



Town of Poughkeepsie

Planning & Zoning

1 Overocker Road
Poughkeepsie, NY 12603

845-485-3657 Phone
845-486-7885/790-4772 Fax

Town of Poughkeepsie Zoning Board of Appeals

Application for Accessory Apartment Special Use Permit

Name of Project (if applicable): Basement Rec room becoming
Accessory Apartment

Name of Applicant(s): SARA BRADON

Address: 10 Conklin St. New Hamburg, NY 12590

Telephone: (914) 433-0934

Name and Address of Record Owner(s): Same as above

Name and Address of Attorney or professional representative: NA

Telephone: _____

Street Address of all parcels: 10 Conklin St. New Hamburg, NY

Tax Map Number of all parcels: 6057-07-569877

Zoning District: R20

Have any permits affecting the property been issued by any other governmental agency?

No Yes If yes, please list in detail (attach separate pages if necessary):

Has any application(s) for any other permit(s) for any activity affecting the property been submitted to any other governmental agency? No Yes . If yes, please list in detail (attach separate pages if necessary):

Attach a copy of the current deed and any easements affecting the property.

A) For Accessory Apartment Special Use Permit Applications:

Provide a description of the proposed activity with regard to the following standards. (Attach additional pages as necessary):

1) Month and year the home was constructed?

04 / 1997

2) Is the home owner occupied?

yes

3) Is there a Certificate of Occupancy for the home? If yes, what date was it issued?

Yes. 10/2/1997

4) Month and year the apartment was constructed?

04 / 1997

5) What is the total square footage of the home?

2435 SF

6) What is the total square footage of the apartment?

470 ±

7) How many bedrooms are in the apartment?

Studio apartment

8) What is the water supply source (i.e. municipal water or private well)?

municipal

9) What is the method of waste disposal (i.e. municipal sewer or private septic)?

septic

10) How will the apartment be identified for emergency services?

TBD

11) Is there a separate entrance for the apartment?

yes

12) Where is the stairway and fire escape located?

ground floor

13) How many parking spaces are there on the lot?

3+

14) Are there any open Building Permits or Violations regarding the property?

