

Town Of Wallkill  
99 Tower Drive-Building A  
Middletown, NY 10940-2026

## ZONING BOARD OF APPEALS

### ZBA APPLICATION DIRECTIONS

Application must be completed with property owner signature or signed by property owner on record, application fee and all other requirements listed below must be completed before application can be submitted or processed by the ZBA.

#### Application submitted must include:

- 1) Complete application with all necessary information required, all signatures, notarized and all fee's included
- 2) 10 Hard copies and digital PDF Map of the property/project involved.  
Must be drawn to scale, you may bring PDF version of map on a CD or USB, it can also be emailed.
  - A) Show all building or project dimensions
  - B) All yard setbacks and dimensions of the lot
  - C) Section -Block - Lot number from latest tax map

#### ZBA Procedure:

- It is a two month procedure for a variance to be processed.
- The applicant or anyone concerning the project must attend both ZBA meetings.
- The Preliminary Review and the Public Hearing are scheduled every second Monday of the month at 7:30pm, at the Town of Wallkill 99 Tower Dr, Building A
- After preliminary review applicant must bring proof of mailing from post office of all labels mailed out to surrounding neighbors or properties.
- Final approval or denial of variance will be decided at the Public hearing by the Zoning Board members.

#### ***Preliminary Review:***

- Board will review applications with applicant.
- Board will present issues, concerns, or suggestions regarding the project
- If applicant or any one concerning the project is unable to attend for any reason. the review will be held at next meeting.

#### ***Public Hearing:***

- Public hearing is scheduled after applicant has attended the Preliminary review
- Applicant must mail out public notice with labels provided by the Assessors
- The public notice must be sent out 10 days prior to the public hearing date
- The labels will be provided by the Assessors Dept. a few days after the first meeting
- A fee is calculated for the labels by the Assessors Dept. based on the labels
- The assessors will contact the applicant once the labels are ready to be picked up
- Board will make final decision after hearing the public and discussing any final questions or concerns
- Variances expire after six months. Applicant must apply for a six month extension if project is unable to be completed for any reason within the six month period

If you may have any other questions or concerns you may contact the ZBA office at (845) 692-7800 ext 141, or by email at [zoningboard@townofwallkill.com](mailto:zoningboard@townofwallkill.com).

**Zoning Board Fee Schedule**  
**(Adopted by Town Board Resolution #27 of 2021)**

**RESIDENTIAL:**

Use and Area Variance - \$550.00

Decks, Sheds and Fences - \$450.00

Accessory Buildings - \$475.00

Signage - \$475.00

Interpretation – No Charge

**(ADDITIONAL CHARGES MY BE BILLED IF NECESSARY TO COVER ADDITIONAL ATTORNEY FEES)**

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**COMMERCIAL:**

Use and Area Variance - \$900.00

Signage - \$900.00

Interpretation - \$700.00

**(ADDITIONAL CHARGES MAY BE BILLED IF NECESSARY TO COVER ADDITIONAL ATTORNEY FEES)**

**MAILING LABEL FEES FOR THE PUBLIC HEARING ARE NOT INCLUDED WITHN THE FEES.**

**EXTENSION FEES**

Residential - \$25.00

Commercial - \$50.00

## Public Notice Label Process

After the applicant has attended the preliminary review with the Zoning board, the applicant is responsible for mailing the public notice to the surrounding property owners. The Assessors Dept. will provide applicant with list of labels to be used for notification purposes.

- o After preliminary review the Assessors Dept. will provide the applicant with the required Labels.
- o The Assessors Dept. will contact the applicant once the labels are completed. This process may take 7-10 days. You may contact the Assessor's office to get an estimated time of completion or for any question regarding the Labels at (845)692-7810.
- o Upon completion of Labels you will be notified of fee, you may pay by cash or check, which should be made out to the Town of Wallkill.

### Mailing List fee schedule

Labels:	Fees:
1-10	\$10.00
11-20	\$20.00
21-30	\$30.00
31-40	\$40.00
41-50	\$50.00
51-60	\$60.00
61-70	\$70.00

This is a service provided for the applicant, by the Town of Wallkill. The Assessors and Zoning Departments work in correlation to provide this information to the applicant as soon as possible. We will do our best to provide this service in a timely manner with no inconvenience to the applicant.

