



Town of
Washington

RECEIVED
2-20-25

JB

10 Reservoir Dr, PO Box 667, Millbrook, NY 12545
845-677-3419

www.washingtonny.org

AREA VARIANCE APPLICATION FORM

APPLICATION TO THE TOWN OF WASHINGTON ZONING BOARD OF APPEALS FOR AN AREA VARIANCE

REAL PROPERTY INFORMATION

Dutchess County Tax Map Number (1234-00-123456-0000)	6663-00-845354-0000
Property Street Address	3515 Route 82 Millbrook, NY 12545
Number of Acres	4.89
Zoning District from Zoning Map	Residential / RL-5
Describe the Current Use of the Property.	Residential
Is this property located in or near a Wetland or Wetland Buffer?	_____ YES <input checked="" type="checkbox"/> _____ NO May Require a Town Wetlands Permit or be ruled by the Aquifer Protection Requirements
Is this property within 500 feet of the boundary of the Village of Millbrook?	_____ YES <input checked="" type="checkbox"/> _____ NO
Is this application being made for a violation that currently exists on the property?	_____ YES <input checked="" type="checkbox"/> _____ NO If YES, the application fee is double.

OWNER INFORMATION

Name of Record Owner(s): If a corporation, LLC, Trustee, so state and submit form	Sheri Lyn (Primeaux) Todd
Record Owner Mailing Address	3515 Route 82 Millbrook, NY 12545
Record Owner Email Address	sltodd7122@gmail.com
Record Owner Phone Number	845-275-8145

NOTE: In addition to the above, please complete the following information if the application is submitted and signed by a representative of the owner. (ie: LLC, Corporation, Trustee or applicant's attorney, agent, architect, builder, contract vendee, etc.)

Name of Authorized Representative if different from owner:	
Business Name of Applicant	
Applicant Mailing Address	
Applicant Email Address	
Applicant Phone Number	

Please check to specify who you wish correspondence to be e-mailed to, from the above names:

Applicant/Owner(s)
 Authorized Representative

SUMMARY OF AREA VARIANCE REQUEST

- Increasing footprint of existing structure
- Setback from State road

DESCRIPTION OF HARDSHIP

A Variance to the Zoning Ordinance is requested for the following five (5) reasons:

1. An undesirable change will not be produced in the CHARACTER of the neighbor or a detriment to nearby properties if granted, because:

see above

2. The benefit sought by the applicant CANNOT be achieved by some method feasible for the applicant to pursue, other than an area variance, because:

the addition creates a living space without stairs for my elderly parents

3. The amount of relief requested is not substantial because:

minor changes to current structure

4. The variance will NOT have an adverse effect or impact on the physical or environmental conditions in the neighborhood or district because:

minor changes to current structure

5. Has the alleged difficulty been self-created? Yes, or No Why:

my parents age has created the need for an addition

DESCRIPTION OF PROJECT

Please write N/A in any section which does not apply to your application.

For Demolition of Existing Building Areas

Please describe area being removed:

N/A

New Construction Areas (New Dwelling, New Additions, Pool):

Dimensions of first floor extension:

54 - 5 1/2 x 38

Dimensions of new second floor:

Dimensions of floor above second level:

Height (from finished ground to top of ridge): 18'

Is basement or lowest floor area being constructed? If yes, please provide height (above ground) measured from natural existing grade to first floor: 4'

Submit manufacturer specifications for pools, sheds, etc.

Proposed Alterations or Structural Changes Construction

Please describe building areas: adjacent to existing structure
Number of Floors and General Characteristics BEFORE Alterations:

2 story farmhouse

Number of Floors and Changes WITH Alterations:

Single story addition

Calculations of building areas and lot coverage:

Existing square footage of existing buildings on your property: $\sim 42' \times 36' \sim 1500 \text{ sq. ft.}$

Proposed increase of building coverage: 1,500 sq/ft

Square footage of your lot: 4.89 acres $\sim 217,000 \text{ sq. ft.}$

Percentage of coverage of your lot by building area: 10%

Purpose of New Construction

Living space for elderly parents

Please describe the land contours (flat, slope %, heavily wooded, marsh area, etc.) on your land and how it relates to the difficulty in meeting the code requirement (s):

mild slope
No effect

ADDITIONAL REQUIRED INFORMATION

Have any prior appeals been made with respect to this property?

_____ Yes _____ NO

Such appeal(s) was (were) in the form of

_____ A requested interpretation

_____ A request for a variance

Name of Owner:

Date

Was appeal granted or denied?

