

Applicant Name Ann Meagher Email ann.meagher@gmail.com
Address 3 Daheim Rd, Millbrook, NY 12545
Phone 845-677-4850

APPLICATION TO BOARD OF APPEALS

Appeal No. _____
Date 08/02, 2021
TO THE ZONING BOARD OF APPEALS, Town of Washington, New York.
I (we) Ann Meagher of 3 Daheim Rd.
(Name of Appellant) (Street and Number)

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

THE ZONING BOARD OF APPEALS FROM THE DECISION OF THE BUILDING INSPECTOR ON APPLICATION FOR BUILDING PERMIT NO. 2774, DATED 10/6/2020 19 , WHEREBY THE BUILDING INSPECTOR DID

- GRANT
 DENY

TO Ann Meagher
(Name of applicant for permit)

OF 3 Daheim Rd. Town of 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 3 Daheim Rd. RS-10
(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 Do not quote the Ordinance.) Appeal for Interpretation - Section 3 of Solar Zoning Code

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

- An interpretation of the Zoning Ordinance or Zoning Map On the recommendation of the building inspector
 A variance to the Zoning Ordinance

4. PREVIOUS APPEAL. A previous appeal has

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 NYSDEC website.



Town of Washington

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

PLEASE NOTE: If ownership is held 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:

Ann Meagher, being duly sworn, deposes and says:

- I am: (check one)
- 1. the sole owner in fee
 - 2. a part owner in fee
 - 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.
 - 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 3 Daheim Rd.

City Millbrook State NY Zip 12545

I have authorized (name) Loralee Reidy - Residential Project Manager

(Company) SunCommon
to make the foregoing application to the Town of Washington for approval as described herein for the property located at 3 Daheim Rd. Millbrook, NY 12545
property ID # 6865 - 00 - 135738


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 11 day of Aug 2021
Notary Public Susan M. Marshall

Notary Stamp:

SUSAN M. MARSHALL
Notary Public, State of New York
Reg. No. 01MA6197676
Qualified in Dutchess County
My Commission Expires 12/01/2024

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			
Meagher Solar System			
Name of Action or Project: Appeal for Interpretation - Section 3 of Solar Zoning Code			
Project Location (describe, and attach a location map): 3 Daheim Rd, Millbrook, NY			
Brief Description of Proposed Action: Appeal for Interpretation - Section 3 of Solar Zoning Code			
Name of Applicant or Sponsor: Ann Meagher		Telephone: (845) 677-4850	
		E-Mail: ann.meagher@gmail.com	
Address: 3 Daheim Rd			
City/PO: Millbrook		State: NY	Zip Code: 12545
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 type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval: NSERDA & utility approved.			NO <input type="checkbox"/>
			YES <input checked="" type="checkbox"/>
3. a. Total acreage of the site of the proposed action?		4.7 acres	
b. Total acreage to be physically disturbed?		559 sq ft acres	
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?		4.7 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, 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?	NO	YES	N/A
	<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? 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? b. Are public transportation services available at or near the site of the proposed action? c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<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: <u>Solar electric system that generates clean energy.</u>	NO	YES	
	<input type="checkbox"/>	<input checked="" 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 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? 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?	NO	YES	
	<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 checked="" 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 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>Loralee Reidy</u> Date: <u>8/20/21</u> Signature: <u>Loralee Reidy</u> Title: <u>8/20/21</u>		

PRINT FORM