

TOWN OF MILAN
ZONING BOARD OF APPEALS
DUTCHESS COUNTY, NEW YORK

Wilcox Memorial Town Hall
20 Wilcox Circle
Milan, NY 12571

Tel. (845) 758-5133
www.milan-ny.gov
Fax. (845) 758-0445

ZONING BOARD OF APPEALS MEETING AGENDA
WEDNESDAY, APRIL 24, 2013 7:00 P.M.

PUBLIC HEARINGS:

- Young for Schmidt – Area Variances
Turkey Hill Road - **Will be postponed until the May 22th meeting**
- Cobble Pond of Milan – Area Variances – Continuation of Hearing
1165 Route 199

APPLICATIONS:

- Martin Ahlf – Area Variance
559 Spring Lake Road

ADMINISTRATIVE ITEMS:

- Approval of Minutes – March, 2013
- Correspondence

DISCUSSION ITEMS:

TOWN OF MILAN

ZONING BOARD OF APPEALS
APPLICATION

Date Received: 4-15-13
Review by ZEO: 4-11-13
Application Complete: _____
To County Planning: _____
Public Hearing: _____

To Be Completed by Applicant:

Request for (Circle One): Area Variance ~~Use Variance~~ Interpretation Special Permit

Other: _____

Name of Applicant: Martin Ahlf

Complete Address: 559 Spring Lake Rd Milan NY 12571

Telephone # _____ Cell Phone # 914-456-2521

E-Mail martin@mcabuilder.com

Is the subject property in your name? Yes No

If no, property owners name/telephone number _____

Property owners complete address: Same

Complete Address of Property: 559 Spring Lake Rd Milan NY 12571

Grid Number: 6474-00-105020 Zoning District: A3A

What is the size of the property: .67 acres

Are there currently structures on the property? Yes No
If yes, are there valid Certificates of Occupancy for those structures? Yes No
If yes, as: Commercial Residential Other: _____

Has the property been before the Zoning Board of Appeals before? Yes No
If yes, please provide name of applicant and date: _____

Is the property within 500 feet of a state or county road, state parkway, boundary of the Town of Milan? Yes No If yes, which one? CK 56

Premises affected are situated on the west side of CK 56 road or street.

Applicant's Name Martin Ahlf

Date: 4/7/13

AREA/USE VARIANCE

To be completed by the Applicant:

Variance Request: Cite the section of the zoning ordinance you are requesting a variance from:

Section: (i.e. Table B)	Pertaining to: Side Setback/Shed	From: 50 feet	To: 25 feet)
<u>Table B</u>	<u>side setback</u>	<u>35</u>	<u>27.34</u>
<u>Table B</u>	<u>side setback</u>	<u>35</u>	<u>27.21</u>
<u>Table B</u>	<u>min. btwidth that building line</u>	<u>300</u>	<u>94'</u>

Briefly explain the nature of the variance request, what you wish to accomplish, and why you need the variance: I would like a variance for the property back set for replacing the house that was destroyed by the fire on 1/21/12

It will be necessary for the Zoning Board of Appeals and/or Planning Board members, Town consultants, Town officials to visit the site in order to properly evaluate your application. Please call the Zoning Office at 758-5133, extension 21, if you do not agree with this. Kindly make it easy to find your property by identifying any landmarks, etc. 559 Spring Lake RD

