

TOWN OF WAREHAM
ZONING BOARD OF APPEALS

APPLICATION FOR A PUBLIC HEARING FOR A VARIANCE/SPECIAL PERMIT

Certain uses are allowed in several zoning districts only by means of a Variance and/or Special Permit from the Zoning Board of Appeals. Those uses are indicated in the Wareham Zoning By-Laws. To apply for a Variance/Special Permit from the Zoning Board of Appeals, please do the following:

- Complete this form.
- Complete information packets. (Directions attached)
- Submit application form and packet to Town Clerk for signature.
- Submit application form and packet to Town Collector for signature.
- Submit completed form, packets, and appropriate fees** to the Zoning Board of Appeals secretary.

**Permits may be issued only after a public hearing. There is a filing fee of \$300.00 per lot, per application for all non-conforming residential lots, whether built upon or not. There is a filing fee of \$750.00 per lot, per application for all commercial applications. In the case of a multi-family development, the fee is \$300.00 plus an additional \$50.00 for every unit over two (2). Please make check payable to the Town of Wareham.

**A check to cover two (2) legal advertisements for the public hearing should be made payable to Wareham Week in the amount of \$80.00.

**The applicant will also be responsible for the costs of sending out abutter notifications by Certified Mail. The cost is \$6.73 per certified letter to each abutter. Please see Zoning Board secretary for cost of mailings. Please make check payable to the Town of Wareham.

I hereby apply for a Variance/Special Permit for a use to be made of the following described place:

STREET & NUMBER: 4 Littleton Drive **MAP:** 56 **LOT:** 1

ZONING DISTRICT: MR30

USE REQUESTED: Mixed-Income Multi-family Residential (Family and Age-Restricted)

OWNER OF LAND & BUILDING: Wareham Redevelopment Authority **TEL.#** 508.291.3100 x6501

ADDRESS OF OWNER: Wareham Memorial Town Hall, 54 Marion Road, Wareham, MA 02571

PERSON(S) WHO WILL UTILIZE PERMIT: Charlie Adams, Regional Vice President, Penrose, LLC

ADDRESS: 50 Milk Street, 16th floor, Boston, MA

DATE: 11/18/2020 **SIGNATURE:** *Charlie Adams*

This application was received on the date stamped here:

Town Clerk: _____ **Date:** _____

Tax Collector: _____ **Date:** _____

Planning/Zoning Dept.: _____ **Date:** _____

Application fee paid: _____ **Check #:** _____ **Receipt:** _____

Advertising fee paid: _____ **Check #** _____ **Receipt:** _____

Abutters fee paid: _____ **Check #** _____ **Receipt:** _____