_____ Please
provide copies of previously granted appeals.

Are there any Covenants or Restrictions concerning this land?

_____ Yes _____ NO If yes, please furnish a copy

Are the subject premises listed for sale on the real estate market?

_____ Yes _____ No

Are there any proposals to change or alter land contours?

No _____ Yes please explain.

Are there any wetland areas or buffers on the parcel?

_____ Yes _____ NO

Are those wetland areas or buffers shown on the survey submitted with this application?

_____ Yes _____ NO

If your property contains ponds, wetlands or buffer areas, have you contacted the Building Department for its determination of jurisdiction?

_____ Yes _____ NO

Does your application require Town, County, State, or Federal Permits?

_____ Yes _____ NO If yes, provide which agency and the type of application.

Has an application been made to or granted by any other entity, and by which agency? Provide copies

NA

Are there any patios, structures, pools or fences that exist on your property that are not shown on the survey that you are submitting?

____ Yes ____ NO X

If yes, please provide a plot plan showing all improvements.

Do you have any construction taking place at this time concerning your premises?

____ Yes ____ NO X

Please submit a copy of your building permit and survey as approved by the Building Department

Describe the construction: _____

Do you or any co-owner also own other land adjoining or close to this parcel?

____ Yes ____ NO X If yes, please label the proximity of your lands on your survey.

Please list present use or operations conducted at this parcel residential - single and the proposed use residential - single. (i.e.: existing single family, proposed same with garage, pool or other)

NOTARIZED STATEMENT

By submitting this application, I hereby swear/affirm that this variance is the MINIMUM that is necessary and adequate, and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community.

I further swear/affirm that the information in this application is a truthful and honest representation of the property for which this request is made.

I further swear/affirm that I will make an appointment with the Zoning Administrator within five business days of this application to allow for an inspection of said property.

Sheri (Primeaux) Todd

Signature of Applicant or Authorized Agent
Agent must submit Owner Authorization Form

Sheri (Primeaux) Todd

Printed Name

Sworn to before me this 18th day of February, 2025.

Place Notary Stamp here:

Tracy L. Shaw

Signature of Notary
Tracy L. Shaw

NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01SH6440913
Qualified in Dutchess County
Commission Expires September 19, 2026



Town of Washington

TOWN OF WASHINGTON
BUILDING, PLANNING & ZONING
10 Reservoir Dr, PO Box 667
Millbrook, NY 12545
845-677-3419

Consent to Inspection

The undersigned, does hereby state:

Sheri Lyn (Primeaux) Todd and _____
Owner Name Owner Name

That the undersigned is/are the owner(s) of the premises in Town of Washington, located at
3515 Route 82 Millbrook, NY 12545

which is shown and designated on the Dutchess County Tax Map as:

6663 - 00 - 845354 - 0000

That the undersigned (has) (have) filed, or cause to be filed, an application with the Town of Washington for the following:

- Assessment Review
- Building Permit
- Municipal Search
- Planning Board Application
- Zoning Board of Appeals Application

That the undersigned do(es) hereby give consent to representatives of the Town of Washington, including but not limited to the Building Inspector, Zoning Administrator, or Assessor of the Town of Washington to enter upon the above described property, including any and all buildings located thereon, to conduct such inspections as they may deem necessary with respect to the aforesaid application, including inspections to determine that said premises comply with all of the laws, ordinances, rules, and regulations of the Town of Washington. The time and date of the inspection will be scheduled in advance with the property owner or their representative. **Failure to schedule an inspection will delay your project.**

That the undersigned, in consenting to such inspections, does so with the knowledge and understanding that any information obtained will be used in conjunction with the application, and may delay your application if violations of the laws, ordinances, rules or regulations of the Town of Washington have been identified, and that your assessment may be increased based upon information found in the site inspection.

Contact person for inspection: Sheri Todd

Phone Number to schedule inspection: 845-275-8145

Sheri (Primeaux) Todd
Signature

Signature

Sheri (Primeaux) Todd
Print Name

Print Name

Dated: 2/18/25

Dated: _____

AFFIDAVIT TO BE COMPLETED BY APPLICANT/OWNER

State of New York }
County of Dutchess } ss:

Sheri lyn Todd being duly sworn, deposes and says:

1. That he/she resides at 3515 Route 82 Millbrook in the County of Dutchess and the State of New York. That he/she is the Owner / Agent of 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.
2. That we hereby authorize NA, of NA, to act as our representative in all matters regarding the application that may come before the Town of Washington Planning Board.
3. That he/she has the legal right to make or authorize the making of said application.
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.

