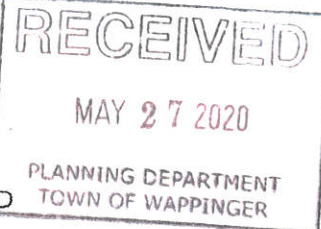




## TOWN OF WAPPINGER

P.O. BOX 324 ~ 20 MIDDLEBUSH ROAD  
WAPPINGERS FALLS, NY 12590

Zoning Board of Appeals  
Office: 845.297.1373 ~ Fax: 845.297.4558  
Zoning Enforcement Officer  
Office: 845.297.6257  
www.townofwappinger.us



### Application for an Area Variance

Appeal # 20-7701

Dated: 5/20/2020

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

I(We), Nicole & Chris Sawicki residing at 105 Edgehill Dr.  
Wappinger Falls, NY, 845-892-6887 (phone), hereby appeal  
to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,  
dated May 27, 2020, and do hereby apply for an area variance(s).

Premises located at 105 Edgehill Dr.  
Tax Grid # 135689-6358-03-122158-0000  
Zoning District: R20

1. Record Owner of Property Sawicki, Chris & Nicole  
Address 105 Edgehill Dr., Wappinger Falls  
Phone Number 845-892-6887  
Owner Consent: Dated: 5/27/20

Signature: N. Sawicki  
Printed: Nicole Sawicki

#### 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: Where no accessory structure is permitted in the front yard,  
Applicant(s) is seeking a variance for a 33' above ground pool.  
Thus requesting: to place in the front yard  
To allow: for a 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 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.

There will be no change.

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.

Property is a corner lot with two fronts. The required front setback is 50'. We cannot go towards the other side of the property due to the placement of the septic. There is no other alternative w/out the need of a variance.

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 variance is not substantial. We are requesting 15'. The required setback is 50' and we are requesting to put the pool at 35'.

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.

There will be no impact.

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 like an above ground pool. The  
difficulty is not self created.

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

NO.

4. List of attachments (Check applicable information)

(✓) Survey Dated 11/11/2019, Last Revised \_\_\_\_\_ and  
Prepared by Robert Oswald.

(✓) Plot Plan Dated \_\_\_\_\_.

( ) Photos

(✓) Drawings Dated 5/27/2020.

( ) 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 Sara Demici of Nejame DATED: 5/27/2020  
(Appellant) & Sons

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

**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) / ☐ 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 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

20 Middlebush Road  
Wappingers Falls, NY 12590

### Planning Department

Office: 845.297.1373 ~ Fax: 845.297-0579  
www.broberti@townofwappinger.us

### Owner Consent Form

*To be filed when the applicant is not the building or property owner*

Project # 20-7701 Date: 5/27/2020

Grid # 135689-6358-03-122158- Zoning District: R20  
0000

Location of project: 105 Edgehill Drive

Name of Applicant: Sara DeMici / Kevin Cohen of Nejame + sons  
Print name and phone number

Description of project: Install a 33' Round  
above ground pool in the rear of the  
property

I Nicole Sawicki, 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.

5/27/2020  
Date

(845) 392-6887  
Owner's Telephone No.

N. Sawicki  
Owner's Signature

Nicole Sawicki  
Print Name and Title \*\*\*

105 Edgehill Drive Wappingers Falls  
Owner's Address NY 12590

\*\*\*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.

617.20  
Appendix B  
Short Environmental Assessment Form

**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> <i>Nejame &amp; Sons / Sawicki Above Ground Pool</i>			
Name of Action or Project: <i>105 Edgchill Drive, Wappinger Falls, NY</i>			
Project Location (describe, and attach a location map): <i>33' Above Ground Pool in Rear</i>			
Brief Description of Proposed Action: <i>Install an above ground pool in the rear of the property</i>			
Name of Applicant or Sponsor: <i>Kevin Cohen / Sara Demici &amp; Sons</i>		Telephone: <i>(203) 743-4663</i>	E-Mail: <i>sd@mypoolscool.com</i>
Address: <i>91 South St.</i>			
City/PO: <i>Danbury</i>		State: <i>CT</i>	Zip Code: <i>06810</i>
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 governmental Agency?		NO	YES
If Yes, list agency(s) name and permit or approval: <i>Building Dept., Zoning Dept.</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action?		<i>.53</i> acres	
b. Total acreage to be physically disturbed?		<i>0.000803</i> acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		<i>489</i> <i>.53</i> acres	
4. Check all land uses that occur on, adjoining and 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, a. A permitted use under the zoning regulations?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	N/A <input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		NO <input type="checkbox"/>	YES <input checked="" 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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
b. Are public transportation service(s) available at or near the site of the proposed action?		<input type="checkbox"/>	<input type="checkbox"/>
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?		<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: _____		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
b. Is the proposed action located in an archeological sensitive area?		<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?		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
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: _____		<input type="checkbox"/>	<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?		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
16. Is the project site located in the 100 year flood plain?		NO <input checked="" type="checkbox"/>	YES <input 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 type="checkbox"/> NO <input type="checkbox"/> YES		NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ <input type="checkbox"/> NO <input type="checkbox"/> YES			