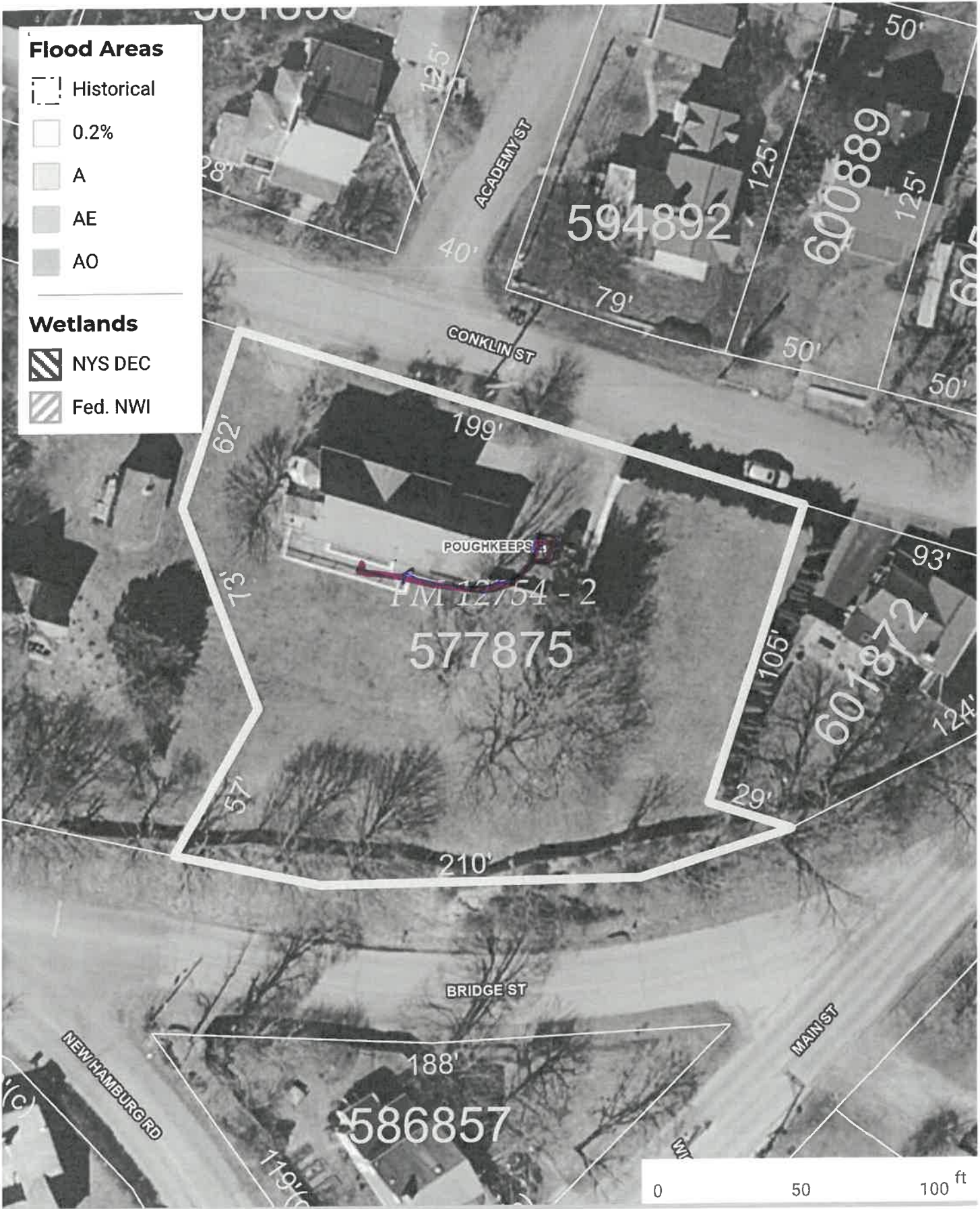
No

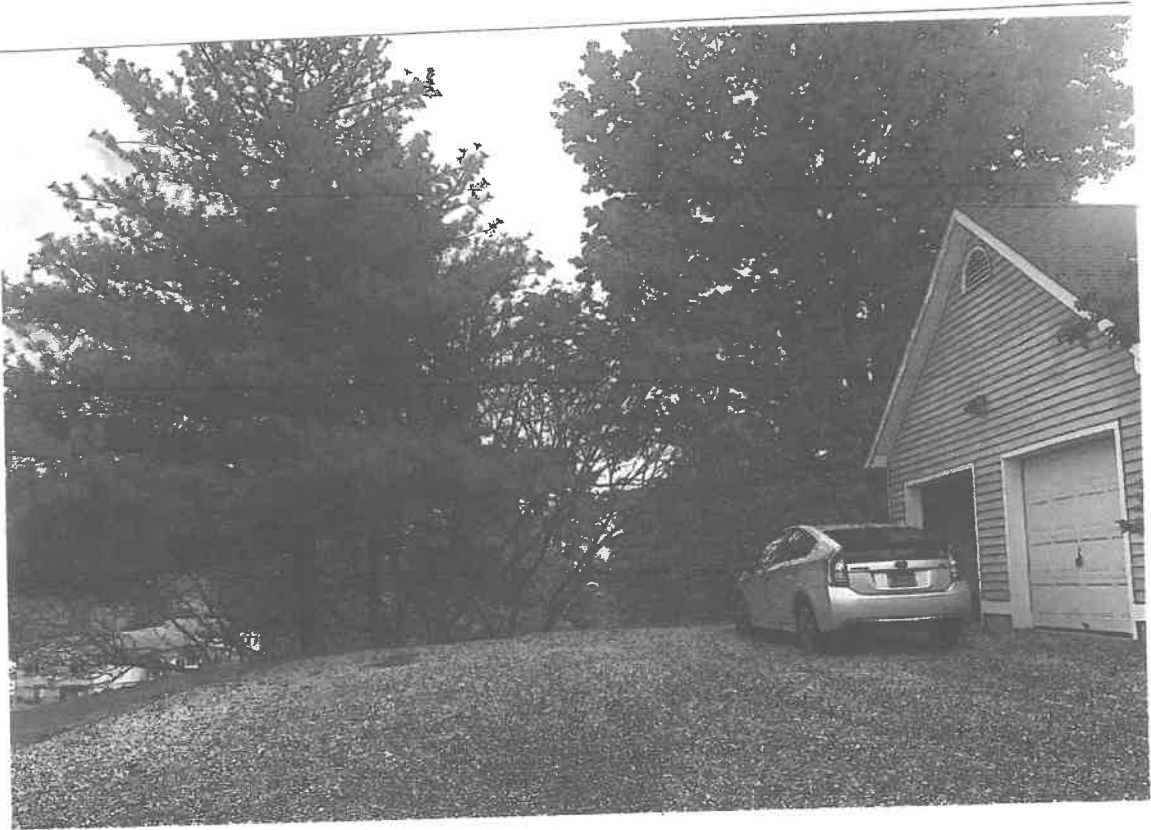
By His/Her signature the Applicant avows that: 1) He/She has read this application and is familiar with its content; and 2) He/She has read, is familiar with, and understands the requirements of the Town Poughkeepsie Code provision(s) affecting or regulating the project for which this application is made; and 3) He/She agrees to comply with the requirements of the Town Poughkeepsie Code provision(s) affecting or regulating the project for which this application is made including any general or special conditions of any permits or approvals granted by any board, agency, or department of the Town of Poughkeepsie; and 4) He/She has read this statement and understands its meaning and its terms.