Sheri (Primeaux) Todd
Applicant/Owner

Applicant/Owner

Tracy L Shaw
Notary Public

Sworn to before me on the 18th
day of February, 2025.

Tracy L. Shaw
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01SH6440913
Qualified in Dutchess County
Commission Expires September 19, 2026



Washington

TOWN OF WASHINGTON
BUILDING DEPARTMENT
10 Reservoir Dr, PO Box 667
Millbrook, NY 12545
845-677-3419

PLEASE NOTE: If ownership is held by a corporation, LLC, jointly or in partnership, each owner and/or partner must sign a separate owner's endorsement. If the owner or owners are making the application, this endorsement is not required.

OWNER'S ENDORSEMENT

STATE OF NEW YORK
COUNTY OF Dutchess ss:

Sherilyn(Primeaux)Todd, being duly sworn, deposes and says:

- I am: (check one)
- 1. the sole owner in fee (One individual on the tax roll)
 - 2. a part owner in fee (Two or more individuals on the tax roll)
 - 3. an officer of the corporation which is the owner in fee of the premises described in the foregoing application.
 - 4. designated party authorized to act pursuant to a trust or legal document. (Trustees listed on tax roll)
 - 5. member/owner(s) of Limited Liability Corporation (LLC).

(If you checked #3, #4 or #5, please provide proof of legatee (ie: Corporate Resolution, Surrogate Letter, Executor of the Will, Certified Letter of Testamentary, Letter of Administration, Attorney-Opinion Letter, Letter of Probate, Power of Attorney, etc.)

I reside at 3515 Route 82 Millbrook

City Millbrook State NY Zip 12545

I have authorized (name) N/A

(Company) _____
to make the foregoing application to the Town of Washington for approval as described herein for the property located at 3515 Route 82 Millbrook, NY 12545
property ID # 6663 - 00- 845354 - 0000.

Sherilyn(Primeaux)Todd
Signature

If owner is a corporation, please indicate name of corporation and title of the corporate officer whose signature appears above. Sworn to before me this

18th day of February, 2025
Notary Public Nancy L Shaw

Notary Stamp:

Tracy L. Shaw
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01SH6440913
Qualified in Dutchess County
Commission Expires September 19, 2026

617.20
Appendix B
Short Environmental Assessment Form

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 Applicant or Sponsor: <u>Sheri Todd</u>			
Name of Action or Project: <u>Addition</u>			
Project Location (describe, and attach a location map): <u>3515 Route 82 Millbrook, NY 12545</u>			
Brief Description of Proposed Action: <u>Increase footprint of existing structure</u>			
Name of Applicant or Sponsor: <u>Sheri Todd (Primeaux) AKA</u>		Telephone: <u>845-275-8145</u>	
Address: <u>3515 Route 82</u>		E-Mail: <u>shtodd7122@gmail.com</u>	
City/PO: <u>Millbrook</u>	State: <u>NY</u>	Zip Code: <u>12545</u>	
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 type="checkbox"/>	YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental 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?		<u>4.89</u> acres	
b. Total acreage to be physically disturbed?		<u>4.0</u> 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, adjoining and 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, 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?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) 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 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? 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 site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area?	NO	YES	
	<input 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: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input 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 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 plain?	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, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____ <input type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	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 AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: _____	Date: _____	
Signature: _____		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT



Dutchess County Clerk Recording Page

Record & Return To:

Date Recorded: 6/15/2022
Time Recorded: 11:53 AM

AMROCK, LLC
662 WOODWARD AVE

DETROIT, MI 48226

Document #: 02 2022 52167

Received From: AMROCK, LLC

Grantor: PRIMEAUX SHERI LYN
Grantee: PRIMEAUX SHERI LYN

Recorded In: Deed
Instrument Type:

Tax District: Washington

Examined and Charged As Follows :

Recording Charge: \$210.00
Transfer Tax Amount: \$0.00
Includes Mansion Tax: \$0.00
Transfer Tax Number: 7793

Number of Pages: 6

*** Do Not Detach This Page
*** This is Not A Bill

Red Hook Transfer Tax:

RP5217: Y
TP-584: Y

County Clerk By: Sim
Receipt #: 19281
Batch Record: 124

Printed Page 1 of 6



02202252167



Bradford Kendall
County Clerk












Dutchess County Clerk Recording Page

Record & Return To:

