

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.: 22-7762

Date: 8/11/22

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

I (We), Thomas Della Corte / Angela Bettina residing at 1 Booth Blvd
Wappingers Falls, New York 12590, (phone) 845-656-1637, hereby,
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 8/11/22, and do hereby apply for an area variance(s).

Premises located at: 1 Booth Blvd Wappingers Falls NY 12590
Tax Grid No.: 135689-6056-03-469460-0000
Zoning District: R20

1. Record Owner of Property:

Thomas Della Corte Angela Bettina
Address: 1 Booth Blvd Wappingers Falls, NY 12590
Phone Number: 8456561637
Owner Consent dated: 8/11/22

Signature: [Signature]
Print Name: Tom Della Corte A. Bettina

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: 75' to a County Road

Applicant(s) can provide: 67'

Thus requesting: 8' Variance to County Road

To allow: 8' x 12' Shed

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: No accessory structure in front yard
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.

It will not change the character of the neighborhood, the shed will be placed behind my fence in the rear/front yard, I have a large hedge of white pine trees which will block view

- 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.

My house is a corner lot with 2 front yards, one on Chelsea Rd (County Rd) and one on Booth Blvd. Rear lot is small and behind house which and rear property has difficulty leaving enough space for any structure behind house

- 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.

Shed will be behind fence approx 8' over front/side yard, setback from County (Chelsea Rd) is 75', can provide 67' to County Rd.

- 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 effect or impact, the shed will be behind 4 ft fence and hedgerow of white pines, therefore making it difficult to see from road

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

The house is on a corner lot with 2 front yards, the placement of the house is on a flat portion up and to the right of the lot, leaving the rear lot a smaller portion, difficulty is self created

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

Property is not unique, corner lots are prevalent and having a corner lot presents challenge for shed placement

4. List of attachments (Check applicable information)

- () Survey dated: January 88', Last revised — and
Prepared by: Anthony Rowan.
- () Plot Plan dated: 3/21.
- () Photos
- () Drawings dated: 3/21.
- () 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: Della Lork
(Appellant)

DATED: 8/11/22

SIGNATURE: ABee
(If more than one Appellant)

DATED: 8/11/22

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.**

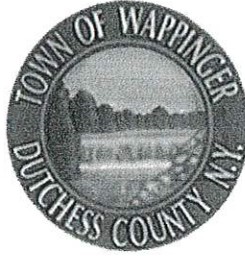
DATED: _____

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: 22-7762 Date: 8/11/22
Grid No.: 135689-6056-03-469460-0000 Zoning District: R20

Location of Project:

1 Booth Blvd Wappingers Falls NY 12590

Name of Applicant:

Thomas DellaLorte / Angela Bettina 8456561637
Print name and phone number

Description of

Project: Install prebuilt 8x12 shed without electric in front /
rear yard, Legalize AC

I Tom DellaLorte, 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.

8/12/22
Date

8456561637
Owner's Telephone Number

DellaLorte Abeta
Owner's Signature

Thomas DellaLorte A. Bettina
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.

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.

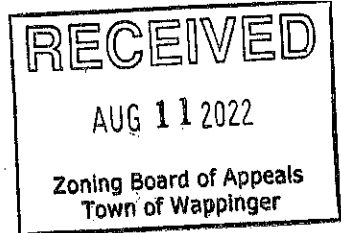
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project: Install 8x12 shed no electric in front/rear yard, legalize electric			
Project Location (describe, and attach a location map): 1 Booth Blvd Wappingers Falls, NY 12590			
Brief Description of Proposed Action: Install prebuilt electric on concrete slab on front yard @ rear/side on corner lot, legalize AC.			
Name of Applicant or Sponsor: Thomas DellaCorte		Telephone: 845 656 1637	
		E-Mail: tomdella corte55@gmail.com	
Address: 1 Booth Blvd.			
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?		NO	YES
If Yes, list agency(s) name and permit or approval:		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		.42 acres	
b. Total acreage to be physically disturbed?		8x12' acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.42 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			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input 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?	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?	<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?	<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?	<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	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: <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	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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:	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 CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>Thomas Della Lorti Alber</u> Date: <u>8/12/22</u>		
Signature: <u>Thomas Della Lorti</u> Title: <u>Applicants</u>		

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



To: Della Corte, Thomas
1 Booth Blvd

SBL: 6056-03-469460-0000
Date of this Notice: 08/11/2022

Zone:
Application: 42136

For property located at: 1 Booth Blvd

Your application to:

8 x12 pre-built shed , no electric legalize AC

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

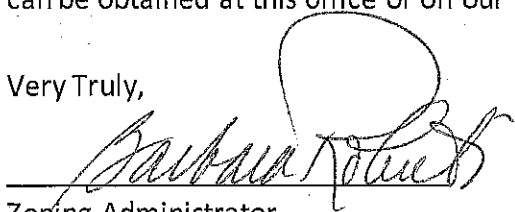
Where 75 feet is required to a county road, the applicant can provide 67 feet for a new 8' x 12' shed.