Applicant Signature: Sara Bragdon

Print Name: SARA BRAGDON

Date: 5/23/23





RESIDENTIAL BUILDING SECTION

- 01 MANSSION
- 02 RAISED RANCH
- 03 SPLIT LEVEL
- 04 CAPE COD
- 05 COLONIAL
- 06 CONTEMPORARY
- 07 WOOD
- 08 BRICK
- 09 ALUMINUM/VINYL
- 10 COMPOSITION
- 11 LOG CABIN
- 12 DUPLEX
- 13 BUNGALOW
- 14 OTHER HOUSE
- 15 TOWN HOUSE

0.5
2.0

- 05 CONCRETE
- 06 STUCCO
- 07 STONE

- 01 WOOD
- 02 BRICK
- 03 ALUMINUM/VINYL
- 04 COMPOSITION

0.1
1.997
1

NUMBER OF KITCHENS

NUMBER OF BATHS

NUMBER OF BEDROOMS

FIREPLACE

HEAT TYPE

FUEL TYPE

CENTRAL AIR

BASEMENT TYPE

BASEMENT GARAGE CAPACITY

CONDITION

GRADE

GRADE ADJUSTMENT

ATTACHED GARAGE CAPACITY

PORCH TYPE

FIRST STORY AREA

SECOND STORY AREA

ADDITIONAL STORY AREA

HALF STORY AREA

THREE QUARTER STORY AREA

FINISHED AREA OVER GARAGE

FINISHED ATTIC AREA

FINISHED BASEMENT AREA

UNFINISHED HALF STORY FLOOR AREA

UNFINISHED THREE QUARTER STORY AREA

UNFINISHED FULL FLOOR AREA

SQUARE FOOT OF LIVING AREA

FINISHED RECREATION ROOM AREA

1.268

1.118

STRUCTURE CODES

- GA01 ATT 1 STORY
- GA02 ATT 1 1/2 STORY
- GA03 ATT 2 STORY
- GA04 DET 1 STORY
- GA05 DET 1 1/2 STORY
- GA06 DET 2 STORY

- POOLS
- LS1 STEEL VINYL
- LS2 FIBERGLASS
- LS3 POURED CONCRETE
- LS4 GUNITE
- LS5 ABOVE GROUND

- BARNS
- FB1 1 STORY DAIRY
- FB2 1 1/2 STORY DAIRY
- FB3 2 STORY DAIRY
- FB4 1 STORY GEN
- FB5 1 1/2 STORY GEN
- FB6 2 STORY GEN
- FB7 POLE
- FB8 HORSE

