



Washington

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)	135889-6767-00-023111-0000
Property Street Address	816 STANFORD ROAD
Number of Acres	5.0
Zoning District from Zoning Map	RR10
Describe the Current Use of the Property.	RESIDENTIAL
Is this property located in or near a Wetland or Wetland Buffer?	<input type="checkbox"/> 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?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Is this application being made for a violation that currently exists on the property?	<input type="checkbox"/> 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	CAROL LYNN KRAMER, TRUSTEE
Record Owner Mailing Address	816 STANFORD RD CLINTON CORNERS 12514
Record Owner Email Address	LYKR@ICLOUD.COM
Record Owner Phone Number	845-677-4120

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:	DAVID LEWIS
Business Name of Applicant	
Applicant Mailing Address	LAGRANGEVILLE NY 12540 177 N SMITH ROAD
Applicant Email Address	DAVIDLEWIS755@GMAIL.COM
Applicant Phone Number	845-656-2549

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

TO BUILD 2 BAY DETACHED GARAGE

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:

ADJACENT PROPERTIES WILL NOT SEE GARAGE FROM THEIR HOMES

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:

CANNOT MEET SIDE SETBACK

The amount of relief requested is not substantial because:

ADJACENT PROPERTIES WILL NOT
HAVE THEIR VIEWS IMPAIRED

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

GARAGE WILL BE AN ATTRACTIVE
IMPROVEMENT IN LIKE KIND WITH
EXISTING HOUSE

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

CANNOT MEET SIDE SETBACKS

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:

576' SF DETACHED GARAGE

Dimensions of new second floor:

Dimensions of floor above second level: N/A

Height (from finished ground to top of ridge): 12'

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

Submit manufacturer specifications for pools, sheds, etc.

Proposed Alterations or Structural Changes Construction

Please describe building areas: DETACHED GARAGE

Number of Floors and General Characteristics **BEFORE** Alterations:

Number of Floors and Changes **WITH** Alterations: 1

Calculations of building areas and lot coverage:

Existing square footage of existing buildings on your property: 3448 SF

Proposed increase of building coverage: 576 SF

Square footage of your lot: 217800

Percentage of coverage of your lot by building area:

Purpose of New Construction
TO HOUSE TRACTOR AND
GARDENING EQUIPMENT

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):

ADDITIONAL REQUIRED INFORMATION

Have any prior appeals been made with respect to this property?
_____ Yes _____ NO X

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?
_____	_____	_____

provide copies of previously granted appeals. _____ Please

Are there any Covenants or Restrictions concerning this land?
_____ Yes X NO _____ If yes, please furnish a copy

Are the subject premises listed for sale on the real estate market?
_____ Yes _____ X No

Are there any proposals to change or alter land contours?
_____ No _____ X Yes please explain.

SLOPE GRADEN

Are there any wetland areas or buffers on the parcel?
_____ Yes _____ X NO _____

Are those wetland areas or buffers shown on the survey submitted with this application?
_____ Yes _____ X NO _____

If your property contains ponds, wetlands or buffer areas, have you contacted the Building Department for its determination of jurisdiction? N/A
_____ Yes _____ NO _____

Does your application require Town, County, State, or Federal Permits?
_____ Yes _____ X NO _____ If yes, provide which agency and the type of application.

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

N/A

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

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

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 If yes, please label the proximity of your lands on your survey.

Please list present use or operations conducted at this parcel SINGLE FAMILY HOME and the proposed use _____

