

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.: 23-7802 Date: 8/24/2023

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

I (We), Saeed Bhatti residing at 367 Old Hopewell Rd
Wappingers Falls, NY, 12590, (phone) 845 243 4996, hereby,

appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 07/28/2023, and do hereby apply for an area variance(s).

Premises located at: 367 Old Hopewell Rd, Wappingers Falls, NY, 12590
Tax Grid No.: 6257-04-535380
Zoning District: R-40

1. Record Owner of Property:

SAEED BHATTI
Address: 367 Old Hopewell Rd, Wappingers Falls, NY, 12590
Phone Number: 845 243 4996
Owner Consent dated: 8/24/2023 Signature: Saeed Bhatti
Print Name: SAEED BHATTI

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: fences in front can have a maximum height of 4 feet
Applicant(s) can provide: would like to erect a 6 foot fence in the front yard
Thus requesting: a variance of 2 feet
To allow: for 6' fence

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.

this will not change the character of the neighborhood.

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.

We need the variance for excessive noise levels from the road. There is no other way to decrease the noise levels, other than a 6 ft fence.

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.

It is not a substantial change - the front fence restriction is to 4 ft tall. we want to build a 6 ft fence -

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.

The physical environment of neighborhood will not change as many properties already have a 6 ft front fence from before the rules were changed.

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

The road in front of the house, old Hopewell Rd, became a lot more congested over the years & the noise now is excessive causing us to put up a bit fence. It is not a self created difficulty.

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

In our community, our property is unique in that it faces a major county road, & thus causing excessive noise levels.

4. List of attachments (Check applicable information)

- Survey dated: 8/30/2006, Last revised 8/30/2006 and Prepared by: Bovall Engineering, LLC.
- Plot Plan dated: 7/26/2023.
- 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): Application 48387 denial letter

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: Sarah Blum
(Appellant)

DATED: 08/29/2023

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: 23-7802 Date: 8/24/2023
Grid No.: 6257-04-535380 Zoning District: R-40
Location of Project: 367 old Hopewell Road
Wappingers Falls, NY, 12590

Name of Applicant: DR. SAEED BHATTI - 845 243 4996
Print name and phone number

Description of Project: Place a 6ft fence on the front of the house, on old Hopewell Road.

I Saeed Bhatti, 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.

8/24/2023
Date

Saeed Bhatti
Owner's Signature

845 243 4996
Owner's Telephone Number

DR. SAEED BHATTI
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: Build a 6ft fence			
Project Location (describe, and attach a location map): 367 Old Hopewell Rd, Wappingers Falls, NY, 12590			
Brief Description of Proposed Action: Building a 6 foot fence on front of house on Old Hopewell Road			
Name of Applicant or Sponsor: SABED BHATTI		Telephone: 845-243-4986	
Address: 367 Old Hopewell Rd		E-Mail: mustaza.bhatti@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? 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 checked="" type="checkbox"/>	YES <input 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 checked="" type="checkbox"/>	YES <input type="checkbox"/>
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:			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input 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	YES	N/A
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?	NO	YES	N/A
	<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 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: _____	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"/>	
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"/>	

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 <i>N/A</i>		
<input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input 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 plan?	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,	NO <input checked="" type="checkbox"/>	YES <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"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
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 <input checked="" type="checkbox"/>	YES <input type="checkbox"/>
<hr/> <hr/>		
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor/name: <u>SAEED BIHATTI</u> Date: <u>8/24/2023</u>		
Signature: <u>Saeed Biatti</u> Title: <u>Owner</u>		

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

To: Bhatti, Saeed
367 Old Hopewell Rd

SBL: 6257-04-535380-0000
Date of this Notice: 07/28/2023

Zone:
Application: 43387

For property located at: 367 Old Hopewell Rd


Your application to:
FENCE - 6 FT. FRONT FENCE

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

No fencing is allowed to be higher than 4 feet 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:	_____ 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

RECEIVED
JUL 26 2023
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: R40 **DATE:** 7/27/2023
APPL #: 43387 **PERMIT #:** _____
GRID: 6257-04-535380

APPLICANT NAME: DR. SAIED BHATTI
ADDRESS: 367 Old Hopewell Rd
TEL #: 845 243 4996 **CELL:** Same **FAX #:** _____ **E-MAIL:** mustaza.bhatti@gmail.com

NAME OWNER OF BUILDING/LAND: _____
***PROJECT SITE ADDRESS*:** Same as above
MAILING ADDRESS: Same as above
TEL #: _____ **CELL:** _____ **FAX #:** _____ **E-MAIL:** _____

BUILDER/CONTRACTOR DOING WORK: None yet
COMPANY NAME: _____
ADDRESS: _____
TEL #: _____ **CELL:** _____ **FAX #:** _____ **E-MAIL:** _____