- MISCELLANEOUS
- RC1 CARPORT
- RC2 GREENHOUSE
- RC3 TENNIS COURT

- CAWPIES
- CP5 ROOF ONLY
- CP6 WITH SLAB
- CP7 SLAB/SCREEN

- SHEDS
- FC1 MACHINE
- FC2 ALUMINUM
- FC3 GALVANIZED
- FC4 BAKED ENAMEL

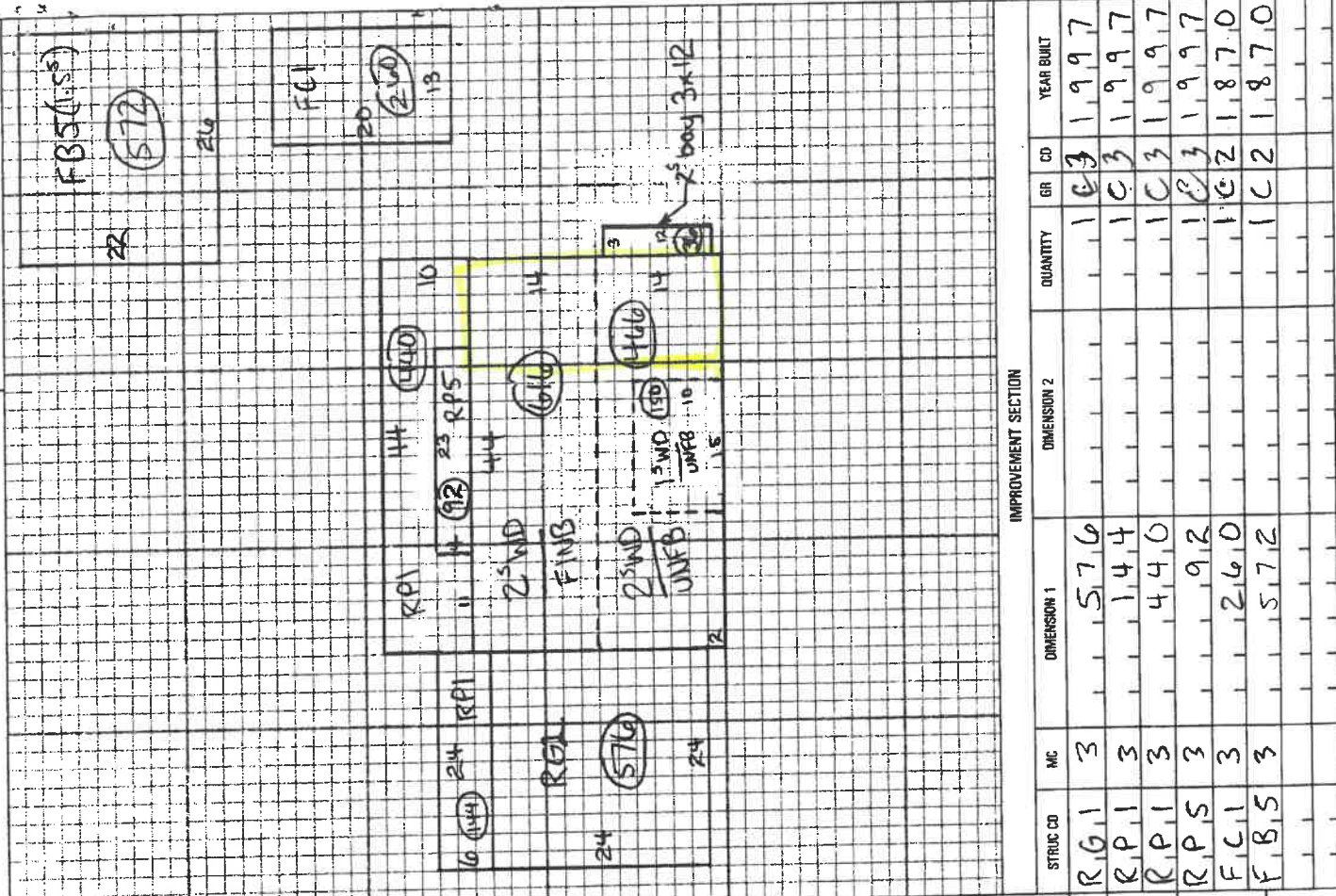
- MOBILE HOME
- MH5 MOBILE HOME BASEMENT
- MH1 MOBILE HOME ROOF
- MH2 MOBILE HOME 7X12 ROOM
- MH3 MOBILE HOME 7X24 ROOM
- MH4 MOBILE HOME TR-OUT RM
- MH6 MOBILE HOME WOOD ADDON

