

AFFIDAVIT TO BE COMPLETED BY AGENT OF OWNER

State of NY

County of New York

MARCIA L. RENEKT being duly sworn, deposes and says:

1. That he/she is the agent named in the foregoing application for MARCIA RENEKT and that he/she has been duly authorized by the owner in fee to make such application and that the foregoing statements contained therein are true to the best of his/her knowledge and belief.
2. That he/she resides at 580 OAK SUMMIT ROAD in the County of DUTCHES and the State of NEW YORK.
3. That he/she is the OWNER of the within property as described in the foregoing application for Subdivision / Site Plan / Special Use Permit approval(s) and that the statements contained therein are true to the best of his/her knowledge and belief.
4. That he/she understands that the Town of Washington Planning Board intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury he/she declares that he/she has examined this affidavit and that it is true and correct.

Marcia Renekt
Agent/Owner

Agent/Owner

Appear before me Marcia L. Renekt

[Signature]
Notary Public

KAREN L. CARTER
No. 01540060773
Notary Public, State of New York
Qualified in New York
My Commission Expires 10/10/2023

State of New York
County of New York
Sworn to before me this
24th day of March, 2021

Applicant Name
Address

Email

Phone

APPLICATION TO BOARD OF APPEALS

Appeal No. _____
Date _____, 19 ____
TO THE ZONING BOARD OF APPEALS, Washington, New York.
I (we) Marcia Renert of 580 Oak Summit Rd.
(Name of Appellant) (Street and Number)

Washington, New York
(Municipality) (State) HEREBY APPEAL TO

THE ZONING BOARD OF APPEALS FROM THE DECISION OF THE BUILDING
INSPECTOR ON APPLICATION FOR BUILDING PERMIT NO. _____, DATED _____
19 ____ , WHEREBY THE BUILDING INSPECTOR DID

- () GRANT
() DENY

TO Marcia Renert
(Name of applicant for permit)

OF 580 Oak Summit Rd Washington NY
(Street and Number) (Municipality) (State)

- () A PERMIT FOR USE
() A PERMIT FOR OCCUPANCY
() A CERTIFICATE FOR CONTINUATION OF A NON-CONFORMING USE

1. LOCATION OF THE PROPERTY 580 Oak Summit Rd, RM-2
(Street and Number) (Use District on Zoning map)
2. PROVISION (S) OF THE ZONING ORDINANCE APPEALED, (Indicate the article, section subsection and paragraph of the Zoning Ordinance being appealed, by number. Do not quote the Ordinance.) _____

3. TYPE OF APPEAL. Appeal is made herewith for:

- () An interpretation of the Zoning Ordinance or Zoning Map
(X) A variance to the Zoning Ordinance

4. PREVIOUS APPEAL. A previous appeal () has
(X) has not been made with
respect to this decision of the Building Inspector or with respect to the property. Such
appeal (s) was (were) in the form of () a requested interpretation
() a request for a variance
and was (were) made in Appeal No. _____, dated _____, 19 ____.
Appeal No. _____, dated _____, 19 ____.
Appeal No. _____, dated _____, 19 ____.

Please download the appropriate State Environmental Assessment
form from the NYDEC website.

5. REASON FOR APPEAL. (Complete relevant blank. Use extra sheet if necessary.)

A. INTERPRETATION OF THE ZONING ORDINANCE IS REQUESTED because:

B. A VARIANCE TO THE ZONING ORDINANCE IS REQUESTED for these reasons:

(1) STRICT APPLICATION of the Ordinance would produce UNDUE HARDSHIP

because: The lot in question is a non-conforming lot
which cannot meet set-back requirements for
a pool.

(2) The hardship created is UNIQUE and is not shared by all properties alike in the immediate vicinity of this property and in this use district because:

The lot is irregular in shape not allowing it to
meet the set-back requirements.

(3) The variance would observe the spirit of the ordinance and would NOT CHANGE THE CHARACTER OF THE DISTRICT because:

There is plenty of room for the pool and is not
visible to any neighbors or from the road.

STATE OF NEW YORK)
COUNTY OF DUTCHESS) ss

Sworn to this 5 day of APRIL, 19 2021

[Signature] (Signature)

Marjorie A. Jones (Notary Public)

Applicant preferred contact number -----

Dutchess County Tax Grid Map Number -----

setback variance \$400.00 each additional setback \$125.00

MARJORIE A. JONES
NOTARY PUBLIC, State of New York
No. 01J06368524
Qualified in Dutchess County
Commission Expires December 18, 21

