

SPECIAL PERMIT APPLICATION

PREPARED FOR:

16 MT DAN ROAD, LLC

FOR PROPERTY LOCATED ON:

16 MT DAN ROAD

STURBRIDGE, MA 01518

PREPARED BY:

JALBERT ENGINEERING

54 MAIN STREET

STURBRIDGE, MA 01566

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NARRATIVE

THE APPLICANT IS PROPOSING TO RAZE THE EXISTING HOUSE LOCATED AT 16 MT DAN ROAD ON BIG ALUM AND BUILD A NEW HOME ON THE SITE. THE PARCEL SHOWN IS IN PLAN BOOK 27 PLAN 77 AT THE WORCESTER REGISTRY OF DEEDS. DESCRIPTION OF THE PROPERTY IS FOUND IN DEED BOOK 68086 PAGE 373.

THE EXISTING HOUSE WAS BUILT IN 1955 WITH THREE BEDROOMS AND THE NEW HOME WILL ALSO HAVE THREE BEDROOMS. THE EXISTING PRIVATE WELL WILL BE USED AND THE SEWAGE DISPOSAL SYSTEM WILL BE CONNECTED TO THE EXISTING MUNICIPAL SYSTEM ON THE SITE. THE LOT DOES NOT LIE WITHIN A MAPPED AREA OF PRIORITY HABITAT OF RARE WILDLIFE.

THE PARCEL CONFORMED TO ZONING WHEN CREATED, HOWEVER A PUBLIC HEARING WILL BE HELD BY THE ZONING BOARD OF APPEALS FOR A SPECIAL PERMIT BECAUSE OF LOT AREA. APPROVAL OF THE STURBRIDGE CONSERVATION COMMISSION WAS OBTAINED.

STORMTECH SC-310 CHAMBERS WILL BE INSTALLED TO PROVIDE DRAINAGE COLLECTION FOR THE SITE AND ROOF RUNOFF. ALL DISTURBED AREA ARE TO BE LOAMED AND SEEDED. THE EROSION CONTROL BARRIER WILL BE INSTALLED PRIOR TO CONSTRUCTION AND WILL DEPICT THE LIMIT OF WORK AT THE SITE. STONE CHECK DAMS WILL BE INSTALLED IN THE DRAINAGE SWALE FOR EROSION CONTROL AND SILTATION PROTECTION. AN ORDER OF CONDITIONS WAS ISSUED AND THE DEP FILE NUMBER IS 300-1135.

Please refer to the Jalbert Engineering, Inc. Design plan Drawing No. 21129

For Official Use:

Date of Receipt: _____ Received By: _____
File Number: _____ Date of Approval: _____
Completed: _____ Not Completed: _____

Part A. General Information

1. NAME OF REGISTERED OWNER 16 MT DAN ROAD, LLC.
Address 8 EAST RIDGE DRIVE
City PETERBOROUGH State NH Zip Code 03458
Telephone No. 602-550-4428
Email Address SCGROSS27@GMAIL.COM

2. NAME OF APPLICANT/ AGENT LEONARD S. JALBERT, P.E.
Address 54 MAIN STREET
City STURBRIDGE State MA Zip Code 01566
Telephone No. 508-347-5136
Email Address LSJALBERT@JALBERTENGINEERING.COM

3. MATTERS RELATED TO THE APPLICATION SHOULD BE ADDRESSED TO (check one or more):
 Owner Applicant/Agent

4. PROOF OF OWNERSHIP ACCOMPANYING APPLICATION: (check one):
 Copy of front page of deed Parcel Registry

Part B. Details of Application

5. Location of Subject Property

Municipal Address: 16 MT DAN ROAD

Lot(s): 9 Plan: 27/77

Assessment Lot Number(s): 450/1425/16

6. Is the subject property subject to any easements, rights-of-way, or other rights over adjacent properties (i.e. mutual driveway)?