- PORCH TYPES
- RP1 OPEN
- RP2 COVERED
- RP3 SCREENED
- RP4 ENCLOSED
- RP5 UPPER OPEN
- RP6 UPPER COVERED
- RP7 UPPER SCREENED
- RP8 UPPER ENCLOSED

- IMPROVEMENT CODES
- MEASURE CODE
- 1 QUANTITY
- 2 DIMENSIONS
- 3 SQUARE FEET
- 4 DOLLARS

- GRADE
- A EXCELLENT
- B GOOD
- C AVERAGE
- D ECONOMY
- E MINIMUM

- CONDITION
- 1 POOR
- 2 FAIR
- 3 NORMAL
- 4 GOOD
- 5 EXCELLENT



IMPROVEMENT SECTION

STRUC CD	MC	DIMENSION 1		DIMENSION 2		QUANTITY	GR	CD	YEAR BUILT
		Length	Width	Length	Width				
R,G,1	3	57.6				1	C3		1997
R,P,1	3	14.4				1	C3		1997
R,P,1	3	44.0				1	C3		1997
R,P,5	3	9.2				1	C3		1997
F,C,1	3	26.0				1	C2		1870
F,B,5	3	57.2				1	C2		1870

DISCLOSURE OF BUSINESS INTEREST

State of New York }
County of Dutchess } ss:

SARA BRAGDON being duly sworn, deposes and says:

1. Pursuant to §803 of the General Municipal Law the following municipal officer(s) or employee(s), and any of their family members, outside employers, business associates, clients, or campaign contributors, have, or will later acquire, an ownership position, employment position, or other contractual interest in the proposed project: (Insert name, home address and municipal position held. Attach additional pages as necessary.)

None

2. That the interest of said municipal officer(s) or employee(s) is: (Detail the nature and extent of the interest. Attach additional pages as necessary.)

NA

3. That he/she understands that the Town of Poughkeepsie Zoning Board of Appeals 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.

Sara Bragdon
Agent/Owner

Agent/Owner

Ricardo F Mendes
Notary Public

RICARDO F MENDES
Notary Public, State of New York
Commission No. 01ME6177155
Qualified in Dutchess County
Commission expires Nov. 13th, 2023

AFFIDAVIT TO BE COMPLETED BY OWNER

State of New York }
County of Dutchess } ss:

SARA BRAGDON being duly sworn, deposes and says:

1. That I/we are the Owner(s) of the within property as described in the foregoing application for Zoning Board of Appeals approval(s) and that the statements contained therein are true to the best of my/our knowledge and belief.
2. That I/we hereby authorize myself, to act as my/our representative in all matters regarding said application(s), and that I/we have the legal right to make or authorize the making of said application.
3. That I/we understand that by submitting this application for Zoning Board of Appeals approval that I/we expressly grant permission to the Zoning Board of Appeals and its authorized representatives to enter upon the property, at all reasonable times, for the purpose of conducting inspections and becoming familiar with site conditions. I/we acknowledge that this grant of permission may only be revoked by the full withdrawal of said application from further Zoning Board of Appeals action.
4. That I/we understand that by submitting this application that I/we shall be responsible for the payment of all application fees, review fees, and inspection fees incurred by the Town related to this application.
5. That I/we understand that I/we, and any of our contractors and representatives shall be jointly and severally liable for all costs incurred, including environmental restoration costs, resulting from non-compliance with the approved application, and with non-compliance with any provision of the Town Code. I/we acknowledge that approval of the plan and commencement of any work related to the approved application shall constitute express permission to the Zoning Board of Appeals, the Building Inspector, the Planning Department, the Zoning Administrator, and any duly authorized representative of the Town of Poughkeepsie, to enter the property for the purposes of inspection for compliance with the approved application and any provision of the Town Code, whether or not any other permits have been applied for or issued for the project. I/we acknowledge that by submitting this application, and by approval of said application, including the commencement of any work related to the approved plan is an express waiver of any objection to authorized Town official(s) entering the property for the purpose of conducting inspections.
6. That I/we understand that the Zoning Board of Appeals intends to rely on the foregoing representations in making a determination to issue the requested applications and approvals and that under penalty of perjury I/we declare that I/we have examined this affidavit and that it is true and correct.