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	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"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>Sara Demici</u> Date: <u>5/27/20</u>		
Signature: <u>[Signature]</u>		

**Part 2 - Impact Assessment.** The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing: a. public / private water supplies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>



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

**To:** Sawicki, Christopher  
Sawicki, Nicole  
105 Edgehill Dr

**SBL:** 6358-03-141136  
**Date of This Notice:** 5/27/2020  
**Zone:** R20  
**Application #:** 39295

**For Property Located at:** 105 Edgehill Dr

Your application to:

**33 ft. ABOVE GROUND POOL - NO DECK**

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

**WHERE NO STRUCTURES ARE PERMITTED IN A FRONT YARD, THE APPLICANT IS PROPOSING TO PLACE THE POOL INTO THE FRONT YARD. THIS PROPERTY IS A CORNER LOT.**

● "Accessory Structures must comply with all minimum yard setback requirements for buildings, but in no case shall they be permitted in the front yard."

○ Does NOT MEET dimensional requirement for Zone.

○ "This zoning district has a front yard requirement of seventy-five feet (75') from a state or County road."

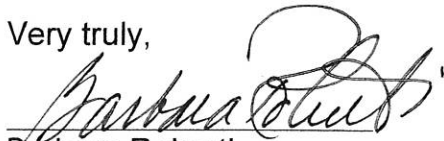
As per code Section 240-26, which states: " The use of tents, trailers and mobile homes for

○ permanent dwelling purposes shall not be permitted in any district except as permitted and regulated in Section 240-51, Mobile home park, of this chapter..."

	R E Q U I R E D:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ 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. The 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.

Very truly,



Barbara Roberti  
Zoning Administrator  
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: R 20 DATE: 5.27.20  
APPL #: 39295 PERMIT # \_\_\_\_\_  
GRID: 6358-03-141136

APPLICANT NAME: Nicole Sawicki / Sara Demici of Nejame + sons  
ADDRESS: 105 Edgehill Dr., Wappingers Falls, NY 12590  
TEL #: \_\_\_\_\_ CELL: 845 392 6887 FAX #: \_\_\_\_\_ E-MAIL: nsawicki 0720@yahoo.com

NAME OWNER OF BUILDING/LAND: SAME

\*PROJECT SITE ADDRESS\*: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TEL #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**BUILDER/CONTRACTOR DOING WORK:**

COMPANY NAME: Nejame and Sons  
ADDRESS: 91 South Street, Danbury, CT 06810  
TEL #: 203 743 4663 CELL: \_\_\_\_\_ FAX #: 203 794 0638 E-MAIL: Ka @mypodscad.com

**DESIGN PROFESSIONAL NAME:**

TEL #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

APPLICATION FOR: Above ground pool 33'

SETBACKS: FRONT: 117' REAR: 41' L-SIDEYARD: 36' R-SIDEYARD: 49'

SIZE OF STRUCTURE: \_\_\_\_\_

ESTIMATED COST: \$10,000.00 TYPE OF USE: Personal

NON-REFUNDABLE APPL FEE: 150 PAID ON: 5/27/20 CHECK # 1356 RECEIPT #: 20.21221

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

**APPROVALS:**

**ZONING ADMINISTRATOR:**

☐ Approved ☒ Denied Date: 5.27.20

[Signature]

