

Do Not Staple



TOWN OF GEORGETOWN

Zoning Board of Appeals

Ph. (978) 352-5742 - Fax (978) 352-5725

WATER RESOURCE DISTRICT APPLICATION

For Town Use:

Please make sure you have submitted a Building Application with a Certified plot plan to the Building Inspector first, as his determination may or may not require a Zoning Hearing.

Application: If this Application is incomplete or missing any information, it will not be accepted by the Board Staff and will be rejected; therefore we strongly recommend that you set an appointment with the Board Staff person to review the application for completeness. If it is submitted to Town Clerk and is incomplete the Zoning Board Staff person will reject the application.

1. Location:

Assessor's No. Street
Records: Map Lot (s) Lot size Zoning District

2. APPLICANT: ☐ Owner ☐ Licensee ☐ Buyer (P & S agreement)

Name: _____

Address: _____

Home Telephone: _____ Cell: _____ Email: _____

Co-Applicant _____ **or Attorney:** _____

Name: _____ Address: _____

Phone: _____

OWNER if different from Applicant:

Name: _____

Address: _____

Home Telephone: _____ Cell: _____ Email: _____

ENGINEER: _____

Contact info/ADDRESS: _____

3. Application: Description of proposed work or use/ Nature of relief requested: (Attach letter if necessary)

Area within 1,000 ft. of brook: _____

Flood Plain District nearest Lot: _____

4. Application Checklist: Please submit a completed and signed Application to Board Staff together with:

_____ **Application Fee** (made payable to the Town of Georgetown) - \$650 for Water Resource/\$800 for Special Permit in commercial/industrial zone, some applications need both and will total \$1,450, check with Board Staff Person.

_____ **Certified Plot Plan**- Plan shall be Certified, Stamped & Dated by a Registered land surveyor/Engineer to include the location and dimensions of all existing and proposed buildings. Also Setback distances (*setback from building/s to all lot line/s*), for all structures, driveways, location and dimensions, easements or right of ways that abut or cross the subject property, i.e. area, boundaries, front/rear/side yard setbacks; A scale measurement, with compass drawing showing North Arrow on the plan with the address of the property and names and addresses of the owner/and the name of the person or entity preparing the plan with the date of the plan. **MORTGAGE and SEPTIC PLANS ARE NOT ACCEPTABLE. ANY ADDITIONS OR UPDATED PLANS SHALL BE SUBMITTED TO BOARD STAFF 2 WEEKS PRIOR TO THE HEARING.**

_____ **Electronic copy of application/plans after the application has been reviewed by Board staff for completeness**

_____ **Floor Plans of structures with all dimensions existing and proposed, done by architect (see board staff)**

_____ **Elevations – Front/rear/side showing measurements & height of the existing and proposed structures (done by engineer/architect, plans must be dated and marked). Plans to be folded not rolled.**

_____ **Denial from Building Inspector (when applicable)**

_____ **Copy of Deed (proof of ownership with Registry Book & Page)**

_____ **Letter of Authorization to represent the owner/applicant. (If using attorney etc.)**

_____ **Current copy of paid tax bill**

_____ **Recorded copy (with book & page) of any previous ZBA Decisions or from any other Town Boards.**

_____ **Abutter List for 300 ft. Radius of subject property certified by the Assessor within the last 6 months.**

_____ **Field card of property from Assessor's office.**

_____ **Electronic copy of application/plans after the application has been reviewed by Board staff.**

After staff person has reviewed the original application for completeness, the applicant shall make **14 sets (collated)** of application and detailed plans, **folded not rolled**. (Twenty-five (25) if a MGL Chapter 40B application). The size of the Plans shall be **11x 17 and one full size plan 24x36** (full size plan goes with your original set) keep all original documents in one set and do NOT staple. Have staff person review before you make any copies. (More copies may be needed (see last page for distribution to other Town Departments).

Make an appointment with the Board Staff Person before you make copies – Office Phone 978-352-5742

The Legal Advertisement will be place by the ZBA; the applicant will receive a bill from the newspaper. The fee is the responsibility of the applicant/petitioner and shall be paid promptly as the hearing may not be held.

PLEASE COMPLETE THE ABOVE INFORMATION AND ANSWER THE FOLLOWING QUESTIONS FULLY. PURPOSE AND/OR USE FOR REQUEST FOR SPECIAL PERMIT

**PLEASE ATTACH ADDITIONAL SHEET TO ANSWER QUESTIONS.
ALL QUESTIONS MUST BE ANSWERED – USE SEPARATE SHEET AS NECESSARY**

- 1) Completely list all chemicals, pesticides, fuels and other potential toxic or hazardous materials to be used or stored on the premises in quantities greater than those associated with normal household use. Accompany with a description of measures proposed to protect all storage containers or facilities from vandalism, corrosion and leakage. Please also submit a proposal for control of spills.
- 2) Describe potentially toxic or hazardous wastes to be generated, indication storage and disposal methods.
- 3) Show evidence of approval by Massachusetts Department of Environmental Protection (DEP) of any industrial water treatment of disposal system or any wastewater treatment system over 15,000 gallons per day capacity.
- 4) For underground storage of toxic or hazardous materials, show evidence of qualified professional supervision of system design and installation.
- 5) Attach analysis certifying compliance with Zoning By-law 165-33, Section 3 paragraph E. Such analysis is to be done **by a technically qualified expert**. (*See design and operations guidelines in Chapter 165-34, a-d*).
- 6) As per 165-36, Show any area in or flowing into Floodplain Districts described in 164-28. Floodplain delineation must be shown on plot plans.
- 7) Attach an up to date certified abutters list from the town assessor's office as provided in General Laws Chapter 40A, Section 11.

I, the applicant attest that I have filed copies of this application with the following Georgetown bodies:

Board of Health
Building Inspector
Conservation Commission
Fire Chief
Hazardous Waste Coordinator
Highway Department
Planning Board
Town Clerk

Signed under penalties of perjury

Date

Hearing Request:

I/We hereby request a hearing before the Georgetown Zoning Board of Appeals for the indicated relief.
I/We certify that I/we have read and examined this Application and all the materials submitted that all of the information contained therein or provided therewith is true and correct.

APPLICANT: Signed: _____ Date: _____

Signed: _____ Date: _____

OWNER OF RECORD:

Signed: _____ Date: _____

Signed: _____ Date: _____

Application Amended 1/6/15.

Fees Amended 4/5/16

IF ALL OF THE ABOVE REQUIREMENTS ARE NOT MET OR INCOMPLETE APPLICATION, THE APPLICATION WILL BE REJECTED