RECEIVED
OCT 20 2026
Zoning Board of Appeals
Town of Wappinger

# TOWN OF WAPPINGER
# AREA VARIANCE(S) APPLICATION

**APPLICATION TO ZONING BOARD OF APPEALS**
**TOWN OF WAPPINGER, DUTCHESS COUNTY, NEW YORK**

Appeal # 26-7879
Date: 10-20-26
Fee: $375.00
Escrow: ____

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

I (We) Harriet Zbikowski & Chance O'Connor, of
*(Name of Appellant(s)*
7 Applesauce Ln., Wappingers Falls, NY 12590, 845-857-0382
*(Mailing Address)* *(Tel. Nos. Home/Work)*

**HEREBY APPEAL TO THE ZONING BOARD OF APPEALS FROM THE DECISION/ACTION OF THE ZONING ADMINISTRATOR, DATED** August 10, **20** 26 **AND DO HEREBY APPLY FOR AN AREA VARIANCE(S).**

Premises located at 7 Applesauce Lane, Wappingers Falls, NY 12590
*(Address of Property)*
6258-04-674048-0000 R-20
*(Grid Nos.)* *(Zoning District)*

1. **RECORD OWNER OF PROPERTY** Harriet Zbikowski & Chance O'Connor
*(Name)*
7 Applesauce Ln., Wappingers Falls, NY 12590 845-857-0449
*(Address)* *(Phone Number)*

**OWNER CONSENT**: Dated: 10/19/26 Signature: [signature]

Printed: Chance O'Connor

THE APPLICANTS APPEAL, AS PERMITTED BY STATE LAW, CONCERNS THE FOLLOWING:

- [ ] DENIAL OF A BUILDING PERMIT – NEW STRUCTURE
- [x] DENIAL OF A BUILDING PERMIT - TO CURE A VIOLATION
- [ ] TOWN OF WAPPINGER PLANNING BOARD

VARIANCE REQUESTED FOR THE CONSTRUCTION OF: ____

VARIANCE REQUESTED FOR THE LEGALIZATION OF: Deck & Stairs

DATE OF ZONING ENFORCEMENT LETTER: August 10, 2026

STATE THE REASON YOU ARE APPLYING FOR THE VARIANCE(S): new deck
20' required set back, stairs are 17'6" at landing

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.

Section 240-37

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

REQUIRED: 20'

REQUIRED SETBACK: 20'

APPLICANT(S) CAN PROVIDE: 17' 6"

THUS REQUESTING A VARIANCE OF: 2' 6"

TO ALLOW: _____

**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: _____

**APPEAL CONCERNS THE FOLLOWING PROPERTY - RESIDENTIAL PROPERTIES ONLY**
**ENTIRE SECTION MUST BE COMPLETED**
**STRUCTURES UNDER 144 SF, REQUIRE ONLY 10 FT TO THE SIDE AND REAR PROPERTY LINES**

| Zoning District: | Minimum allowed by Town Code | Current Setback | New Setback | Variance Required |
|---|---|---|---|---|
| **Front Yard Setback**<br>(R-10, 25 ft)<br>(R-15 & R-20 - 35 ft)<br>(R-40 & R-80, 50ft.)<br>(R3-A, 75 ft)<br>(R-5A – 100ft.)<br>(RMF-3 & RMF-5, 50 ft.)<br><br>STATE OR COUNTY ROADS REQUIRE A 75 FT FRONT SETBACK IN ALL DISTRICTS | ft. | ft. in. | ft. in. | ft. in. |
| **Rear Yard Setback**<br>(R-10, 25 ft)<br>(R-15, 30ft)<br>(R-20 - 40 ft)<br>(R-40 & R-80, 50ft.)<br>(R3-A, 50 ft)<br>(R-5A – 100 ft.)<br>(RMF-3 & RMF-5, 50 ft.) | ft. | ft. in. | ft. in. | ft. in. |
| **Side Yard Setback**<br>(R-10, 12 ft)<br>(R-15, 15 ft)<br>(R-20, 20 ft)<br>(R-40, 25 ft)<br>(R-80, 40 ft.)<br>(R3-A, 50 ft)<br>(R-5A, 50 ft.)<br>(RMF-3, 50 ft.)<br>(RMF-5, 25 ft.) | 20 ft | 20 ft. in | 17 6 ft. in | 2 6 ft. in |
| **Maximum building coverage**<br>(R-10, 25%)<br>(R-15, 20%)<br>(R-20, 15%)<br>(R-40, 12%)<br>(R-80, 10%)<br>(R3-A, 7%)<br>(R-5A, 5%)<br>(RMF-3, 30%.)<br>(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 THEEE NEIGHBORHOOD.? PLEASE EXPLAIN YOUR ANSWER IN DETAIL.

not at all

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.

No. Set back required 20' stairs land at 17' 6" coming straight down from rear of building
site map shows parcel is wedge shaped. property line narrows from front to back.

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.

