

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.: 24-7825

Date: 6-18-24

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

I (We), Maria Zavala residing at 112 Stonykill Road
Wappingers Falls, N.Y. 12590, (phone) 845-750-7354, hereby
appeal to the Zoning Board of Appeals from the decision/action of the Zoning Administrator,
dated 6-18-24, and do hereby apply for an area variance(s).

Premises located at: 112 Stonykill Road Wappingers Falls, N.Y. 12590
Tax Grid No.: 6056-02-873710
Zoning District: R-40

1. Record Owner of Property:

Maria Zavala
Address: 112 Stonykill Road
Phone Number: 845-750-7354
Owner Consent dated: 6-11-24

Signature: *Maria Zavala*
Print Name: X MARIA ZAVALA

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: - 50' to the front yard

Applicant(s) can provide: 26'

Thus requesting: 24'

To allow: for the construction of a New Single family home

Town of Wappinger Zoning Board of Appeals

Application for an Area Variance

Appeal No.: 24-7825

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.

240-37

(Indicate Article, Section, Subsection and Paragraph)

Required: 25' to the side yard (left)

Applicant(s) can provide: 12'

Thus requesting: 13'

To allow: for the construction of a new single family home

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 CHANGE ANTICIPATED WITH THE CONSTRUCTION OF THE NEW HOUSE IN THE CHARACTER OF THE NEIGHBORHOOD AS THE AREA IS ALL SINGLE FAMILY HOUSES

- 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.

THE LOT IS ONLY .30 ACRES IN A 1 ACRE ZONE AREA AND HAS A WIDTH OF APPROX. 75' AT THE AREA OF THE HOUSE, THEREBY LIMITING THE ABILITY TO PROVIDE THE REQUIRED 25' SETBACKS ON EACH SIDE

- 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.

NOT SUBSTANTIAL CONSIDERING THE LOT WIDTH AND SIZE RESTRAINTS BEING .30 ACRES IN A 1 ACRE ZONE

- 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.

WILL BE IMPACTED FOR THE BETTER WITH THE CONSTRUCTION OF A NEW HOUSE

Town of Wappinger Zoning Board of Appeals
Application for an Area Variance
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Variance No. 3

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: 25' to side yard (right)
Applicant(s) can provide: 18'
Thus requesting: 7'
To allow: for the construction of a new single family home

Variance No. 4

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: _____

Variance No. 5

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: _____

Variance No. 6

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: _____

Town of Wappinger Zoning Board of Appeals

Application for an Area Variance

Appeal No.: 24-7825

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

Please explain your answer in detail.

THE EXISTING HOUSE #15 IS IN POOR CONDITION AND IT IS NOT COST
EFFECTIVE TO BE RENOVATED AND BROUGHT UP TO CURRENT CMST.
STANDARDS.

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

THE SIZE OF THE LOT IS WHAT MAKES THE VARIANCES REQUIRED.

4. List of attachments (Check applicable information)

- () Survey dated: 2-15-24, Last revised 6-13-24 and
Prepared by: ROBERT V. OSWALD
- () Plot Plan dated: 6-13-24
- () Photos
- () Drawings dated: 6-11-24
- () Letter of Communication which resulted in application to the ZBA.
(e.g., recommendation from the Planning Board/Zoning Denial)
Letter from: Barbanti Dated: 6-18-24
- () 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: Mr. J. Smith
(Appellant)

DATED: 6-11-24

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: _____

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.

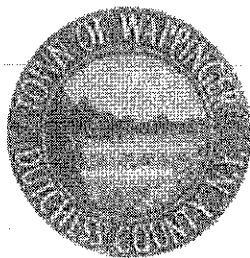
Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: Demolition of existing house and construction of new house			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action: Demolish existing structure and construct a new single family house			
Name of Applicant or Sponsor: Maria Zavala		Telephone: 845-750-7354	
		E-Mail: EDGARALONSO.ZAVALA@gmail.com	
Address: 112 SPRAYKILL ROAD			
City/PO: Wappingers Falls		State: N.Y.	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: Wappingers Building Department			<input type="checkbox"/> <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		1.30	acres
b. Total acreage to be physically disturbed?		1.10	acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		0	acres
4. Check all land uses that occur on, are adjoining or near the proposed action:			
<input type="checkbox"/> Urban <input checked="" 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 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?	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: <i>The new structure will meet or exceed the requirements of the New York State Energy Conservation Code.</i>	<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 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?	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 checked="" type="checkbox"/> Forest	<input type="checkbox"/> Agricultural/grasslands
<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?	NO	YES
If 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)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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)?	NO	YES
If Yes, explain the purpose and size of the impoundment:	<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?	NO	YES
If Yes, describe:	<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?	NO	YES
If Yes, describe:	<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>Bernardo Jancin Jr.</u> Date: <u>6-13-24</u>		
Signature: <u>[Signature]</u> Title: <u>Asst. B</u>		