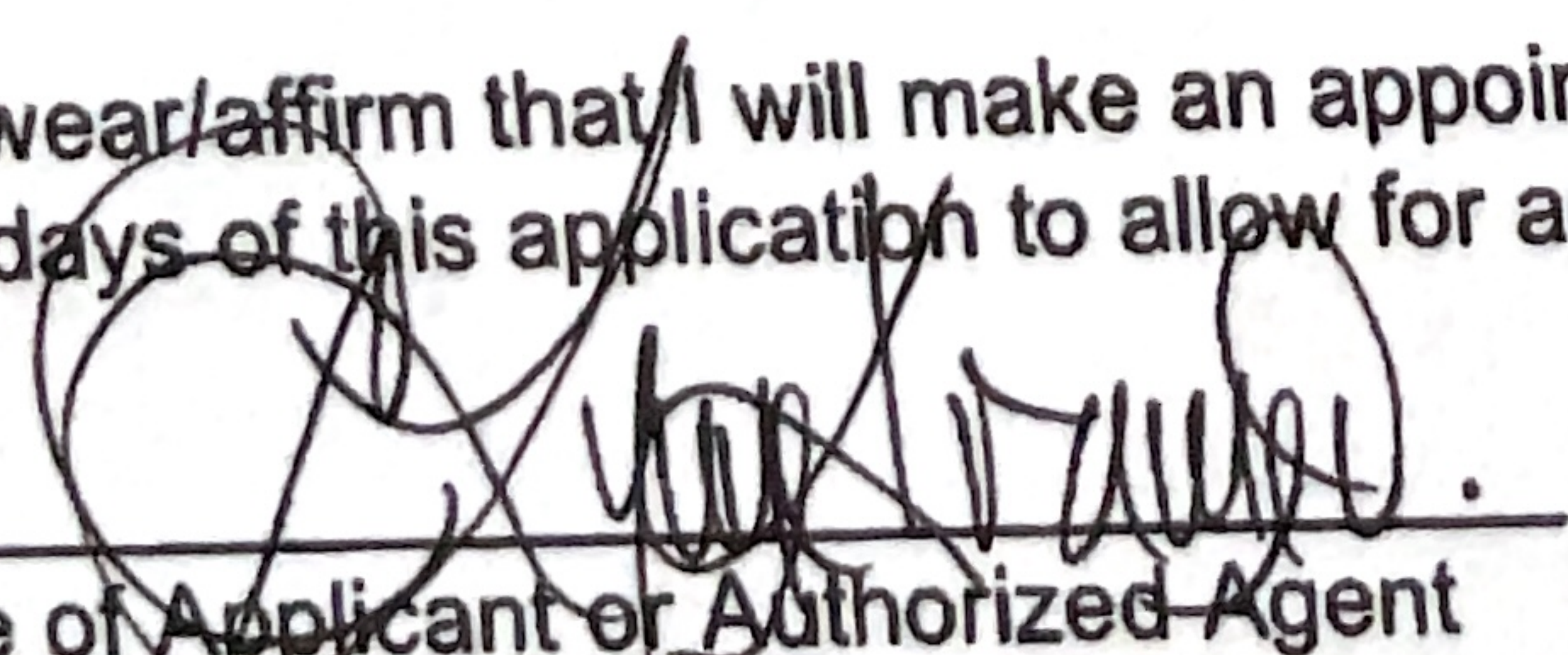
DETACHED GARAGE (i.e.: existing single family, proposed: same with garage, pool or other)

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.

