

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. It's A RELATIVELY SMALL STRUCTURE IN THE BACKYARD. IT WILL BARELY BE VISIBLE BY THE ROAD. IT WILL ALSO BE SHIELDED BY MY NEIGHBOR'S LARGE DETACHED GARAGE WHICH MAY ALSO BE IN THE SETBACK.

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.

THERE ISN'T ENOUGH ROOM TO BUILD THE CABANA WITHIN THE SETBACKS BECAUSE THE POOL TAKES UP THE MAJORITY OF THE BACKYARD.

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 CABANA WILL ENCROACH THE SETBACK BY 8' 5". THIS LEAVES 16' 7" OF THE SETBACK LEFT.

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 BECAUSE IT WILL BARELY BE VISIBLE OR HAVE ANY OTHER PHYSICAL IMPACTS.

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

I Am Trying To Create A Nice Backyard Area
And Ran Out Of Room. This Was ~~Created~~ Self-Created

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

I Do Not Believe My Property Is Unique. I Believe
My Neighbor Has A Structure In His Setback As Well

4. List of attachments (Check applicable information)

- Survey dated: _____, Last revised _____ and Prepared by: _____.
- 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: _____
- 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: 6/14/2021

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: 21-7734

Date: 6-16-21

Grid No.: 6257-04-608498

Zoning District: R40

Location of Project:

17 CALIBURN CT WAPPINGERS FALLS NY 12590

Name of Applicant:

YUWEN CHEN

Print name and phone number

Description of

Project: ADDING A 22'6" X 15'8" CABANA AND A
23' X 10' POOL HOUSE IN THE BACKYARD

I YUWEN CHEN, 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 6/14/2021

[Signature]
Owner's Signature

Owner's Telephone Number 914-475-3462

YUWEN CHEN OWNER
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 dead.

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							
<p style="font-size: 1.2em; margin: 0;">YUWEN CHEW 17 CALIBURN CT</p>							
<p>Name of Action or Project: BACKYARD CABANA / POOLHOUSE</p>							
<p>Project Location (describe, and attach a location map): BACKYARD</p>							
<p>Brief Description of Proposed Action: CONSTRUCTING A CABANA AND A POOLHOUSE. THE POOL HOUSE IS ESSENTIALLY A SHED WITH HALF BATHROOM</p>							
<p>Name of Applicant or Sponsor: YUWEN CHEW</p>		<p>Telephone: 914-475-3462</p> <p>E-Mail: YUWEN1023@YAHOO.COM</p>					
<p>Address: 17 CALIBURN CT</p>							
<p>City/PO: WAPPINGERS FALLS</p>		<p>State: NY</p>	<p>Zip Code: 12590</p>				
<p>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.</p>			<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;">NO</td> <td style="width: 50%;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<p>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:</p>			<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;">NO</td> <td style="width: 50%;">YES</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	NO	YES	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO	YES						
<input checked="" type="checkbox"/>	<input type="checkbox"/>						
<p>3. a. Total acreage of the site of the proposed action? 1.7 acres</p> <p>b. Total acreage to be physically disturbed? 1/8 acres</p> <p>c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 1.7 acres</p>							
<p>4. Check all land uses that occur on, are adjoining or near the proposed action:</p> <p> <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 </p>							

	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	<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? 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? 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?	<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: _____ _____	<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: _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ _____	<input type="checkbox"/>	<input checked="" 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?	<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: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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

To: Chen, Yuwen
17 Caliburn Ct

SBL: 6257-04-608498
Date of this Notice: 06/04/2021
Zone: R40
Application: 40624

For property located at: 17 Caliburn Ct

Your application to:

10' X 23 SHED WITH 1/2 BATHROOM & 22'6" X 15'6" CABANA

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

Where 25 feet to the side property line is required, the applicant can provide 16' 7" to the side property line for a shed/cabana.

	R E Q U I R E D:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	<u>25</u> ft.	<u>16' 7"</u> 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,



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 **ZONE:** R40 **DATE:** 6/3/2021
 New Construction Commercial **APPL #:** 40624 **PERMIT #** _____
 Renovation/Alteration Multiple Dwelling **GRID:** 6257-04-608498

APPLICANT NAME: YUWEN CHEN
ADDRESS: 17 CALIBURN CT, WAPPINGERS FALLS, NY 12590
TEL #: 914-475-3462 **CELL:** 914-475-3462 **FAX #:** _____ **E-MAIL:** YUWEN1023@YAHOO.COM

SAME → **NAME OWNER OF BUILDING/LAND:** YUWEN CHEN
***PROJECT SITE ADDRESS*:** _____
MAILING ADDRESS: _____
TEL #: _____ **CELL:** _____ **FAX #:** _____ **E-MAIL:** _____