Where no accessory structure is permitted in a front yard, the applicant is looking to place the new 8' x 12' shed in a front yard.

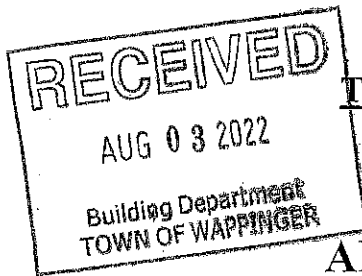
	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.
FRONT YARD:	<u>75</u> ft.	<u>67</u> ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.

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
☒ New Construction ☐ Commercial
☐ Renovation/Alteration ☐ Multiple Dwelling

ZONE: R20 DATE: 8/2/22
APPL #: 42136 PERMIT #
GRID: 6056-03-469460

APPLICANT NAME: Thomas DellaLorteADDRESS: 1 Booth Blvd WappingersTEL #: 845 831 9633 CELL: 845 656 1637 FAX #: E-MAIL: tomdellaorte55@gmail.comNAME OWNER OF BUILDING/LAND: Thomas DellaLorte / Angela Bettina*PROJECT SITE ADDRESS*: 1 Booth Blvd. WappingersMAILING ADDRESS: 1 Booth Blvd Wappingers Falls, NY 12590TEL #: 845 831 9633 CELL: 845 656 1637 FAX #: E-MAIL: tomdellaorte55@gmail.com**BUILDER/CONTRACTOR DOING WORK:**COMPANY NAME: Best in BackyardsADDRESS: 30 Commerce Dr. Carmel, NY 10512TEL #: 845 579 2543 CELL: FAX #: E-MAIL: AK@bestinbackyards.com**DESIGN PROFESSIONAL NAME:**

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

APPLICATION FOR: 8x12 Shed, A-frame, installed, no electric
on 8x12 concrete pad 4-6" thick, PRE-BUILTlegalize Air conditioner (specs included)

SETBACKS: FRONT: REAR: L-SIDEYARD: R-SIDEYARD:

SIZE OF STRUCTURE: 8x12ESTIMATED COST: \$5600 TYPE OF USE: Garden StorageNON-REFUNDABLE APPL. FEE: 150 PAID ON: 8-11-22 CHECK # 3904 RECEIPT #:BALANCE DUE: 250 PAID ON: 8-11-22 CHECK # 3904 RECEIPT #:**APPROVALS:**

ZONING ADMINISTRATOR:

☐ Approved ☒ Denied Date: 8-11-22Barbara EbertDella Lorte
Signature of Applicant

FIRE INSPECTOR:

☐ Approved ☐ Denied Date:

Signature of Building Inspector

TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date 8/2/22

Address: 1 Booth Blvd. Wapp. Fls, NY

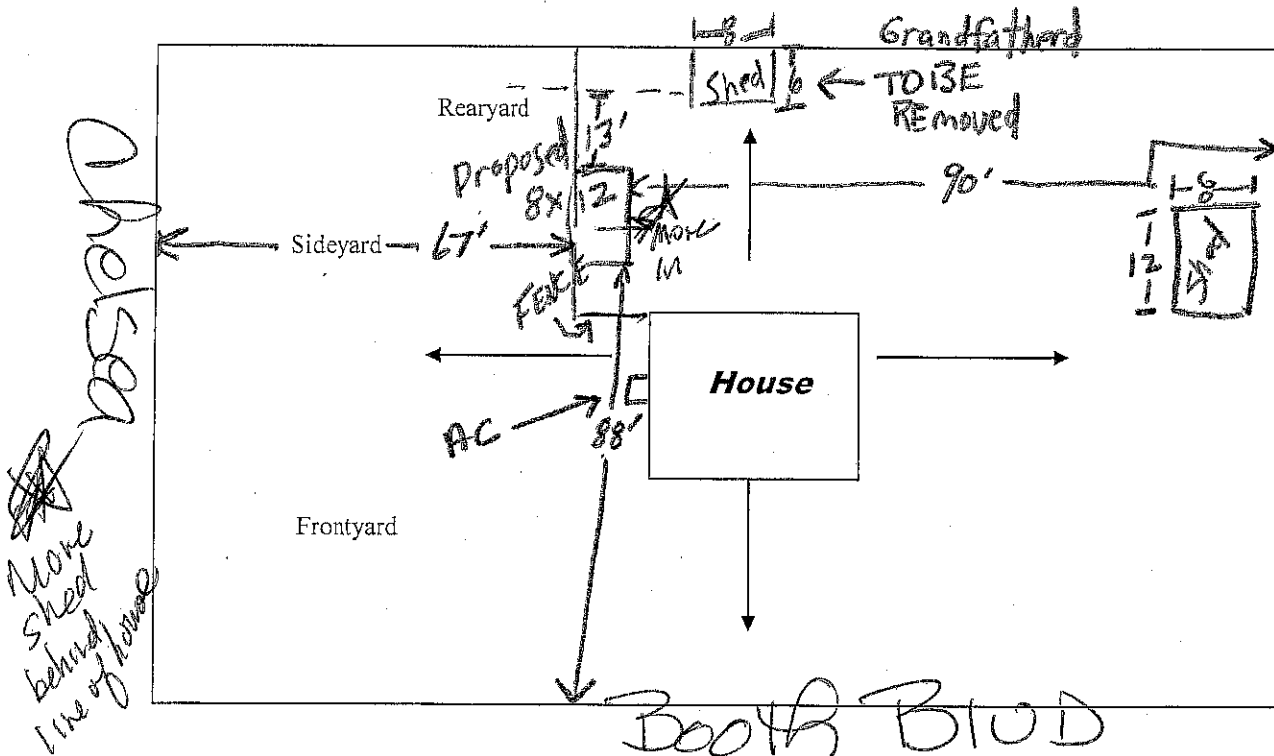
Interior (Corner Lot) circle one

Owner of Land T. Dellalorte / A. Bellina

Zone: R2D

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

1. House, 8x12 shed wooden, 8x6 shed wooden (to be removed)



Draw proposed structure on plot plan.

Indicate Location Setbacks to both sides and rear property line measurement of structure you are applying for.

Della Corte

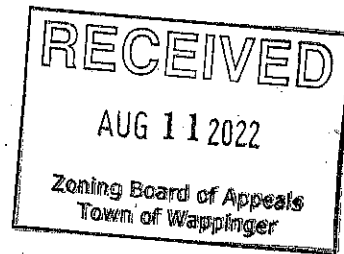
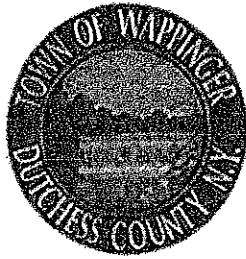
Signature

Approved: / ~~Rejected:~~

Date: 8.11.22

Zoning Administrator

TOWN OF WAPPINGER



PLANNING BOARD & ZONING BOARD OF APPEALS

20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
PH: 845-297-6256
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Application for an Area Variance

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Thomas Della Corte Angela Bettina

Address: 1 Booth Blvd Wappingers Falls, NY 12590

Phone Number: 8456561637

Owner Consent dated: 8/11/22

Signature: [Signature]

Print Name: Tom Della Corte A. Bettina

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(Indicate Article, Section, Subsection and Paragraph)

Required: 75' to a County Road

Applicant(s) can provide: 60'

Thus requesting: 8' Variance to County Road

To allow: 8' x 12' Shed

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: No accessory structure in front yard
 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):

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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.

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(Appellant)

DATED: 8/11/22

SIGNATURE: ABee
(If more than one Appellant)

DATED: 8/11/22

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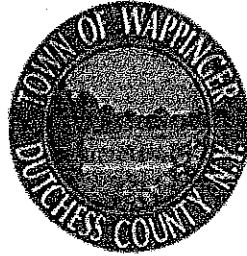
DATED: _____

ZONING BOARD OF APPEALS
TOWN OF WAPPINGER, NEW YORK

BY: _____
(Chairman)

PRINT: _____

TOWN OF WAPPINGER



PLANNING BOARD & ZONING BOARD OF APPEALS

20 MIDDLEBUSH ROAD
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PH: 845-297-6256
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Grid No.: 135689-6056-03-469460-0000 Zoning District: R20

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Name of Applicant: Thomas Dellalorte / Angela Bettina 8456561637
Print name and phone number

Description of Project: Install pre built 8x12 shed without electric in front /
rear yard, Legalize AC

I Tom Dellalorte, 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.