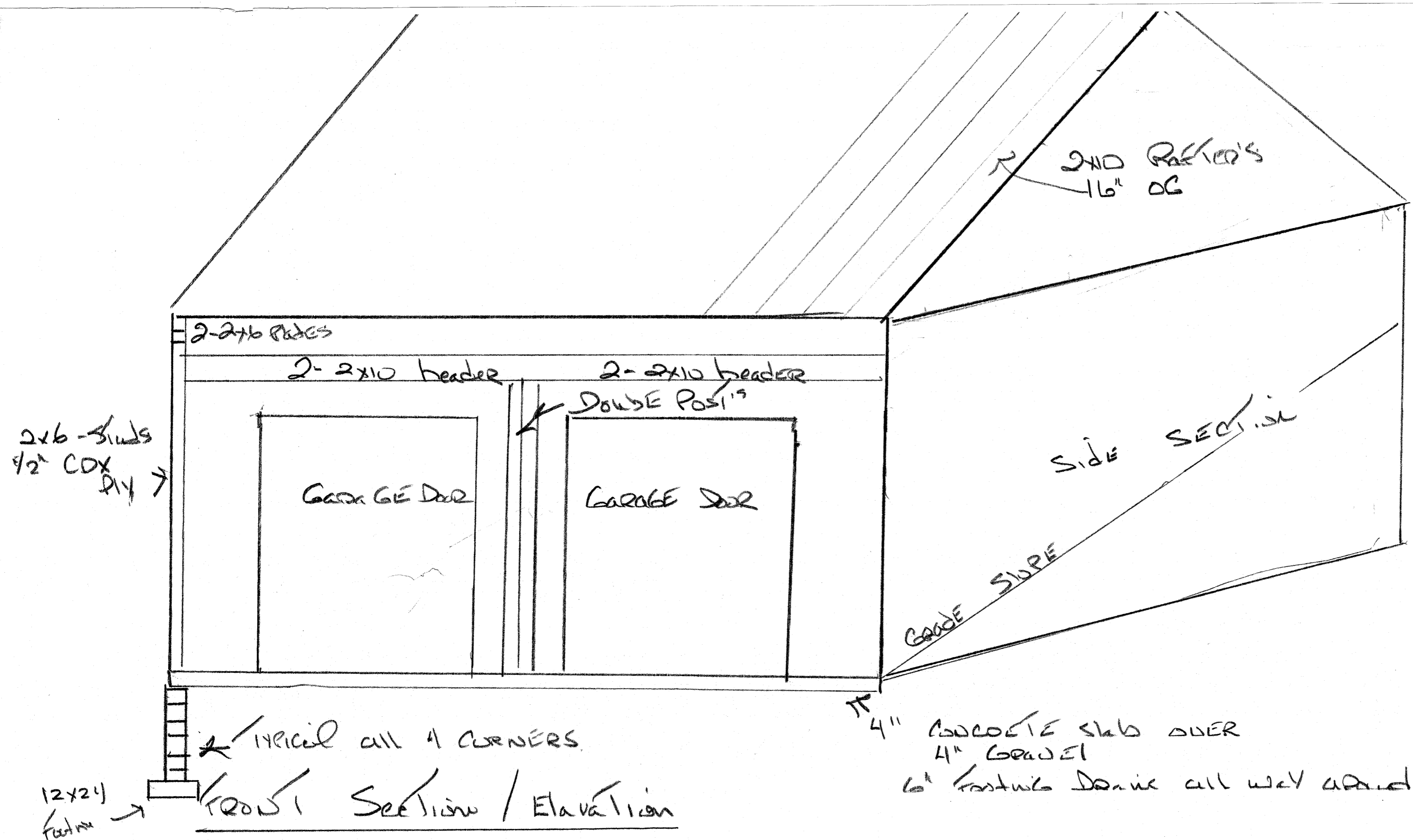


Signature of Applicant or Authorized Agent
Agent must submit Owner Authorization Form