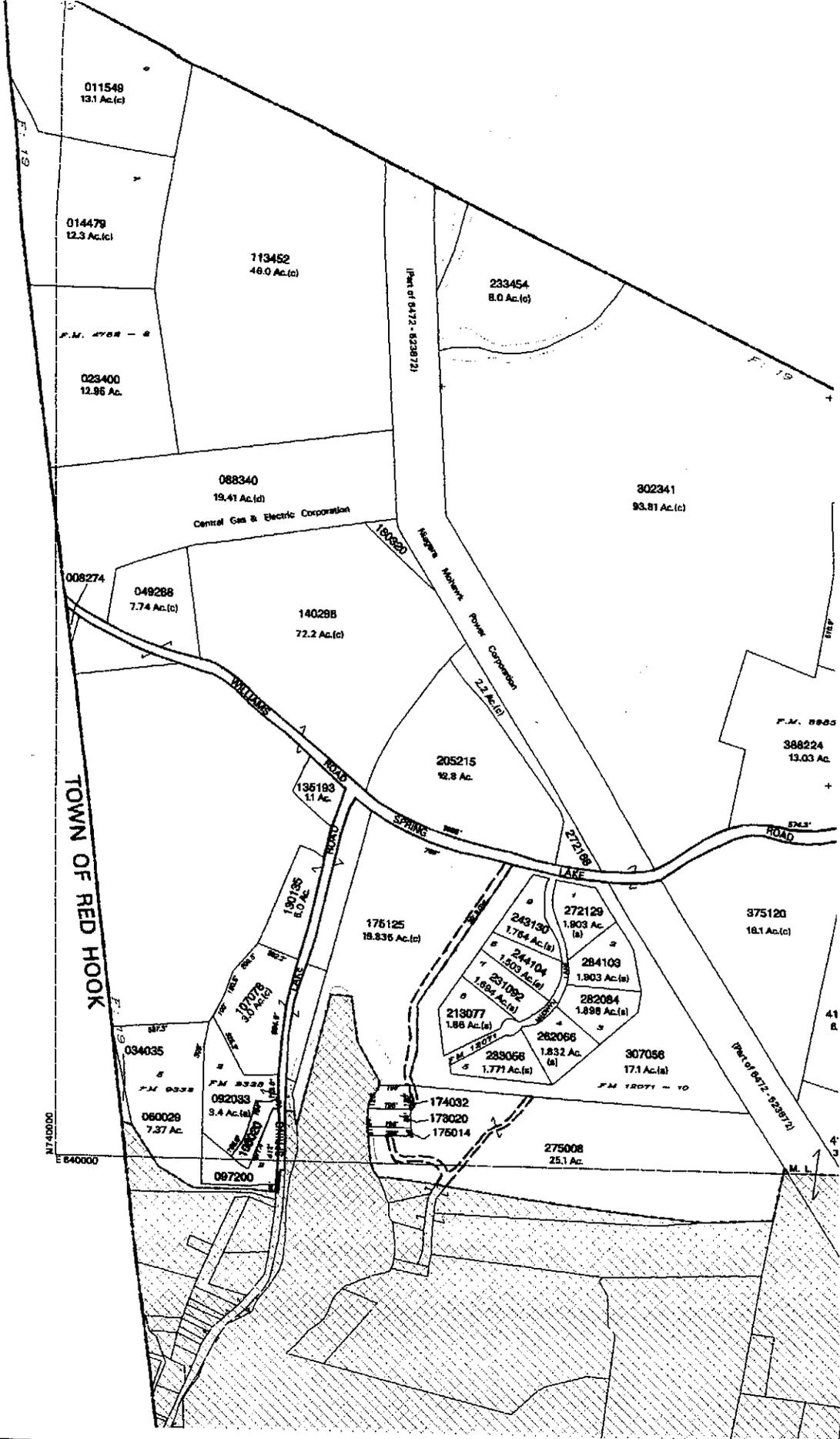
number under mail box

Appendix C
State Environmental Quality Review
SHORT ENVIRONMENTAL ASSESSMENT FORM
For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR Martin Ahlf	2. PROJECT NAME Ahlf Residence
3. PROJECT LOCATION: Municipality Milan County Dutchess	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map) 559 Spring Lake Rd Milan NY 12571	
5. PROPOSED ACTION IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY: Rebuilding home that was destroyed by fire 11/21/12	
7. AMOUNT OF LAND AFFECTED: Initially <u>6</u> acres Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If No, describe briefly need set back variance	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: Primary Dwelling	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
12. ASA RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE	
Applicant/sponsor name: Martin & Ahlf	Date: 4/7/13
Signature: [Signature]	

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment



ABSOLUTELY NO ACCURACY OR COMPLETENESS
 GUARANTEE IS IMPLIED OR INTENDED. ALL
 INFORMATION ON THIS MAP IS SUBJECT TO SUCH
 VARIATIONS AND CORRECTIONS AS MIGHT RESULT
 FROM A COMPLETE TITLE SEARCH AND / OR ACCURATE
 FIELD SURVEY

REAL PROPERTY MAP
 FOR TAX PURPOSES ONLY
 NOT TO BE USED FOR CONVEYANCE
 MAINTAINED BY DUTCHESS CO.
 REAL PROPERTY TAX SERVICE AGENCY
 WILLIAM W. STEPHENS COUNTY EXECUTIVE
 KATHLEEN WYER, Director

SPECIAL DISTRICTS					
FIRE	---	18	Mtisk Fire Prot.		
SCHOOL	---	SR 2P	Red Hook CSD 1 Pine Plains CSD 1		