BUILDER/CONTRACTOR DOING WORK:
COMPANY NAME: NAVARRO & SON
ADDRESS: 79 NORTH OHIOVILLE RD, NEW PALTZ, NY 12561
TEL #: _____ **CELL:** 845-616-1273 **FAX #:** _____ **E-MAIL:** HONORIONAVARRO@YAHOO.COM

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

APPLICATION FOR: SHED WITH ATTACHED BATHROOM (HALF) AND A CABANA

SETBACKS: FRONT: 180'/198' REAR: 185'/170' L-SIDEYARD: 16' 7" R-SIDEYARD: 35'
SIZE OF STRUCTURE: SHED w/ BATHROOM 10'x23' / CABANA 22'6" x 15'6"
ESTIMATED COST: 30,000 **TYPE OF USE:** RECREATION

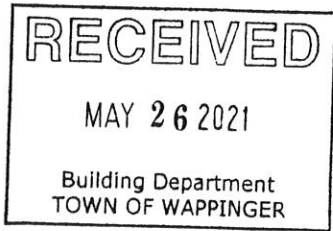
NON-REFUNDABLE APPL. FEE: 100- **PAID ON:** 6/3/21 **CHECK #** 196 **RECEIPT #:** 2021-23847
BALANCE DUE: _____ **PAID ON:** _____ **CHECK #** _____ **RECEIPT #:** _____

APPROVALS:
ZONING ADMINISTRATOR:
 Approved Denied **Date:** 6.4.21
Barbara [Signature]

Signature of Applicant

FIRE INSPECTOR:
 Approved Denied **Date:** _____

Signature of Building Inspector



TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date 5/26/2021

Address: 17 Caliburn Ct.

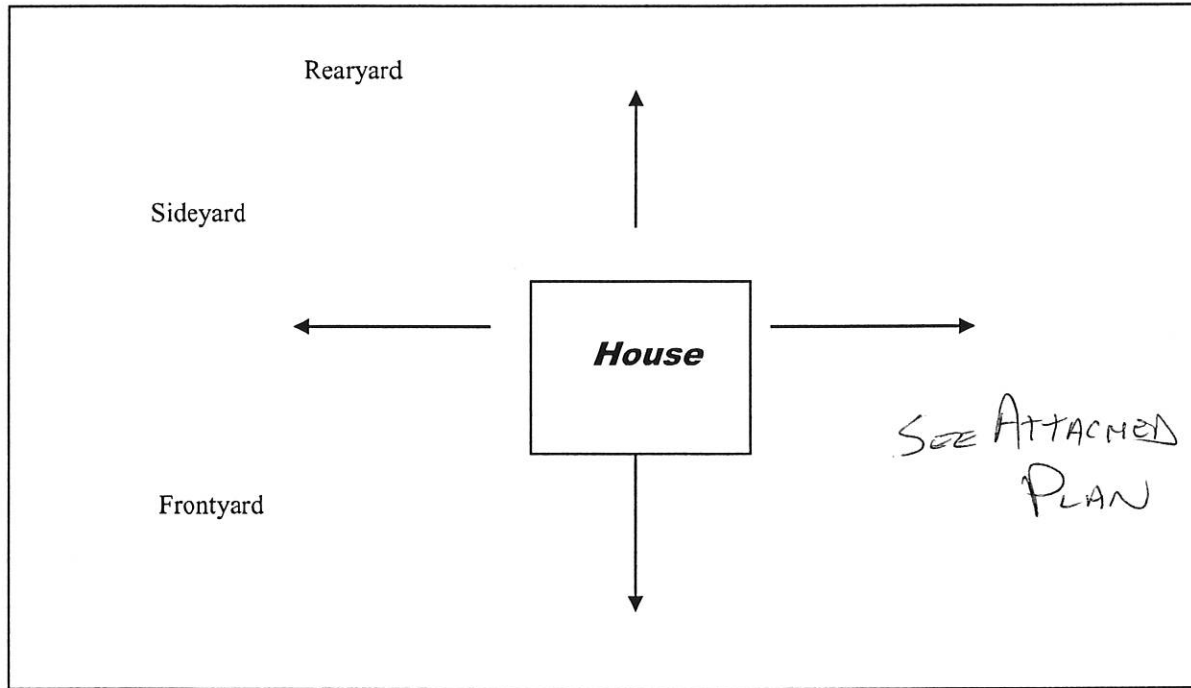
Interior/Corner Lot: circle one

Owner of Land _____

Zone: R40

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

1. House,



Draw proposed structure on plot plan.
Indicate Location Setbacks to both sides and rear property line
measurement of structure you are applying for.

Signature

Approved: / Rejected: _____
Zoning Administrator

Date: 6.4.21