Date Recorded: 6/15/2022
Time Recorded: 11:53 AM

AMROCK, LLC
662 WOODWARD AVE

DETROIT, MI 48226

Document #: 02 2022 52167

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Number of Pages: 6

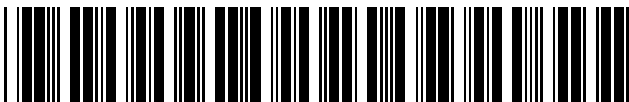
***** Do Not Detach This Page
*** This is Not A Bill**

Red Hook Transfer Tax:

RP5217: Y
TP-584: Y

County Clerk By: Sim
Receipt #: 19281
Batch Record: 124

Bradford Kendall
County Clerk



02202252167

Recording Requested By:
AMROCK LLC
662 Woodward Ave., Detroit, MI 48226

File Number: 72227284 •
0777915

After Recording Return To and Mail Tax Statements To:
Sheri Lyn Primeaux
3515 Route 82, Millbrook, NY 12545-6040

PROPERTY APPRAISAL (TAX/APN) PARCEL IDENTIFICATION NUMBER
6663-00-845354-0000

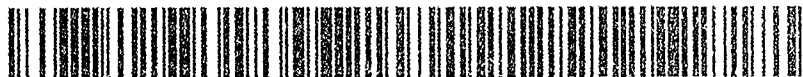
QUITCLAIM DEED

Exempt: Section 1405(b)(4): Conveyances of real property without consideration and otherwise than in connection with a sale, including conveyances conveying realty as bona fide gifts.

Sheri Lyn Primeaux and Brian W. Primeaux, husband and wife, whose mailing address is **3515 Route 82, Millbrook, NY 12545-6040**, hereinafter grantors, for \$0.00 (Zero Dollars and Zero Cents) in consideration paid, grant and quitclaim to **Sheri Lyn Primeaux**, a married woman, hereinafter grantee, whose tax mailing address is **3515 Route 82, Millbrook, NY 12545-6040**, with quitclaim covenants, all right, title, interest and claim to the following land in the following real property:

Tax Id Number(s): 6663-00-845354-0000

ALL THAT CERTAIN PLOT, PIECE OR PARCEL OF LAND WITH THE BUILDINGS AND IMPROVEMENTS THEREON ERECTED, SITUATE, LYING AND BEING IN



RPA 72227284 QC101 01 0105

THE TOWN OF WASHINGTON, COUNTY OF DUTCHESS, AND STATE OF NEW YORK, BOUNDED AND DESCRIBED AS FOLLOWS:

BEGINNING AT A WOOD FENCE POST FOUND ON THE WESTERLY ROADLINE OF N.Y.S. ROUTE 82, SAID FENCE POST MARKING THE SOUTHEAST CORNER OF THE HEREIN DESCRIBED PARCEL AND A SOUTHEASTERLY CORNER OF LANDS OF DOLLY LECHLEITNER REVOCABLE LIVING TRUST AS DESCRIBED IN LIBER 1899 OF DEEDS AT PAGE 157; THENCE LEAVING SAID ROADLINE AND ALONG SAID TRUST, IN PART AND ALONG THE LANDS OF BERNARD J. CONNOLLY AND FRANCES CONNOLLY AS DESCRIBED IN LIBER 1610 OF DEEDS AT PAGE 486, IN PART NORTH 76 DEGREES 29 MINUTES 00 SECONDS W 70.00 FEET TO THE BASE OF AN IRON ROD FOUND, NORTH 7 DEGREES 31 MINUTES 00 SECONDS EAST 437.86 FEET; THENCE ALONG AN OLD WIRE FENCE SOUTH 65 DEGREES 48 MINUTES 11 SECONDS E 72.67 FEET TO A 2" ROUND IRON BAR FOUND, NORTH 7 DEGREES 31 MINUTES 00 SECONDS EAST 390.95 FEET TO AN IRON ROD FOUND, SOUTH 82 DEGREES 13 MINUTES 11 SECONDS EAST 135.10 FEET TO AN IRON ROD FOUND, NORTH 89 DEGREES 00 MINUTES 09 SECONDS EAST 24.20 FEET TO AN IRON ROD FOUND, SOUTH 81 DEGREES 20 MINUTES 20 SECONDS EAST 85.92 FEET; THENCE ALONG THE REMAINS OF AN OLD STONE WALL SOUTH 84 DEGREES 41 MINUTES 01 SECONDS EAST 123.79 FEET AND SOUTH 80 DEGREES 57 MINUTES 20 SECONDS EAST 67.08 FEET TO THE WESTERLY HIGHWAY TAKING LINE OF SAID N.Y.S. ROUTE 82; THENCE ALONG THE SAME S 35 DEGREES 08 MINUTES 53 SECONDS W 201.77 FEET; THENCE ALONG THE WESTERLY ROADLINE OF SAID N.Y.S. ROUTE 82 SOUTH 46 DEGREES 45 MINUTES 17 SECONDS WEST 74.33 FEET, SOUTH 33 DEGREES 49 MINUTES 38 SECONDS WEST 35.90 FEET, SOUTH 21 DEGREES 28 MINUTES 38 SECONDS WEST 88.24 FEET, SOUTH 33 DEGREES 57 MINUTES 35 SECONDS WEST 335.08 FEET AND SOUTH 40 DEGREES 50 MINUTES 10 SECONDS WEST 197.84 FEET TO THE POINT OR PLACE OF BEGINNING. (CONTAINING 4.89 ACRES OF LAND.)