TOWN OF WAPPINGER



PLANNING BOARD & ZONING BOARD OF APPEALS

20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
PH: 845-287-6256
Fax: 845-287-0579

Owner Consent Form

Project No: 24-7825 Date: 6-13-24
Grid No.: 6056-02-873710 Zoning District: R-40

Location of Project:

112 Stonykill Road Wappingers Falls, N.Y. 12590

Name of Applicant:

Maria Zavala - 845-750-7354
Print name and phone number

Description of

Project: Residential Property of .30 Acres situated in an
R-40 Zoning District

I, Maria Zavala, 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.

X 6-11-2024
Date

X 845-750-7354
Owner's Telephone Number

X Maria Zavala
Owner's Signature

X MARIA ZAVALA
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.

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

To: Zavala, Maria
112 Stonykill Rd

SBL: 6056-02-873710-0000
Date of this Notice: 06/18/2024
Zone:
Application: 44397

For property located at: 112 Stonykill Rd

Your application to:

NEW SINGLE FAMILY HOME ADDITIONAL DETAILS WILL BE SUPPLIED IF VARIANCES ARE APPROVED

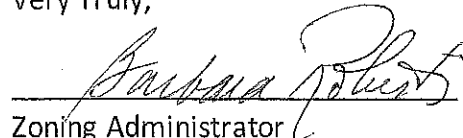
is denied for the following deficiency under Section **240-37** of the Zoning Laws of the Town of Wappinger.

Where 25 feet to the side property line is required, the applicant can provide 12 feet to the left property line.
Where 25 feet to the side property line is required, the applicant can provide 18 feet to the right property line.
Where 50 feet to the front property line is required, the applicant can provide 26 feet to the front property line.
Chicken Coop to be removed, as chickens are not permitted on less than 2 acres.
Rear shed is only .9 feet from rear property line.

	REQUIRED:	WHAT YOU CAN PROVIDE:
REAR YARD:	_____ ft.	_____ ft.
SIDE YARD (LEFT):	<u>25</u> ft.	<u>12</u> ft.
SIDE YARD (RIGHT):	<u>25</u> ft.	<u>18</u> ft.
FRONT YARD:	<u>50</u> ft.	<u>26</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

RECEIVED

JUN 13 2024

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: B40 DATE: 6/13/24
APPL #: 44397 PERMIT # _____
GRID: 6056-02-873710

APPLICANT NAME: Maria Zavala

ADDRESS: 112 STONYKILL Road

TEL #: 2 - CELL: 845-750-7354 FAX #: - E-MAIL: EPGARALONSO.ZAVALA@gmail.com

NAME OWNER OF BUILDING/LAND: Maria Zavala

PROJECT SITE ADDRESS: 112 Stonykill Road

MAILING ADDRESS: Wappingers Falls N.Y. 12590

TEL #: - CELL: 845-750-7354 FAX #: - E-MAIL: EPGARALONSO.ZAVALA@gmail.com

BUILDER/CONTRACTOR DOING WORK:

COMPANY NAME: to be determined

ADDRESS: -

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

DESIGN PROFESSIONAL NAME: Lawrence Belluscio P.E.

TEL #: - CELL: 845-444-5034 FAX #: - E-MAIL: Reinuldo Jec@yahoo.com

APPLICATION FOR: Construction of New Single Family House

SETBACKS: FRONT: 21' REAR: 112' L-SIDEYARD: 12' R-SIDEYARD: 15'

SIZE OF STRUCTURE: 41'-0" x 26'-0"

ESTIMATED COST: 300,000 - TYPE OF USE: Single Family House

NON-REFUNDABLE APPL. FEE: 150 PAID ON: 6/13/24 CHECK # 0166 RECEIPT #: 2024-00921

BALANCE DUE: _____ PAID ON: _____ CHECK # _____ RECEIPT #: _____

APPROVALS:

ZONING ADMINISTRATOR:

☐ Approved ☒ Denied Date: 6-18-24

Barbara Roberts

Maria Zavala
Signature of Applicant

MARIA ZAVALA
Print Name or Company Name(if applicable)

FIRE INSPECTOR:

☐ Approved ☐ Denied Date: _____

Signature of Building Inspector