Sara Bragdon
Applicant/Owner

Applicant/Owner

Ricardo Mendes
Notary Public

RICARDO F MENDES
Notary Public, State of New York
Commission No. 01ME6177155
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**Town of Poughkeepsie Zoning Board of Appeals
Agricultural Data Statement**

In accordance with §283-a of the New York State Town Law and §305-a of the Agriculture and Markets Law, this Data Statement will be used to evaluate the potential impacts of a proposed development on farm operations in agricultural districts.

Name of Applicant(s): SARA BRADON

Address: 10 Cookin st. ; New Hamburg, NY 12590

Telephone: (914) 433-0934

Description of the Project: Basement Rec. room becoming
accessory apartment

APPROVAL REQUESTED FOR: (Check all that apply)

Interpretation
Use Variance
Accessory Apartment

Area Variance
Special Use Permit

Project Address: 10 Cookin st. ; New Hamburg, NY 12590

Tax Map Number of all parcels: 6057-07-569877

Is any portion of the project site currently being farmed? NO

Is the project site located in an Agricultural District? Yes No

Who is farming the site? _____

Does the person farming the site: Rent Own the land?

Attach a list of the names and addresses of the owners of land within an agricultural district containing a farm operation located within 500 feet of the boundary of the project property, and the tax parcel number of the farm parcels. Attach a copy of the tax map and indicate with an "X" the farm parcels within 500 feet of the project property.

I hereby confirm that the information provided herein is true and accurate.

Signature of Applicant: Sara Bradon

Date: 5/13/23

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			
Rec. room to become studio apartment			
Name of Action or Project:			
10 Conklin St. New Hamburg basement/lower level			
Project Location (describe, and attach a location map):			
Walkout basement recreation room			
Brief Description of Proposed Action:			
There is currently a recreation room with a kitchenette and a bathroom in my walk-out basement. I would like to make it an accessory apartment.			
Name of Applicant or Sponsor:		Telephone: 914 433-0934	
Sara Bragdon		E-Mail: humankneads@verizon.net	
Address:			
10 Conklin St.			
City/PO:		State:	Zip Code:
New Hamburg		NY	12590
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
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.			YES
2. Does the proposed action require a permit, approval or funding from any other governmental Agency?			NO
If Yes, list agency(s) name and permit or approval:			YES
3.a. Total acreage of the site of the proposed action?			NO
b. Total acreage to be physically disturbed?			YES
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?			NO
3.a. Total acreage of the site of the proposed action? <u>0.62</u> acres			YES
b. Total acreage to be physically disturbed? <u>0</u> acres			NO
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? <u>0.62</u> acres			YES
4. Check all land uses that occur on, adjoining and 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			

	NO	YES	N/A
5. Is the proposed action, a. A permitted use under the zoning regulations?	<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?	<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: _____	<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	<input checked="" 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 checked="" type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input type="checkbox"/>	<input checked="" 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: _____	<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: <u>town water already hooked up to the home</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities? <u>existing septic</u> If No, describe method for providing wastewater treatment: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	<input checked="" 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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: _____	<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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. Is the project site located in the 100 year flood plain?	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	

<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>	NO	YES
<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>	NO	YES
<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>	NO	YES
<p>I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE</p>		
<p>Applicant/sponsor name: <u>Sara Bragdon</u></p>	<p>Date: <u>5/23/23</u></p>	
<p>Signature: <u>SARA BRAGDON</u></p>		