Commonly known as: 3515 Route 82, Millbrook, NY 12545-6040

Prior instrument reference: Official Records Book 2012, Page 167

Seller makes no representations or warranties, of any kind or nature whatsoever, other than those set out above, whether expressed, implied, implied by law, or otherwise, concerning the condition of the title of the property prior to the date the seller acquired title.

The real property described above is conveyed subject to and with the benefit of: All easements, covenants, conditions and restrictions of record; in so far as in force applicable.

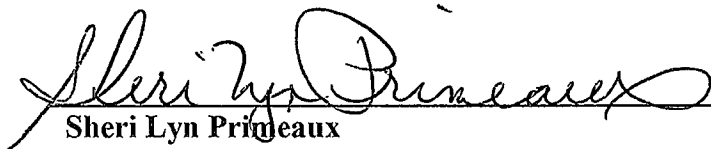


RPA 72227284 QC-101 01 0205

The real property described above is conveyed subject to the following: All easements, covenants, conditions and restrictions of record; All legal highways; Zoning, building and other laws, ordinances and regulations; Real estate taxes and assessments not yet due and payable; Rights of tenants in possession.

TO HAVE AND TO HOLD the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title interest, lien equity and claim whatsoever of the said grantors, either in law or equity, to the only proper use, benefit and behalf of the grantee forever.

Executed by the undersigned on April 29, 2022:



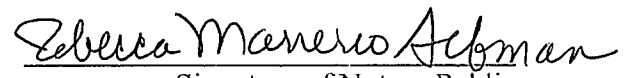
Sheri Lyn Primeaux

Acknowledgment for use within New York State Only:

STATE OF NEW YORK,
COUNTY OF Dutchess } SS.:

On the 29th day of April in the year 2022, before me, the undersigned, personally appeared **Sheri Lyn Primeaux**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person on behalf of which the individual(s) acted, executed the instrument.

REBECCA MARRERO GEBMAN
NOTARY PUBLIC-STATE OF NEW YORK
No. 02GE6415282
Qualified in Dutchess County
My Commission Expires 03-15-2025



Signature of Notary Public

Rebecca Marrero Gebman
Printed Name of Notary

My commission expires:

03/15/2025



RPA 72227284 QC101 01 0305

Executed by the undersigned on 4-18, 20 22

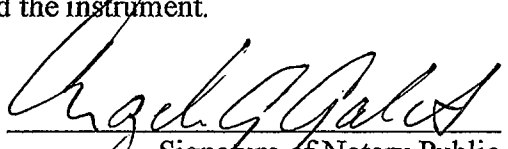


Brian W. Primeaux

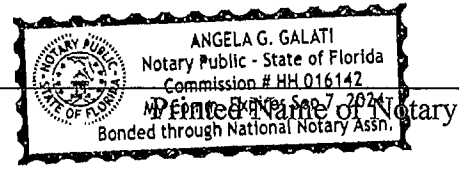
Acknowledgment for use within New York State Only:

STATE OF ~~NEW YORK~~, Florida
COUNTY OF Volusia } SS.:

On the 18 day of April in the year 20 22 before me, the undersigned, personally appeared **Brian W. Primeaux**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person on behalf of which the individual(s) acted, executed the instrument.



Signature of Notary Public



My commission expires:
9-7-2024

Angela G. Galati
Notary Public- State of Florida
Commission #HH016142
My commission expires Sep. 7 2024
Bonded through National Notary Assn.

This instrument prepared by: Ross M. Rosenberg, Esq., Rosenberg LPA LLC, Attorneys At Law, 101 South Reid Street, Suite 307, Sioux Falls, South Dakota 57103. (513) 247-9605.