N. Sawicki

Signature of Applicant

**FIRE INSPECTOR:**

☐ Approved ☐ Denied Date: \_\_\_\_\_

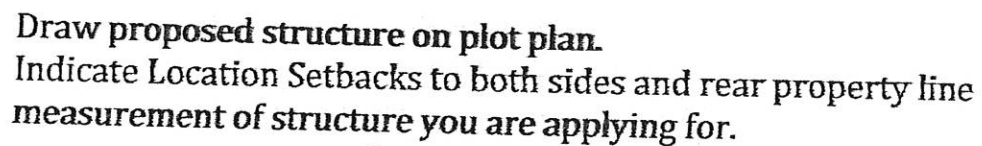
\_\_\_\_\_

Signature of Building Inspector

## PLOT PLAN

Zone: R-20

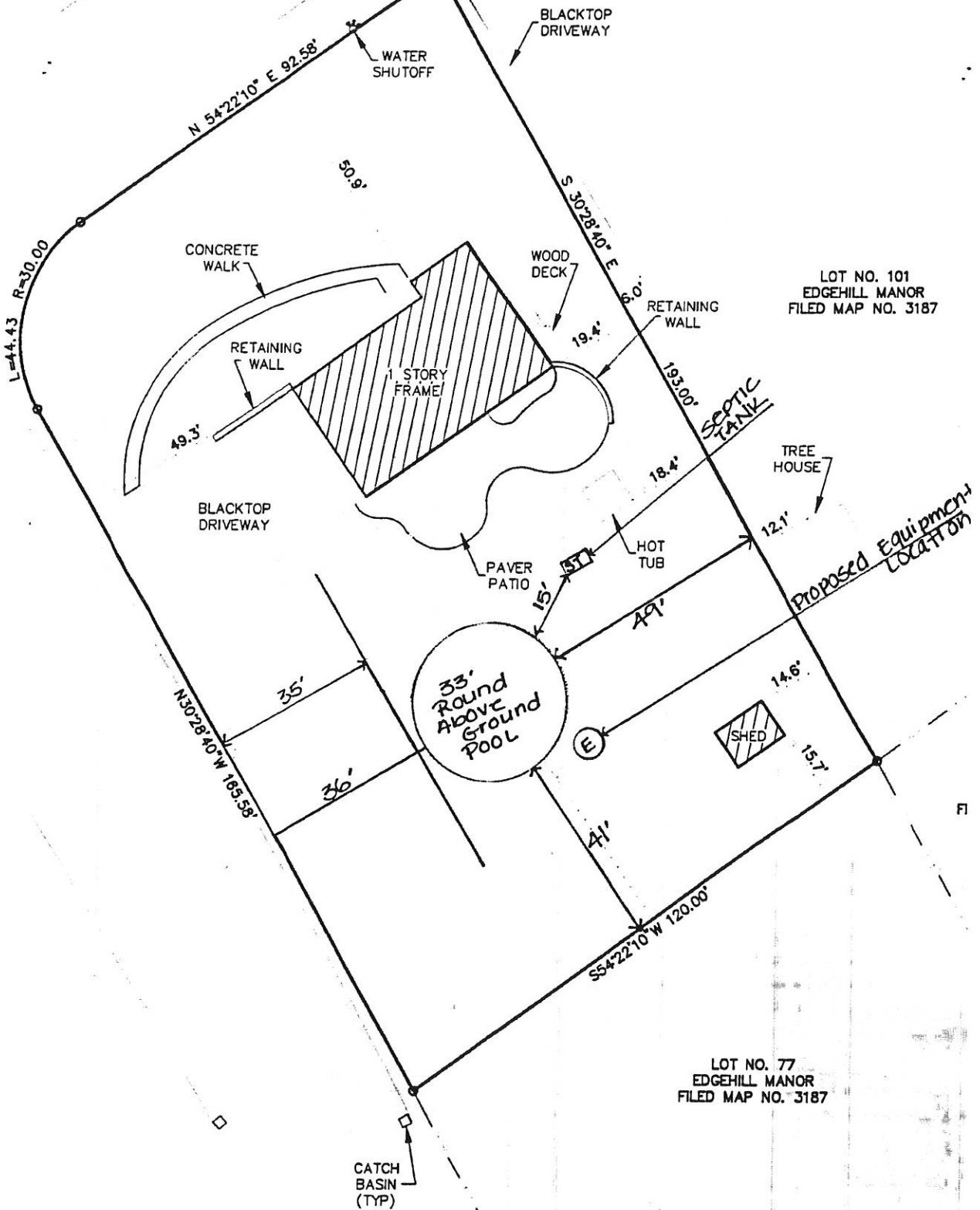
1. House, shed, deck



Date: 5-27-20

# Above Ground Pool Plan: 105 Edgehill Dr.

GEHILL  
DRIVE



LOT NO. 101  
EDGEHILL MANOR  
FILED MAP NO. 3187

LOT NO. 77  
EDGEHILL MANOR  
FILED MAP NO. 3187

Pool Plan Prepared  
by:

**NEJAME & SONS**  
51 SOUTH STREET, DANBURY CT 06810  
(203) 743-HOME (4663)  
www.mypoolseel.com

AREA= 0.53 ACRES +/-

5/27/20

Survey done by  
Robert Oswald  
on 11/11/2019

**MAP OF SURVEY  
FOR**