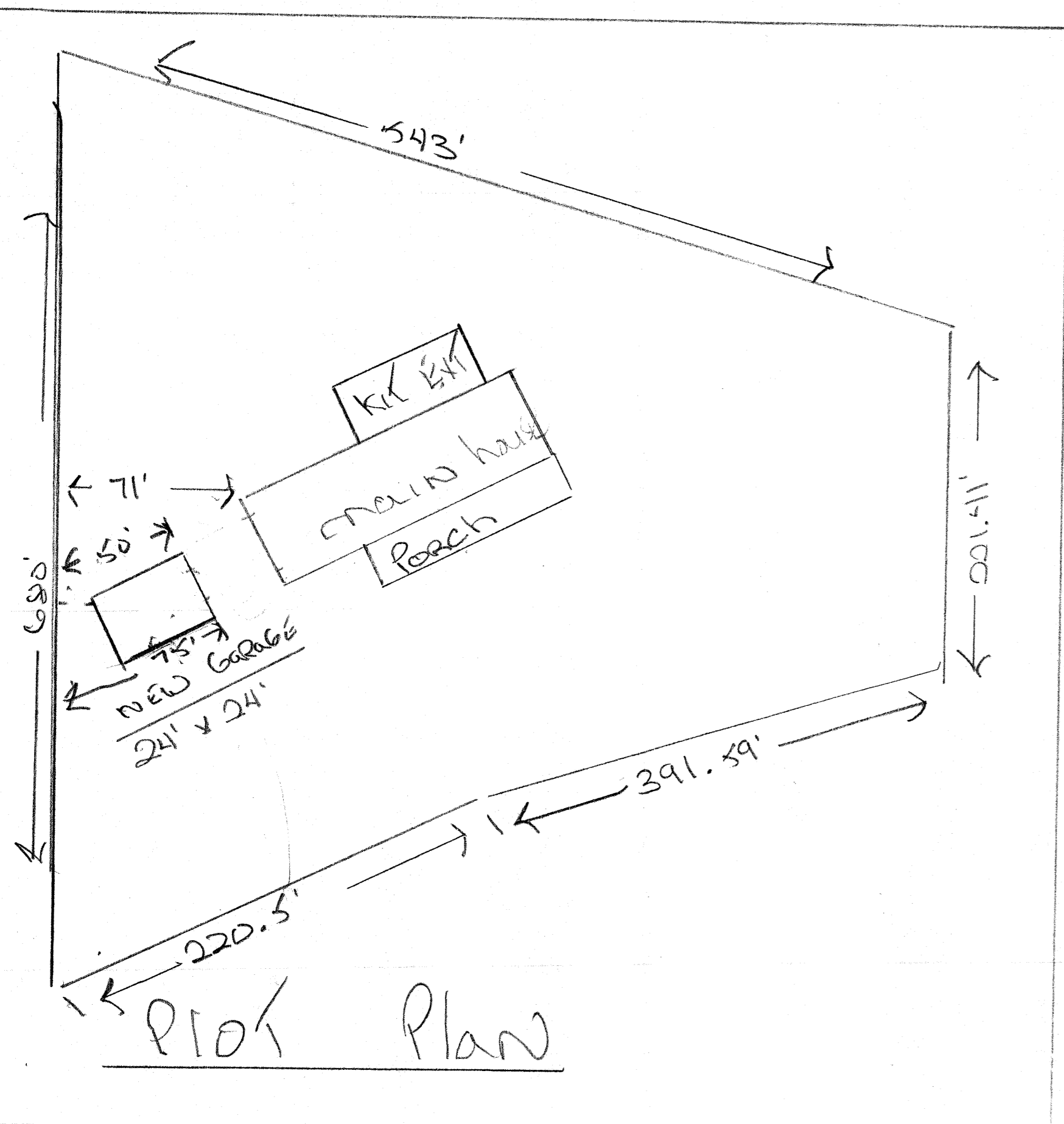
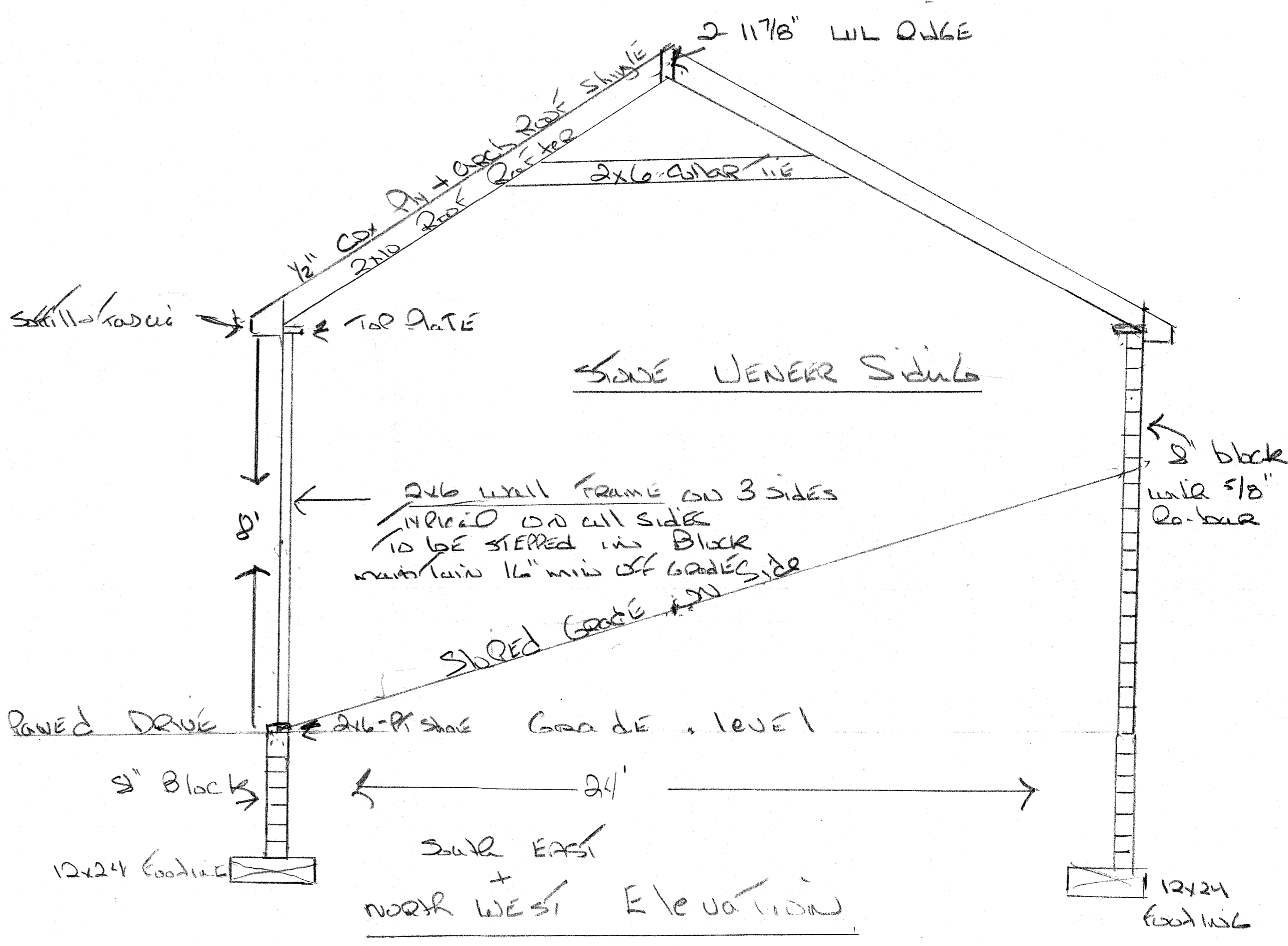
C. LYNN KRAMER
Printed Name

Sworn to before me this _____ day of _____, 20____.

Place Notary Stamp here:



12x24 footing
 12x24 footing
 TYPICAL all 4 CORNERS
 FRONT SECTION / ELEVATION



PROPOSED NEW GARAGE
 KRAMER RES
 #816 Standard Rd