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			
Sponsor: Spencer S. Hall, Licensed Land Surveyor			
Name of Action or Project:			
Requesting a Variance for Sideline Setbacks for a new in the ground pool			
Project Location (describe, and attach a location map):			
580 Oak Summit Road, Millbrook, NY 12545			
Brief Description of Proposed Action:			
Would like to put an in the ground pool on the non-conforming lot.			
Name of Applicant or Sponsor:		Telephone: (845) 868-1262	
Sponsor: Spencer S. Hall, Licensed Land Surveyor		E-Mail: hallsurveying@optonline.net	
Address:			
6244 Route 82			
City/PO:		State:	Zip Code:
Stanfordville		NY	12581
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
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.			YES
2. Does the proposed action require a permit, approval or funding from any other government Agency?			NO
If Yes, list agency(s) name and permit or approval: Building Dept.			YES
3. a. Total acreage of the site of the proposed action?			0.46 acres
b. Total acreage to be physically disturbed?			0 acres
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?			0.46 acres
4. Check all land uses that occur on, are adjoining or near the proposed action:			
5. <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 checked="" 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 type="checkbox"/>	<input checked="" 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: _____ _____	<input checked="" type="checkbox"/>	<input 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 checked="" 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 type="checkbox"/>	<input checked="" 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: _____ _____ _____			

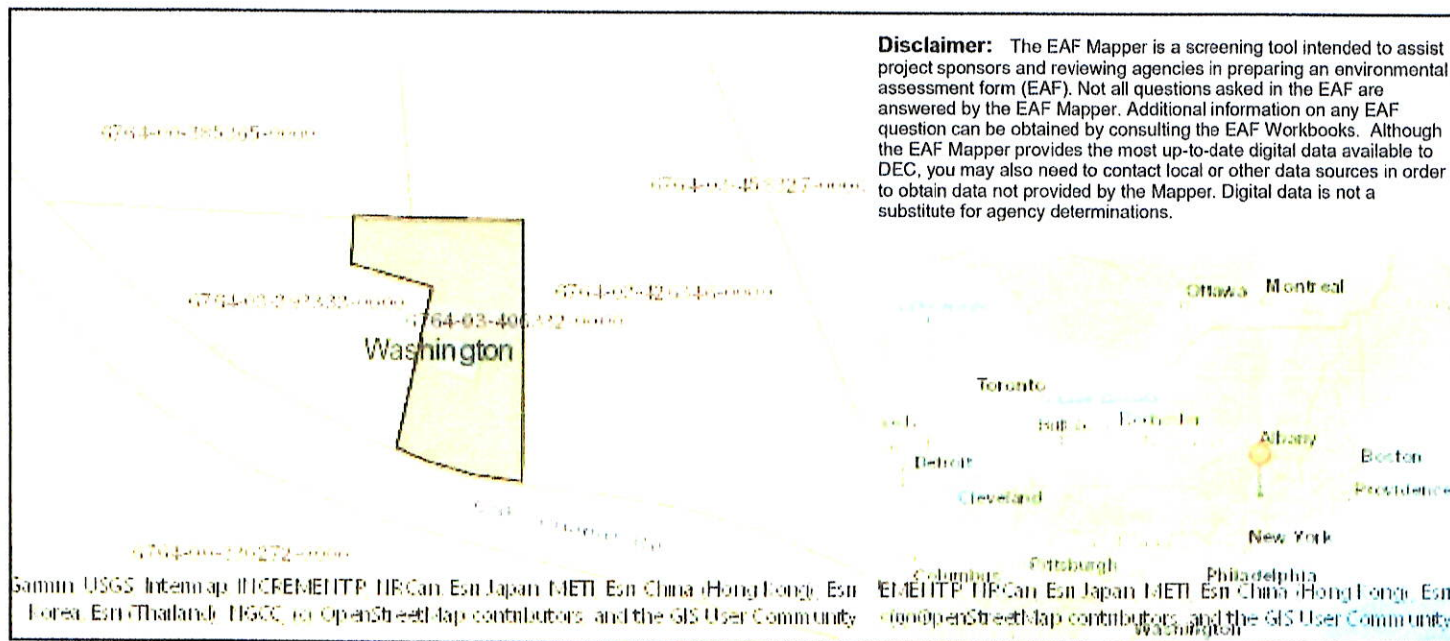
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input 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>Sponsor: Spencer S. Hall, Licensed Land Surveyor</u> Date: <u>3/22/2021</u>		
Signature: <u></u> Title: <u>Owner</u>		



Part 1 / Question 7 [Critical Environmental Area]	No
Part 1 / Question 12a [National or State Register of Historic Places or State Eligible Sites]	No
Part 1 / Question 12b [Archeological Sites]	Yes
Part 1 / Question 13a [Wetlands or Other Regulated Waterbodies]	Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook.
Part 1 / Question 15 [Threatened or Endangered Animal]	No
Part 1 / Question 16 [100 Year Flood Plain]	No
Part 1 / Question 20 [Remediation Site]	No