## Zoning Board Application

APPEAL # \_\_\_\_\_

1	Application Date	
2	Applicant(s) Name	
3	Address	
4	Phone Number	
5	Email Address	
6	Property Owners Name	
7	Property Address	
8	Phone Number	
9	Email Address	
10	Date owner acquired the property	
11	Tax Map Location (Section-Block-Lot)	
12	Street Address	
13	Zoning District (circle one)	RA / RA-1/ R1/ R2/ R-AH/ RM-B/ NC/ TC/ OR/ HC/ ENT-L/ ENT
14	Lot Size and Acreage	
15	Soil Type described in Town Code	
16	Application fee	(Check or Cash) Amount-\$ _____

**Appeal Request:**

Any Appeal is made or requested by the applicant for the following:

- Interpretation of the Zoning Law
- Commercial Variance
- Use Variance
- Sign Variance
- Area Variance
- Residential (Decks, Shed, Pool, Addition, Accessory bldg. /structure)     (New Structure)
- Accessory building larger than 28ft x 28ft

Other:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Front / Side / Rear / Yard setback from \_\_\_\_\_ to \_\_\_\_\_ Section \_\_\_\_\_

Front / Side / Rear / Yard setback from \_\_\_\_\_ to \_\_\_\_\_ Section \_\_\_\_\_

Front / Side / Rear / Yard setback from \_\_\_\_\_ to \_\_\_\_\_ Section \_\_\_\_\_

Front / Side / Rear / Yard setback from \_\_\_\_\_ to \_\_\_\_\_ Section \_\_\_\_\_

Lot area from \_\_\_\_\_ to \_\_\_\_\_ Section \_\_\_\_\_

State reason and purpose for Request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant must print and submit Environmental Assessment Form. This form must be filled out by going to the following link and following the steps given: [www.dec.ny.gov/eafmapper](http://www.dec.ny.gov/eafmapper)

Has this proposal appeared before the Planning Board?     YES     NO

Property taxes up to date with the Town of Wallkill?     YES     NO \_\_\_\_\_

Property owner must have their signature notarized on this application:

Owners Signature: \_\_\_\_\_    Notary Public: \_\_\_\_\_

Sworn to before me this date: \_\_\_\_\_

Applicant same as owner

State of New York

County of Orange

Building Inspector signature: \_\_\_\_\_    Date: \_\_\_\_\_

APPLICANT DISCLOSURE FORM – ORANGE COUNTY, NY REVIEW UNDER SECTION 239-M OF GENERAL MUNICIPAL LAW

The following is information relative to the below named project which is presently pending before the \_\_\_\_\_ (City/Town/Village) of \_\_\_\_\_ (Planning/Zoning/City/Town/Village) \_\_\_\_\_ Board.

Title of Project: \_\_\_\_\_

Municipality: Town/Village/City of \_\_\_\_\_

(underline one of above)

Nature of Owner or Owners (LLC, Corporation, Partnership, Joint Venture, natural person, professional corporation or other type of business entity or combination of the above):

\_\_\_\_\_

The names of the Members, Officers, Shareholders, Directors, Beneficial Owners owning at least five percent of the Stock or Membership or Partnership Interest or Beneficial interest in the project are:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## *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			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
Address:		E-Mail:	
City/PO:		State:	Zip Code:
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"/>
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:			YES <input type="checkbox"/>
3.a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ 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 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,		NO	YES	N/A
a. A permitted use under the zoning regulations?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consistent with the adopted comprehensive plan?		<input type="checkbox"/>	<input 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 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 type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES	
		<input type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?		<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?		<input 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 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 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 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?		NO	YES	
		<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?		<input 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?		NO	YES	
		<input type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		<input 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 type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?		NO	YES	
		<input 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,				
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)?		<input type="checkbox"/> NO	<input type="checkbox"/> YES	
If Yes, briefly describe: _____				



<p>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)?</p> <p>If Yes, explain purpose and size: _____</p> <p>_____</p> <p>_____</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p>	<p><b>YES</b></p> <p><input type="checkbox"/></p>
<p>19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p>	<p><b>YES</b></p> <p><input type="checkbox"/></p>
<p>20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste?</p> <p>If Yes, describe: _____</p> <p>_____</p> <p>_____</p>	<p><b>NO</b></p> <p><input type="checkbox"/></p>	<p><b>YES</b></p> <p><input type="checkbox"/></p>

**I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE**

Applicant/sponsor name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_