No. 2' 6"
the stairs do not impede in any significant way on the neighbors property

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 not at all. no one notices any impact of current stair configuration
our neighbors appreciates the improvements we have made

E. HOW DID YOUR NEED FOR AN AREA VARIANCE(S) COME ABOUT? IS YOUR DIFFICULTY SELF-CREATED? PLEASE EXPLAIN YOUR ANSWER IN DETAIL.

Self created. We had no idea that we were that close to the property line
The stairs come straight down from the corner of the house.
Originally the stairs were on the side of the home but impeded access to the water spigot and the utility meters. Stairs were moved to remedy this.

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 July 4, 2026, LAST REVISED _____ AND PREPARED BY Rowan Land Survey.

(☐) 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: _____
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:** 10/19/2026
*(Appellant)*

**SIGNATURE** _____ **DATED:** 10/19/2026
*(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 }
} ss:
County of Dutchess }

Chance O'Connor + Harriet Zbikowski 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 Chance O'Connor + Harriet Zbikowski, 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.

Applicant/Owner

Applicant/Owner

Barbara L. Roberti
Notary Public

BARBARA L. ROBERTI
Notary Public, State of New York
Reg. No. 01RO6130344
Dutchess County
My Commission Expires July 18, 2029 2029

# *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**

CHANCE O'CONNOR

Name of Action or Project:

7 APPLESAUCE LN WAPPINGERS FALLS, NY 12590

Project Location (describe, and attach a location map):

SAME

Brief Description of Proposed Action:

Legalization of new Deck and Stairs

| Name of Applicant or Sponsor: | Telephone: 845-857-0382 |
|---|---|
| | E-Mail: CHANCEOC@AOL.COM |

Address: 7 Applesauce Lane Wappingers Falls NY

| City/PO: | State: | Zip Code: |
|---|---|---|
| | NY | 12590 |

| | NO | YES |
|---|---|---|
| 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. | ☐ | ☐ |
| 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: | ☐ | ☐ |

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:

☐ Urban ☐ Rural (non-agriculture) ☐ Industrial ☐ Commercial ☐ Residential (suburban)

☐ Forest ☐ Agriculture ☐ Aquatic ☐ Other(Specify):

☐ 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? | ☐ | ☑ | ☐ |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? | NO | YES | |
| | ☑ | ☐ | |
| 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: _____ | ☑ | ☐ | |
| 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? | ☑ | ☐ | |
| c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action? | ☑ | ☐ | |
| 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: | ☑ | ☐ | |
| 10. Will the proposed action connect to an existing public/private water supply? | NO | YES | |
| If No, describe method for providing potable water: _____ | ☑ | ☐ | |
| 11. Will the proposed action connect to existing wastewater utilities? | NO | YES | |
| If No, describe method for providing wastewater treatment: _____ | ☑ | ☐ | |
| 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 | |
| | ☑ | ☐ | |
| 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? | ☑ | ☐ | |
| 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 | |
| | ☑ | ☐ | |
| 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: _____ | | | |

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply:

☐ Shoreline ☐ Forest ☐ Agricultural/grasslands ☐ Early mid-successional

☐ Wetland ☐ Urban ☑ Suburban

| | NO | YES |
|---|---|---|
| 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? | ☑ | ☐ |
| 16. Is the project site located in the 100-year flood plan? | ☑ | ☐ |
| 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? | ☑ | ☐ |
| b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? | ☑ | ☐ |
| 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: _____ | | |
| 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: _____ | | |
| 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: _____ | | |

**I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE**

Applicant/sponsor/name: Chance O'Connor Date: 10/19/2026

Signature: _____ Title: Owner

# Town of Wappinger

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

**To:** O'Connor, Chance
7 Appplesauce Ln
,

**SBL:** 6258-04-674048-0000
**Date of this Notice:** 08/10/2026
**Zone:**
**Application:** 46596

**For property located at:** 7 Applesauce Ln

Your application to:

**DECK - REPLACEMENT OF 14 x 19 1/2 REAR DECK WITH STAIRS - LEGALIZATION -**

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

Where 20 ft to the side property line is required, the applicant can provide 17.6' to the left side property line for the legalization of a deck with stairs.

---

| | REQUIRED: | WHAT YOU CAN PROVIDE: |
|---|---|---|
| REAR YARD: | _____ ft. | _____ ft. |
| SIDE YARD (LEFT): | 20 ft. | 17.6 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

Very Truly,

Barbara Rhodes

Zoning Administrator
Town of Wappinger

RECEIVED
MAR 27 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:**
- [x] Residential
- [ ] New Construction
- [ ] Commercial
- [x] Renovation/Alteration
- [ ] Multiple Dwelling

ZONE: R20 DATE: 4/6/2026
APPL #: 46596 PERMIT #
GRID: 6258-04-674048

**APPLICANT NAME:** Harriet Zbikowski
ADDRESS: 7 Applesauce Lane, W.F.
TEL #: 845-857-0382 CELL: same FAX #: na E-MAIL: chanceoc@aol.com

