Side yard [min]	6'
<b>E</b> Rear yard [min]	10'

- Notes
- For a Corner Lot, the back yard and side yard can be determined by the Owner in consultation with the building department. This decision is then formalized by the placement of an accessory structure such as a shed, garage, pool, etc.
  - Accessory structures above this size must comply with the primary structure setback requirements.

### INTERIOR LOT



#### PRIMARY BUILDING SETBACKS

<b>A</b> Front yard from front line of street [min]	35'
<b>B</b> Side yard [min]	15'
<b>C</b> Rear yard [min]	30'

#### ACCESSORY BUILDING SETBACKS

Accessory Building < 15' high and < 144 sq.ft.

<b>D</b> Side yard [min]	6'
<b>E</b> Rear yard [min]	10'

- Note
- Accessory structures above this size must comply with the primary structure setback requirements.

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

To: **Rene Mendez**  
12 Brothers Rd  
Wappingers Falls, NY

SBL: 6258-04-788460-0000  
Date of this Notice: 04/16/2026  
Zone: R40  
Application: 46623

For property located at: 12 Brothers Rd

Your application to:

**POOL - LEGALIZATION ABOVE GROUND POOL 18' X 33' OVAL \*\*NEED ELECTRICAL INSPECTION BY TOWN APPROVED ELECTRICAL INSPECTOR\*\* \*\*POOL ALARM MUST MEET ASTM F 2208 REQUIREMENTS\*\* \*\*CALL INTO OUR OFFICE FOR FINAL INSPECTION BY TOWN BUILDING INSPECTOR\*\* \*\*POOL LADDER MUST BE LOCKED WHEN NOT IN USE\*\* \*\*POOL NOT TO BE USED WITHOUT CERTIFICATE OF COMPLIANCE\*\***

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

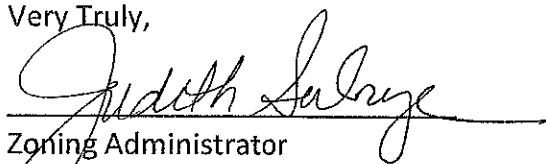
Where 500 feet to the rear property line is required, the applicant can provide 5.9' for a pre-existing pool.

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	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	<u>50</u> ft.	<u>5.9</u> ft.
SIDE YARD (LEFT):	_____ ft.	_____ 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

APR 09 2026

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: R20 DATE: 4-9-26  
APPL #: 46623 PERMIT # \_\_\_\_\_  
GRID: 6258-04-788460

APPLICANT NAME: RENÉ MENDE  
ADDRESS: 12 Brothers Rd Wappingers Falls  
TEL #: 1924 41864011 CELL: 914-486-4011 FAX #: \_\_\_\_\_ E-MAIL: Rmm023@att.net

NAME OWNER OF BUILDING/LAND: \_\_\_\_\_  
\*PROJECT SITE ADDRESS\*: 12 Brothers Rd  
MAILING ADDRESS: 12 Brothers Rd  
TEL #: 1914 4864011 CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

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

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

APPLICATION FOR: Pool outside of yard 18 x 33

SETBACKS: FRONT: \_\_\_\_\_ REAR: 5.9' to rear L-SIDEYARD: \_\_\_\_\_ R-SIDEYARD: variance of 34.1'  
SIZE OF STRUCTURE: 18 x 33  
ESTIMATED COST: Gift TYPE OF USE: Pleasure

NON-REFUNDABLE APPL. FEE: 175 PAID ON: 4/10/26 CHECK # 134 RECEIPT #: 2026-00415  
BALANCE DUE: \_\_\_\_\_ PAID ON: \_\_\_\_\_ CHECK # \_\_\_\_\_ RECEIPT #: \_\_\_\_\_

APPROVALS:  
ZONING ADMINISTRATOR:  
O Approved  Denied Date: 4-10-26  
[Signature]

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

Signature of Applicant  
Rene Mende  
Print Name or Company Name(if applicable)

Signature of Building Inspector

# TOWN OF WAPPINGER PLOT PLAN

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

Date 03/30/26

Address: 12 Brothers Rd

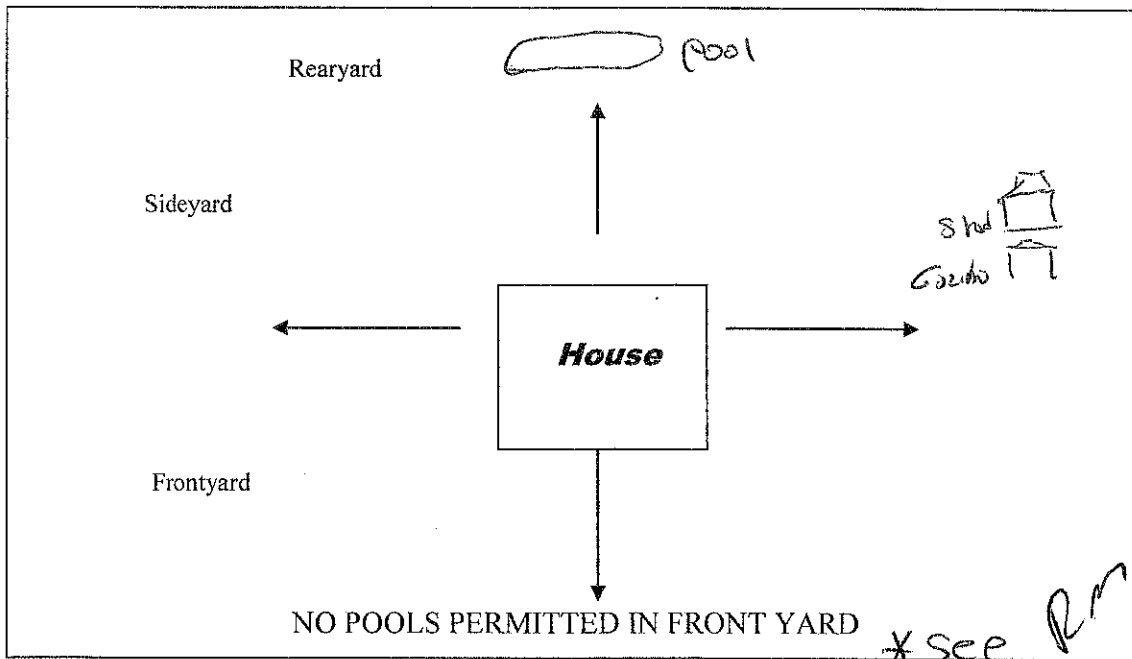
Interior/Corner Lot: *circle one*

Owner of Land RENE MENDEZ

Zone: R20 R40

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

1. House, Deck / Shed / Pool



**REQUIRED:**

- Draw proposed and all existing structures on plot plan.
- Indicate Location Setbacks to both sides and rear property line (measurement in feet)
- Show location of mechanical equipment and filter system backwash discharge area

[Signature]  
SIGNATURE REQUIRED

Approved: / Rejected: [Signature]  
Zoning Administrator

Date: 03/30/26