



# TOWN OF WAPPINGER

P.O. Box 324 ~ 20 MIDDLEBUSH ROAD  
WAPPINGERS FALLS, NY 12590

## Town Board

Office: 845.297.2744 ~ Fax: 845.297.4558

## Town Clerk

Office: 845.297.5771

[www.townofwappinger.us](http://www.townofwappinger.us)

## Application for a Change of Zone

**INTRODUCTION:** A request for rezoning requires review by various agencies. First, the Town Board is specifically required by law to conduct a detailed environmental analysis of your requested zone change. Second, your request must be referred to the Town of Wappinger Planning Board and various other Town Officials for their review. Your request may also require referral to the Dutchess County Planning Department. In order to minimize delays, and process your application as expeditiously as possible, we ask that you carefully fill out the attached application for a change of zone, and submit the required exhibits listed at the end of the application.

Note: THE APPLICATION AND EXHIBITS SHOULD BE SUBMITTED TO

### Town Clerk

1. RECORD OWNER: \_\_\_\_\_
2. OWNER'S ADDRESS: \_\_\_\_\_
3. OWNER'S TELEPHONE: (days) \_\_\_\_\_ (evenings) \_\_\_\_\_
4. APPLICANT'S ADDRESS: (If other than Owner): \_\_\_\_\_  
\_\_\_\_\_
5. APPLICANT'S ADDRESS: (If other than Owner): \_\_\_\_\_  
\_\_\_\_\_
6. APPLICANT'S TELEPHONE: (days) \_\_\_\_\_ (evenings) \_\_\_\_\_
7. PROPERTY ADDRESS (if different): \_\_\_\_\_  
\_\_\_\_\_
8. TAX MAP GRID NUMBER OF PROPERTY: \_\_\_\_\_
9. PRESENT ZONE OF PROPERTY: \_\_\_\_\_
10. REQUESTED ZONE OF PROPERTY: \_\_\_\_\_
11. TOTAL AREA OF PROPERTY: \_\_\_\_\_ square feet or \_\_\_\_\_ acres
12. DIMENSIONS OF PROPERTY: \_\_\_\_\_

13. LIST ANY ROAD FRONTAGES ON YOUR PROPERTY:  
\_\_\_\_\_ FOOT OF FRONTAGE ON \_\_\_\_\_ ROAD.  
\_\_\_\_\_ FOOT OF FRONTAGE ON \_\_\_\_\_ ROAD.

14. IS PROPERTY VACANT LAND? \_\_\_\_\_

15. IF NOT, IDENTIFY ANY STRUCTURES PRESENTLY ON THIS PROPERTY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. DESCRIBE THE PRESENT USE(S) OF THE PROPERTY: \_\_\_\_\_  
\_\_\_\_\_

17. IS PROPERTY NOW SUBJECT TO ANY RIGHTS-OF-WAY OR EASEMENT(S) IN FAVOR OF OTHER PROPERTIES? \_\_\_\_\_

18. IS THE PROPERTY PRESENTLY WITHIN A PUBLIC OR PRIVATE WATER DISTRICT? \_\_\_\_\_  
WHICH ONE? \_\_\_\_\_

19. IS PROPERTY PRESENTLY WITHIN A PUBLIC OR PRIVATE SEWER DISTRICT? \_\_\_\_\_  
WHICH ONE? \_\_\_\_\_

20. DESCRIBE THE PURPOSE OF YOUR REZONING REQUEST AND THE GENERAL NATURE OF DEVELOPMENT PLANS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

21. DESCRIBE PROPOSED SIZE OF ANY BUILDINGS TO BE CONSTRUCTED, E.G.:  
\_\_\_\_\_ RESIDENTIAL UNITS OF APPROX. \_\_\_\_\_ SQ. FT. EACH  
\_\_\_\_\_ SQ. FT. RETAIL SPACE  
\_\_\_\_\_ SQ. FT. OFFICE SPACE  
\_\_\_\_\_ SQ. FT. INDUSTRIAL SPACE

22. LIST OWNERS AND ADDRESSES OF ABUTTING PROPERTY AND EXISTING USES OF PROPERTY:  
NORTH OWNER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PROPERTY USE: \_\_\_\_\_  
EAST OWNER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PROPERTY USE: \_\_\_\_\_  
SOUTH OWNER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PROPERTY USE: \_\_\_\_\_  
WEST OWNER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PROPERTY USE: \_\_\_\_\_

23. IS THERE ANY STATE OR COUNTY OWNED PROPERTY WITHIN 500 FEET OF PROPERTY?

\_\_\_\_\_

24. DESCRIBE THE NATURE OF YOUR PROPERTY: \_\_\_\_\_

WHAT TYPES OF SOILS DOES YOUR PROPERTY CONTAIN? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DOES IT CONTAIN ANY PONDS? \_\_\_\_\_

DOES IT CONTAIN ANY STATE DESIGNATED WETLANDS OR ADJACENT AREAS? \_\_\_\_\_

DOES IT CONTAIN ANY FLOODWAY OR FLOODPLAIN LANDS? \_\_\_\_\_

DOES IT CONTAIN ANY SLOPES IN EXCESS OF 15%? \_\_\_\_\_

TO YOUR KNOWLEDGE, HAS THE PROPERTY EVER BEEN USED AS A WASTE SITE OR DUMP

\_\_\_\_\_ IF SO, WHEN? \_\_\_\_\_

NUMBER OF WELLS ON PROPERTY: \_\_\_\_\_

DEPTH OF WELLS ON PROPERTY: \_\_\_\_\_

NUMBER OF SEPTIC SYSTEMS ON PROPERTY: \_\_\_\_\_

HAVE ANY WELL TESTS INDICATED UNSATISFACTORY WATER QUALITY? \_\_\_\_\_

25. ANY ADDITIONAL COMMENTS OR INFORMATION YOU WOULD LIKE INCLUDED WITH  
YOUR APPLICATION? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**ATTACHMENTS**

THE FOLLOWING MUST BE SUBMITTED WITH YOUR WRITTEN APPLICATION:

1. PARTS I & II (AND PART III, IF APPLICABLE) OF THE LONG-FORM ENVIRONMENTAL ASSESSMENT FORM. NOTE THAT THE E.A.F. SHOULD CONCENTRATE ON THE BROAD IMPACTS OF THE REZONING AND NOT JUST ON THE SITE-SPECIFIC IMPACTS OF YOUR PROPOSED PROJECT.
  2. IF APPLICANT DIFFERENT FROM OWNER, A WRITTEN STATEMENT FROM OWNER, AUTHORIZING YOU TO MAKE THE APPLICATION SHOULD BE ATTACHED.
  3. MAP OR SKETCH SHOWING LOCATION OF YOUR PROPERTY AND THE SECTION(S) OF IT THAT YOU WISH TO HAVE REZONED.
  4. COPY OF OWNERS DEED.
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DATE OF SUBMISSION: \_\_\_\_\_

DATE RECEIVED BY TOWN CLERK: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Signature of Owner(s)*

\_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant(s)*