Yes No

7. Existing use of Property: SINGLE FAMILY RESIDENTIAL HOME
SUBURBAN RESIDENTIAL DISTRICT

8. Date of construction of all existing and proposed buildings and structures on the subject property:

Services available to the subject property:	Existing	Proposed
Type of water services (i.e. municipal water or private well)	WELL	N/C
Type of sewage disposal (i.e. municipal sewage disposal or private septic system)	MUNICIPAL	N/C
Type of storm drainage (i.e. sewers, ditches, swales or other means)	SWALES	N/C

9. Nature of Relief Requested:
Special Permit pursuant to Article/Section Art. XV -300-15.2(A-E) Art. XVII-300-18.2 (2) of the Zoning

Ordinance/Bylaw which authorizes ZONING BOARD OF APPEALS
to permit RAZE EXISTING STRUCTURE AND REBUILD A NEW RESIDENCE

Detailed explanation of request:
THE EXISITNG BUILDING WILL BE RAZE AND A NEW HOME WILL
BE BUILT IN THE VICINITY OF THE EXISTING FOUNDATION. THE
CONSERVATION COMMISSION APPROVED THE SITE ON 2/16/23.
THE ALTERATION WILL BE CONFORMING WITH THE AREA.

10. Evidence to support grant of special permit:

Because of the reasons set forth below, the special permit request will be in harmony with the intent and purpose of the Zoning Ordinance/Bylaw:

THE NEW HOME WILL BE 14.2' FROM THE EDGE OF THE PRIVATE TRAVELED WAY. ALL OTHER SETBACKS AND COVERAGE CONFORM TO PRESENT ZONING REGULATIONS. THE COVERAGE WILL BE 7.41% WHICH WILL NOT INTENSIFY THE EXISTING NONCONFORMITIES.

Because of the reasons set forth below, the special permit requested will meet the additional requirements of the Zoning Ordinance/Bylaw as follows:

THE LOCATION OF THE NEW HOME, DESIGN AND HEIGHT OF THE BUILDING AND LANDSCAPING WILL NOT INCREASE THE NONCONFORMING OF THE STRUCTURE OR THE SITE. THE HOME WILL BE CONSISTENT WITH THE COMPREHENSIVE PLAN AND WILL NOT DEROGATE FROM THE INTENT OR PURPOSE OF THE ZONING REGULATIONS.

AUTHORIZATION (Must be signed by applicant)

I hereby request that the Town of Sturbridge Zoning Board of Appeals review this application for Special Permit and/or Finding, including all plans, documents and information herewith. I represent to the best of my knowledge and belief, this application is being submitted in accordance with the Regulations of the Zoning Board of Appeals of the Town of Sturbridge.

Leonard S. Jalbert Feb. 21, 2023
Signature of Applicant Date

AUTHORIZATION (Must be signed by owner)

I am the record owner of the property for which this application is being filed and as such, I am familiar with the work proposed to be carried out on my property.

I hereby give permission for this application to be filed with the full understanding that certain restrictions may be placed on the property relative to the approval of the proposed work.

I further certify that under the penalties of perjury, I am authorized to sign this application.

Leonard S. Jalbert, Agent 03/02/2023
Signature of Owner Date

If someone is representing the applicant or the owner, the applicant must designate such representative below:

Name of Representative: LEONARD S. JALBERT, P.E.

Address of Representative: 54 MAIN ST STURBRIDGE MA 01566

Telephone No.: 508-347-5136

Relationship of representative to owner or applicant: AGENT

If representing a group, corporation or other organization please attach a copy of the vote authorizing you to act on behalf of such organization for the purposes of this application.

An application will not be considered complete and will not be accepted by the Zoning Board of Appeals for its action until all required documentation/information has been submitted to the Town Planner and filed with the Town Clerk.

Incomplete applications will be automatically rejected and returned to the applicant.

Applications should be submitted to:

Town of Sturbridge Planning Department
Center Office Building
301 Main Street
Sturbridge, MA, 01566
508-347-2508

Applicants are *strongly* encouraged to schedule a submitted meeting with the Town Planner.