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

APPLICATION FOR: 6 foot front fence
due to excessive noise

SETBACKS: FRONT: _____ REAR: _____ L-SIDEYARD: _____ R-SIDEYARD: _____
SIZE OF STRUCTURE: _____
ESTIMATED COST: _____ **TYPE OF USE:** _____

NON-REFUNDABLE APPL. FEE: _____ **PAID ON:** _____ **CHECK #** _____ **RECEIPT #:** _____
BALANCE DUE: _____ **PAID ON:** _____ **CHECK #** _____ **RECEIPT #:** _____

APPROVALS:
ZONING ADMINISTRATOR:
 Approved Denied **Date:** 7/28/23
Barbara [Signature]
Saied Bhatti

Signature of Applicant

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

Signature of Building Inspector

TOWN OF WAPPINGER PLOT PLAN

Building Permit # _____

Date 7/26/2023

Address: 367 Old Hopewell Rd, Wappingers Falls
NY 12590

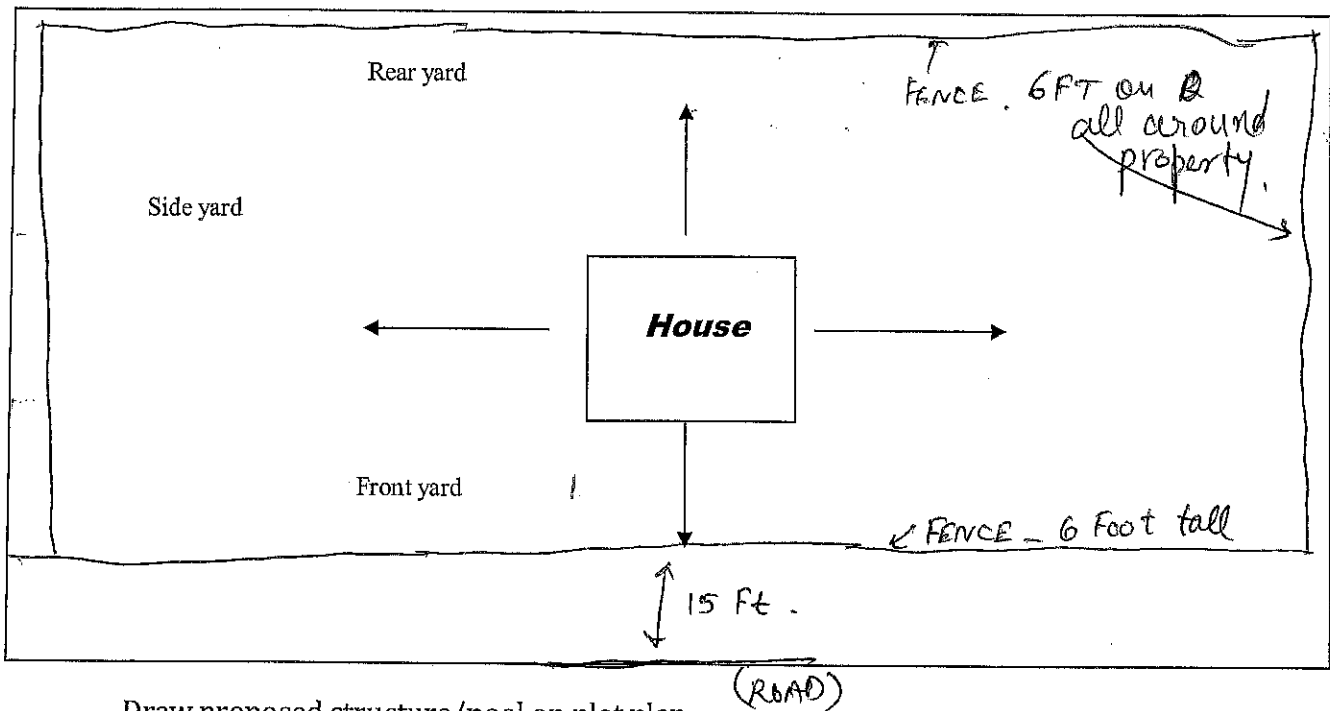
Interior/Corner Lot: circle one

Owner of Land SAEED BHATTI

Zone: R40

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

1. House



- Draw proposed structure/pool on plot plan
 - Indicate location with setbacks to both sides and rear property line
 - Show dimensions of structure/pool you are applying for
 - If property is corner lot, show both streets
 - Show utility, well and sewage systems (Call 811 before you dig - www.digsafelynewyork.com)
- **Most front yard property lines begin approximately 12 feet from the pavement****

Saeed Bhatti

Signature of Applicant

Approved:/Rejected: (circled)

Barbara Phibbs
Zoning Administrator

Date: 7/28/28