RPA 72227284 QC-101 01 0505

EXHIBIT A - LEGAL DESCRIPTION

Tax Id Number(s): 6663-00-845354-0000

ALL THAT CERTAIN PLOT, PIECE OR PARCEL OF LAND WITH THE BUILDINGS AND IMPROVEMENTS THEREON ERECTED, SITUATE, LYING AND BEING IN THE TOWN OF WASHINGTON, COUNTY OF DUTCHESS, AND STATE OF NEW YORK, BOUNDED AND DESCRIBED AS FOLLOWS:

BEGINNING AT A WOOD FENCE POST FOUND ON THE WESTERLY ROADLINE OF N.Y.S. ROUTE 82, SAID FENCE POST MARKING THE SOUTHEAST CORNER OF THE HEREIN DESCRIBED PARCEL AND A SOUTHEASTERLY CORNER OF LANDS OF DOLLY LECHLEITNER REVOCABLE LIVING TRUST AS DESCRIBED IN LIBER 1899 OF DEEDS AT PAGE 157; THENCE LEAVING SAID ROADLINE AND ALONG SAID TRUST, IN PART AND ALONG THE LANDS OF BERNARD J. CONNOLLY AND FRANCES CONNOLLY AS DESCRIBED IN LIBER 1610 OF DEEDS AT PAGE 486, IN PART NORTH 76 DEGREES 29 MINUTES 00 SECONDS W 70.00 FEET TO THE BASE OF AN IRON ROD FOUND, NORTH 7 DEGREES 31 MINUTES 00 SECONDS EAST 437.86 FEET; THENCE ALONG AN OLD WIRE FENCE SOUTH 65 DEGREES 48 MINUTES 11 SECONDS E 72.67 FEET TO A 2" ROUND IRON BAR FOUND, NORTH 7 DEGREES 31 MINUTES 00 SECONDS EAST 390.95 FEET TO AN IRON ROD FOUND, SOUTH 82 DEGREES 13 MINUTES 11 SECONDS EAST 135.10 FEET TO AN IRON ROD FOUND, NORTH 89 DEGREES 00 MINUTES 09 SECONDS EAST 24.20 FEET TO AN IRON ROD FOUND, SOUTH 81 DEGREES 20 MINUTES 20 SECONDS EAST 85.92 FEET; THENCE ALONG THE REMAINS OF AN OLD STONE WALL SOUTH 84 DEGREES 41 MINUTES 01 SECONDS EAST 123.79 FEET AND SOUTH 80 DEGREES 57 MINUTES 20 SECONDS EAST 67.08 FEET TO THE WESTERLY HIGHWAY TAKING LINE OF SAID N.Y.S. ROUTE 82; THENCE ALONG THE SAME S 35 DEGREES 08 MINUTES 53 SECONDS W 201.77 FEET; THENCE ALONG THE WESTERLY ROADLINE OF SAID N.Y.S. ROUTE 82 SOUTH 46 DEGREES 45 MINUTES 17 SECONDS WEST 74.33 FEET, SOUTH 33 DEGREES 49 MINUTES 38 SECONDS WEST 35.90 FEET, SOUTH 21 DEGREES 28 MINUTES 38 SECONDS WEST 88.24 FEET, SOUTH 33 DEGREES 57 MINUTES 35 SECONDS WEST 335.08 FEET AND SOUTH 40 DEGREES 50 MINUTES 10 SECONDS WEST 197.84 FEET TO THE POINT OR PLACE OF BEGINNING. (CONTAINING 4.89 ACRES OF LAND.)

NOTE: The Company is prohibited from insuring the area or quantity of the land. The Company does not represent that any acreage or footage calculations are correct. References to quantity are for identification purposes only.

Commonly known as: 3515 Route 82, Millbrook, NY 12545-6040

THE PROPERTY ADDRESS AND TAX PARCEL IDENTIFICATION NUMBER LISTED ARE PROVIDED SOLELY FOR INFORMATIONAL PURPOSES.



Town of Washington

Building Department
10 Reservoir Drive • P.O Box 667
Millbrook, NY 12545

(845) 677-3419 EXT 112 • buildinginspector@washingtontny.org

Application for Building Permit

This application must be completely filled out with ink and submitted to the Building Office at the Town of Washington Town Hall. To be submitted along with this application:

1. Two complete plans of the proposed construction, showing materials and equipment to be used, and the details of structural, mechanical, plumbing, electrical, and Energy Code Compliance, as applicable. The Building Inspector may require that these plans be stamped and signed by a New York State registered architect or engineer.
2. A plot plan showing the proposed construction in relation to the property line boundaries, existing structures, and wetlands, if applicable.
3. Owner's Authorization Form and Insurance information as required, see below.