**NAME OWNER OF BUILDING/LAND:**
*PROJECT SITE ADDRESS*: same
MAILING ADDRESS: same
TEL #: CELL: FAX #: E-MAIL:

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

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

**APPLICATION FOR:** repair and replace deck and stairs
14 x 19½
*Legalization*

**SETBACKS:** FRONT: REAR: L-SIDEYARD: 17.6' R-SIDEYARD:
**SIZE OF STRUCTURE:**
**ESTIMATED COST:** 2,000 **TYPE OF USE:**

**NON-REFUNDABLE APPL. FEE:** 150- PAID ON: 4/6/26 CHECK # 240 RECEIPT #: 20260379
BALANCE DUE: PAID ON: CHECK # RECEIPT #:

**APPROVALS:**

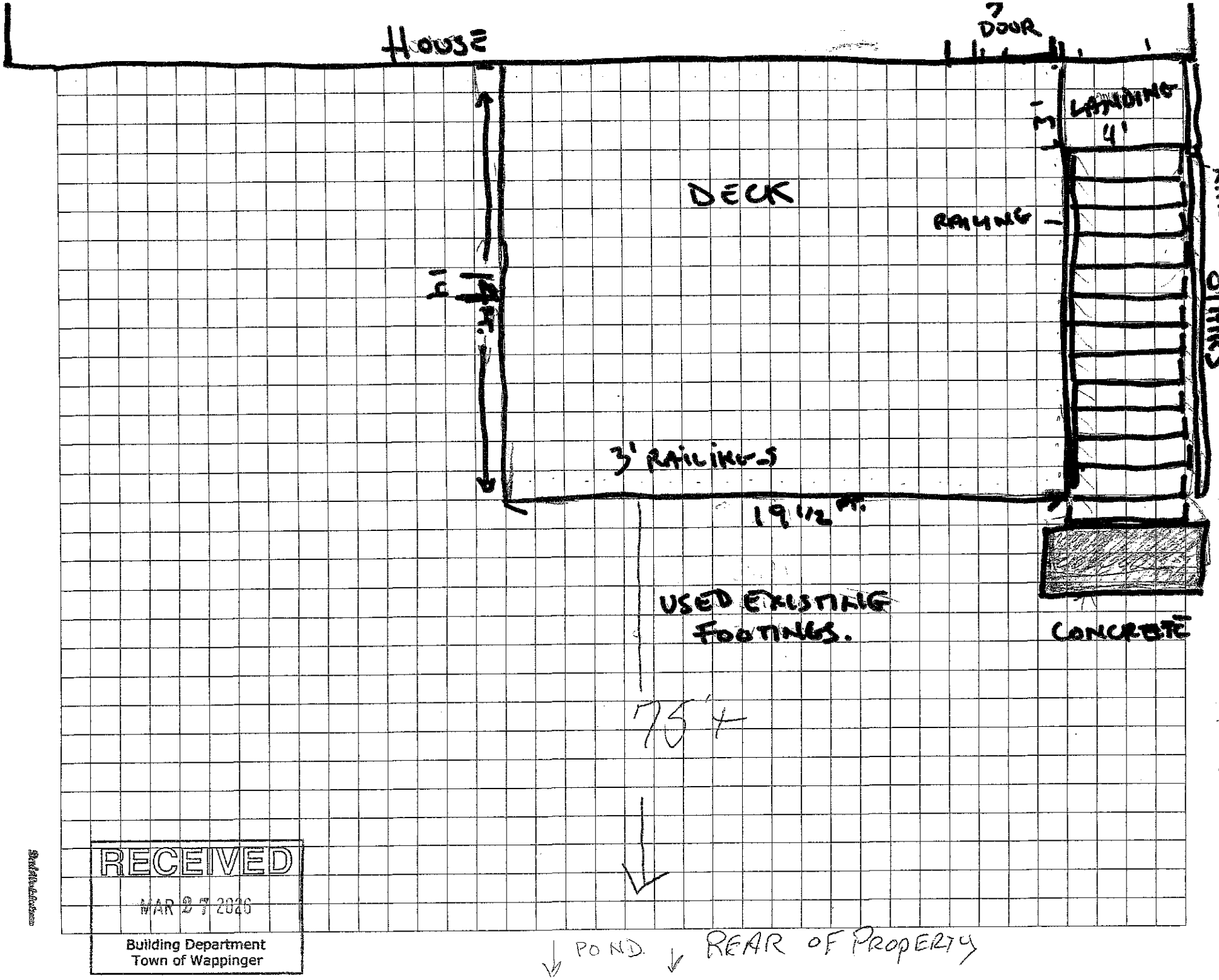
**ZONING ADMINISTRATOR:**
O Approved ● Denied Date: 4.7.26

**FIRE INSPECTOR:**
O Approved O Denied Date:

Signature of Applicant

Signature of Building Inspector

Chance O'Connor
Print Name or Company Name(if applicable)




RECEIVED
MAR 27 2026
Building Department
Town of Wappinger




**Parcel #: 135689-6258-04-715048-0000**

Wappinger, NY

ParcelAccess
Dutchess County, NY

Printed By:
ParcelAccess

1:500 Scale
4/7/2026