8/12/22
Date

8456561637
Owner's Telephone Number

Dellalorte Bettina
Owner's Signature

Thomas Dellalorte Angela Bettina
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.

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Name of Applicant or Sponsor: Thomas Dellacorte		Telephone: 845 6561637	
Address: 1 Booth Blvd.		E-Mail: tomdeillacorte55@gmail.com	
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?		NO	YES
If Yes, list agency(s) name and permit or approval:		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		.42 acres	
b. Total acreage to be physically disturbed?		8x12' acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		.42 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			

5. Is the proposed action,	NO	YES	N/A
a. A permitted use under the zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	<input 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?	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	
b. Are public transportation services available at or near the site of the proposed action?	<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?	<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?	<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	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ _____ _____	<input checked="" 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	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
a. Will storm water discharges flow to adjacent properties?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input checked="" type="checkbox"/>	<input type="checkbox"/>

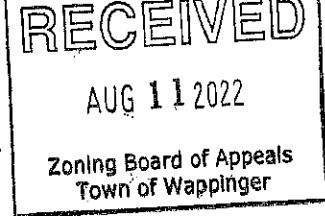
18. Does the proposed action include construction or other activities that would result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size of the impoundment:	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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 CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>Thomas Della Lorti Allen</u> Date: <u>8/12/22</u>		
Signature: <u>Della Lorti</u> <u>A. Allen</u> Title: <u>Applicants</u>		

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



To: Della Corte, Thomas
1 Booth Blvd

SBL: 6056-03-469460-0000
Date of this Notice: 08/11/2022
Zone:
Application: 42136

For property located at: 1 Booth Blvd

Your application to:

8 x12 pre-built shed , no electric legalize AC

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

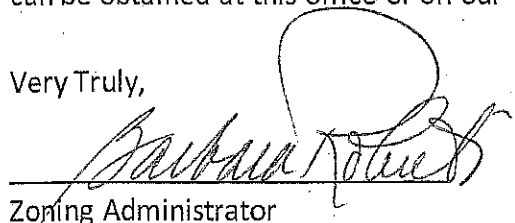
Where 75 feet is required to a county road, the applicant can provide 67 feet for a new 8' x 12' shed.

Where no accessory structure is permitted in a front yard, the applicant is looking to place the new 8' x 12' shed in a front yard.

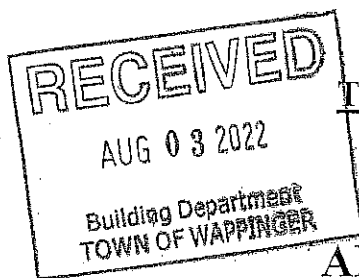
	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.
FRONT YARD:	<u>75</u> ft.	<u>67</u> ft.
SIDE YARD (LEFT):	_____ ft.	_____ ft.
SIDE YARD (RIGHT):	_____ ft.	_____ ft.

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
☒ New Construction ☐ Commercial
☐ Renovation/Alteration ☐ Multiple Dwelling

ZONE: R20 DATE: 8/2/22
APPL #: 42136 PERMIT #
GRID: 10056-03-469460

APPLICANT NAME: Thomas DellaLorte

ADDRESS: 1 Booth Blvd Wappingers

TEL #: 845 831 9633 CELL: 845 656 1637 FAX #: E-MAIL: tomdellacorte55@gmail.com

NAME OWNER OF BUILDING/LAND: Thomas DellaLorte / Angela Bettina

PROJECT SITE ADDRESS: 1 Booth Blvd Wappingers

MAILING ADDRESS: 1 Booth Blvd Wappingers Falls, NY 12590

TEL #: 845 831 9633 CELL: 845 656 1637 FAX #: E-MAIL: tomdellacorte55@gmail.com

BUILDER/CONTRACTOR DOING WORK:

COMPANY NAME: Best in Backyards

ADDRESS: 30 Commerce Dr. Carmel, NY 10512

TEL #: 845 579 2543 CELL: FAX #: E-MAIL: AK@bestinbackyards.com

DESIGN PROFESSIONAL NAME:

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

APPLICATION FOR: 8x12 Shed, A-Frame, installed, no electric
on 8x12 concrete pad 4-6" thick, PRE-BUILT

legalize Air conditioner (specs included)

SETBACKS: FRONT: REAR: L-SIDEYARD: R-SIDEYARD:

SIZE OF STRUCTURE: 8x12

ESTIMATED COST: \$5600 TYPE OF USE: Garden Storage

NON-REFUNDABLE APPL. FEE: 150 PAID ON: 8-11-22 CHECK # 3904 RECEIPT #:

BALANCE DUE: 250 PAID ON: 8-11-22 CHECK # 3904 RECEIPT #:

APPROVALS:

ZONING ADMINISTRATOR:

☐ Approved ☒ Denied Date: 8-11-22

Paula A. G. G. G.