Applicant: Name Sheri Todd (Primeaux)
 Address: 3515 Route 82 Millbrook, NY 12545 Phone: 845-275-8145
 Email: sltodd7122@gmail.com

Property Owner: Name: Sheri Todd (Primeaux)
 Address: 3515 Route 82 Millbrook, NY 12545 Phone: 845-275-8145

Signed and Notarized Owner's Authorization Form Attached **OR** Property Owner same as Applicant

Property: Address: 3515 Route 82 Millbrook, NY 12545
 Tax Grid ID Number: 135889-6663-00-845354 Zoning District: RL5

Is the proposed project located in a wetland or 100 year flood plain? No

Proposed Work: Setbacks from property line: Front 65.5, Rear 137, Side 1260, Side 2 _____

New Building Addition Alteration/Renovation Repair Installation(HVAC, etc) Demolition Retroactive C/O

Swimming Pool/Hot Tub Fireplace/Wood/Pellet Stove Roofing/Siding Deck Tent >400FT² Agricultural

Propane Tank Shed or Barn Solar Other (please specify) _____

Builder's Name: Reilly Homes Construction Corp Phone: 845-454-8685

Builder's Address: 262 Overlook Rd Poughkeepsie, NY 12603

Builder's Email: _____

Builders must provide proof of Workers Compensation Insurance (C105.2 or U26.3) and proof of Disability

Benefits Compensation (DB120.1) Homeowners or Sole Proprietors may provide CE-200 Certificate of Attestation of Exemption. Builder's Insurance Information attached Exemption Form Attached

Estimated Cost of Project: \$339,000 Description of Proposed Work (include square footage as applicable):

Addition to existing structure - 1,500 sq/ft

Please read, initial, and sign page 2.



Town of Washington

Application for Building Permit

I hereby certify that I have read, do understand, and will comply with the following: (Please read, initial each, then sign)

1. The work covered by this application may not be commenced before the issuance of a Building Permit. Work begun prior to the issuance of a Building Permit will be subject to an additional fee of 55%. ST
2. Building Permits shall be visibly displayed at the work site and remain visible until the project has been completed. ST
3. All work shall be performed in accordance with the construction documents submitted and accepted as part of the application. The Building Inspector shall be notified immediately in the event of changes occurring during construction. ST
4. A building permit becomes void if the work is not started within 180 days of issue. Building permits expire 1 year after issue, and may be renewed for up to (2) 6 month periods, renewal fee is 55% of the original fee. ST
5. The applicant agrees to comply with all applicable State and Town laws, ordinances and regulations. ST
6. Work shall remain accessible and exposed until inspected and accepted by the Building Inspector, and it is the responsibility of the applicant to schedule all required inspections. ST
7. No structure or improvement may be occupied or used in whole or in part for any purpose whatsoever until a Certificate of Occupancy or Certificate of Compliance has been issued. ST
8. The applicant does hereby give consent to representatives of the Town of Washington, including, but not limited to the Building Inspector, Zoning Administrator or Assessor to conduct such inspections as they deem necessary in relation to this building permit application, date and time of inspections to be scheduled in advance with the property owner or their representative. ST

Applicant: *Sherilyn Todd Prueger* Date: _____
SIGNATURE

Building Inspector: _____ Date: _____

FOR OFFICE USE ONLY: Permit Number: _____ Permit Fee: _____ Check Number: _____

Zoning Approval No Open Permits or Violations Insurance Plans and Site Plan Plan Review

Reason if Denied/Referred: _____

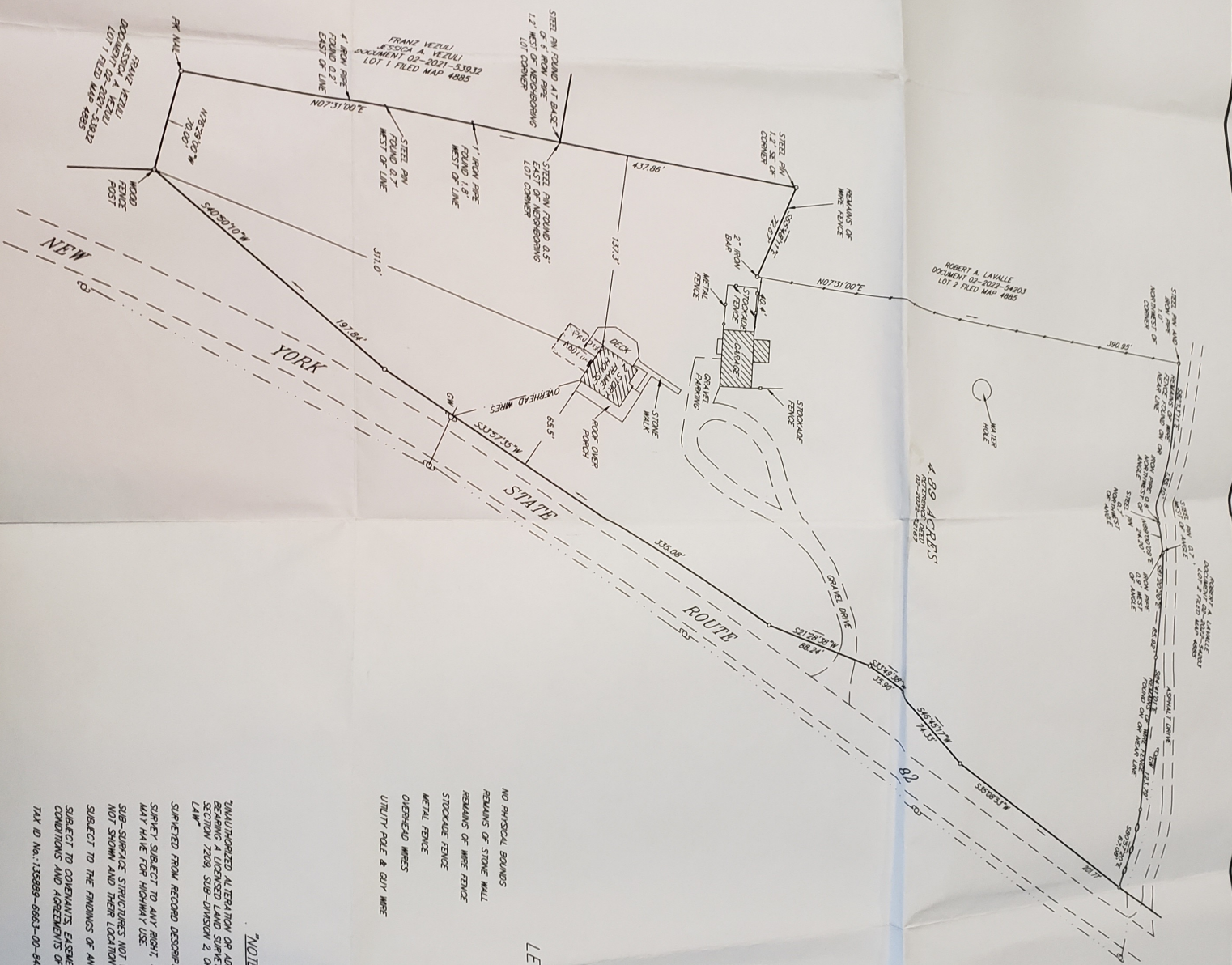
Type of Construction: **I II III IV V A B** Use and Occupancy Classification: _____

Assembly Occupant Load: _____ Automatic Sprinkler System: **Y N** Required: **Y N**

Bedrooms: _____ # Bathrooms: _____ # Kitchens: _____ Basement Type: _____ Finished: **Y N** Sq Ft: _____

Walls: _____ Siding: _____ Roof: _____ Finished Attic: **Y N**

Insulation: Ceiling _____ Walls: _____ Floor: _____ Slab: _____ Foundation: _____



NOTES:

UNAUTHORIZED ALTERATION OR ADDITION TO A SURVEY MAP BEARING A LICENSED LAND SURVEYOR'S SEAL IS A VIOLATION OF SECTION 7208, SUB-DIVISION 2, OF THE NEW YORK STATE EDUCATION LAW.

SURVEYED FROM RECORD DESCRIPTION AND AS IN POSSESSION.

SURVEY SUBJECT TO ANY RIGHT, TITLE OR INTEREST THE PUBLIC MAY HAVE FOR HIGHWAY USE.

SUB-SURFACE STRUCTURES NOT VISIBLE OR RECORDY APPARENT ARE NOT SHOWN AND THEIR LOCATION AND EXTENT ARE NOT CERTIFIED.

SUBJECT TO THE FINDINGS OF AN APPROPRIATE ABSTRACT OF TITLE SUBJECT TO COVENANTS, EASEMENTS, RESTRICTIONS, CONDITIONS AND AGREEMENTS OF RECORD.

TAX ID No.: 135888-6663-00-645394-00