Della Lorte
Signature of Applicant

FIRE INSPECTOR:

☐ Approved ☐ Denied Date:

Signature of Building Inspector

TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date 8/2/22

Address: 1 Booth Blvd. Wappinger, NY

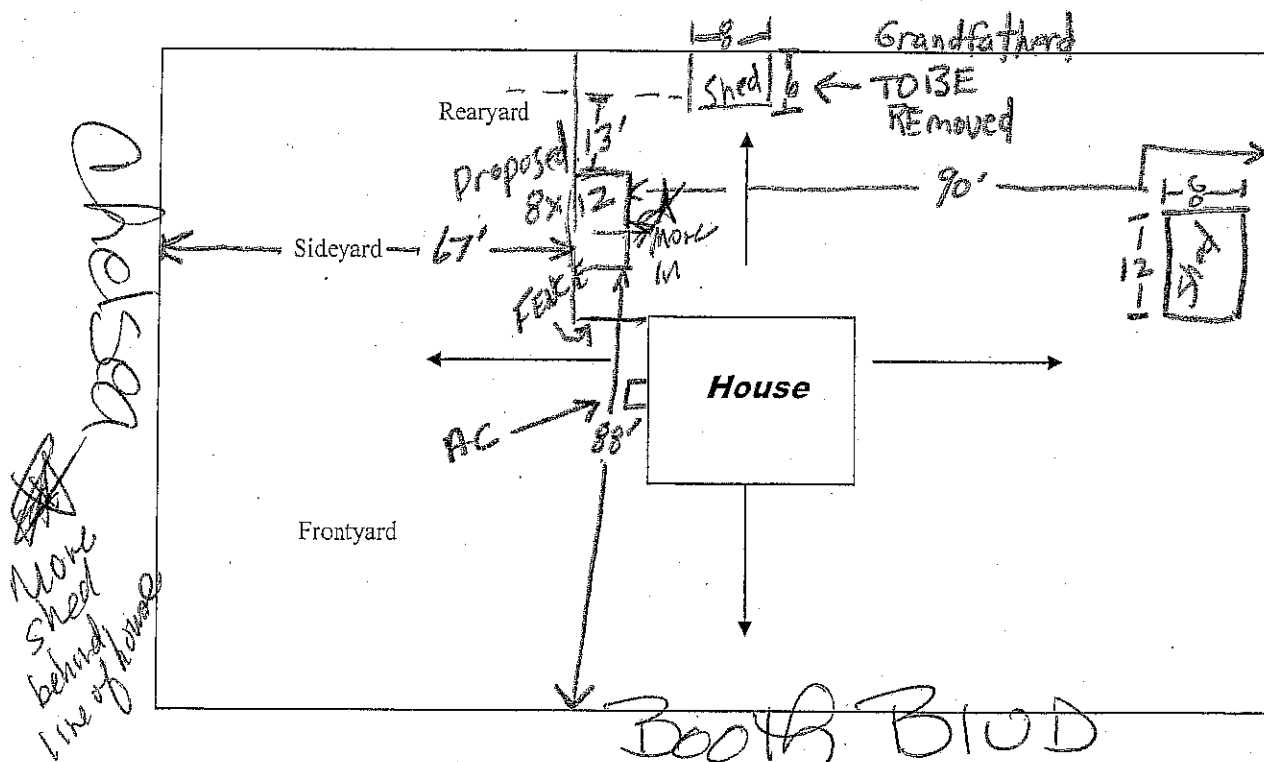
Interior/ Corner Lot circle one

Owner of Land T. Dellalorte / A. Paffina

Zone: R20

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

1. House, 8x12 shed wooden, 8x6 shed wooden (to be removed)



Draw proposed structure on plot plan.

Indicate Location Setbacks to both sides and rear property line measurement of structure you are applying for.

T. Dellalorte

Signature

Approved: / Rejected: _____

Zoning Administrator

Date: 8.11.22