



# TOWN OF STURBRIDGE

Planning Board  
Permit Application

**For Official Use:**

Date of Receipt: \_\_\_\_\_ Received By: \_\_\_\_\_  
File Number: \_\_\_\_\_ Date of Approval: \_\_\_\_\_  
Completed: \_\_\_\_\_ Not Completed: \_\_\_\_\_

**Application Type**

Special Permit     Site Plan Review     Waiver

**Part A General Information**

1. NAME OF REGISTERED OWNER Yervant Realty dga Restrepo,  
Address 419 Main St, Unit 1 Arthur Balian  
City Sturbridge State Ma Zip Code 01566  
Telephone No. 417-775-9612  
Email Address Arbalian@hotmail.com

2. NAME OF APPLICANT/ AGENT Julia Nadler  
Address 2 Glenridge Rd  
City Sturbridge State Ma Zip Code 01566  
Telephone No. 417-978-944-6618  
Email Address Julia@shue.k-food-truck.com

3. MATTERS RELATED TO THE APPLICATION SHOULD BE ADDRES 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: 413 Main St, Sturbridge, ma

Lot(s): \_\_\_\_\_ Plan: \_\_\_\_\_

Assessment Lot Number(s): 415-10-2446/-413

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: Jimmy D's Ice Cream & Sandwiches

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)	<u>municipal water</u>	
Type of sewage disposal (i.e. municipal sewage disposal or private septic system)	<u>municipal sewage</u>	
Type of storm drainage (i.e. sewers, ditches, swales or other means)		

9. Project Details

	Total Gross Floor Area		Total Gross Leasable Area		Number of Units	
	Existing	Proposed	Existing	Proposed	Existing	Proposed
Industrial						
Office						
Commercial	<u>1560 sq ft</u>	<u>3 floors</u>	<u>same</u>		<u>1</u>	<u>1</u>
Institutional						
Residential						
Total	<u>1560 sq ft</u>	<u>all 3 floors</u>				

**Part C**

**Project Narrative** *Must be completed by applicant or agent*

Describe the proposed project in terms of use, design elements and construction timeframe.

Change occupancy from Ice cream and sandwich shops to Catering + Tasting CO.

Explain how the design and layout of the development or use constitutes suitable development without detriment to the neighborhood or to the environment.

Will be basically same layout as existing + no increase in traffic

Describe any special processes, mitigation measures or unique circumstances which may have a bearing on project approval

None

10. Please list any technical studies or background material being submitted to support the application.

NONE

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11. Please indicate (✓) if the applicant or owner has submitted any of the following applications for all or part of the subject property and complete the following chart:

Other Applications	Required		Submitted		File Number	Status of Application
	Yes	No	Yes	No		
Conservation Commission (Notice of Intent or Request for Determination)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
DPW (Curb Cut Permit)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
DPW (Street entrance, water or sewer tie in)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Board of Health (Septic, food, other)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Zoning Board of Appeals (Special Permit, Variance)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Board of Selectmen (Liquor License)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other (please list below)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Other: will need to apply to Design Review  
Committee to replace sign

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# SITE PLAN CHECK LIST

## 1. Existing Site Plan – note any non-conformance

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Locus	<u>NO CHANGES</u>
<input type="checkbox"/>	<input type="checkbox"/> North arrow	_____
<input type="checkbox"/>	<input type="checkbox"/> Survey	_____
<input type="checkbox"/>	<input type="checkbox"/> Existing Structures	_____
<input type="checkbox"/>	<input type="checkbox"/> Existing roads and curbs	_____
<input type="checkbox"/>	<input type="checkbox"/> Contours and elevations	_____
<input type="checkbox"/>	<input type="checkbox"/> Abutters within 300 feet	_____
<input type="checkbox"/>	<input type="checkbox"/> Zone and dimensional requirements	_____
<input type="checkbox"/>	<input type="checkbox"/> Setbacks	_____

### Additional comments

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## 2. Proposed – meets zoning unless noted

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Lot dimensions	<u>NO CHANGES</u>
<input type="checkbox"/>	<input type="checkbox"/> Proposed buildings	_____
<input type="checkbox"/>	<input type="checkbox"/> Percent building & impervious areas	_____
<input type="checkbox"/>	<input type="checkbox"/> Sidewalks and buffer areas	_____
<input type="checkbox"/>	<input type="checkbox"/> Streets, driveways and access	_____
<input type="checkbox"/>	<input type="checkbox"/> Circulation patterns	_____
<input type="checkbox"/>	<input type="checkbox"/> Parking spaces and calculations	_____
<input type="checkbox"/>	<input type="checkbox"/> Allowed use reference	_____
<input type="checkbox"/>	<input type="checkbox"/> Loading areas	_____
<input type="checkbox"/>	<input type="checkbox"/> Building mean height	_____
<input type="checkbox"/>	<input type="checkbox"/> Dumpsters & screening	_____
<input type="checkbox"/>	<input type="checkbox"/> Outdoor storage areas	_____

### Additional comments

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### 3. Grading

YES	NO -- must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Buffer zones and distances	<u>no changes</u>
<input type="checkbox"/>	<input type="checkbox"/> Wetlands and vernal pools	_____
<input type="checkbox"/>	<input type="checkbox"/> Riparian features	_____
<input type="checkbox"/>	<input type="checkbox"/> Flood zones	_____
<input type="checkbox"/>	<input type="checkbox"/> Ground water elevations	_____
<input type="checkbox"/>	<input type="checkbox"/> Siltation fencing	_____
<input type="checkbox"/>	<input type="checkbox"/> Significant species type and habitat	_____
<input type="checkbox"/>	<input type="checkbox"/> Detention and Retention Basins	_____
<input type="checkbox"/>	<input type="checkbox"/> Grading plan	_____

#### Additional comments

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### 4. Utilities

YES	NO -- must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Water lines and connections	<u>no changes</u>
<input type="checkbox"/>	<input type="checkbox"/> Hydrants and sprinklers	_____
<input type="checkbox"/>	<input type="checkbox"/> Sewer lines and connections	_____
<input type="checkbox"/>	<input type="checkbox"/> Electric and wire lines	_____
<input type="checkbox"/>	<input type="checkbox"/> Drainage structures	_____
<input type="checkbox"/>	<input type="checkbox"/> Oil and propane tanks	_____
<input type="checkbox"/>	<input type="checkbox"/> Snow storage area	_____
<input type="checkbox"/>	<input type="checkbox"/> Public and private wells	_____

#### Additional comments

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### 5. Landscaping, Lighting and Signs

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Landscaping and calculations	<u>no changes</u>
<input type="checkbox"/>	<input type="checkbox"/> Lighting location, size, type, direction	_____
<input type="checkbox"/>	<input type="checkbox"/> Open space as percent of lot	_____
<input type="checkbox"/>	<input type="checkbox"/> Sign location size and detail	_____
<input type="checkbox"/>	<input type="checkbox"/> Geologic features	_____
<input type="checkbox"/>	<input type="checkbox"/> Dust and noise control measures	_____
<input type="checkbox"/>	<input type="checkbox"/> Fencing permanent and temporary	_____

#### Additional comments

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### 6. Detail Sheets

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Tree planting	<u>no changes</u>
<input type="checkbox"/>	<input type="checkbox"/> Shrub planting	_____
<input type="checkbox"/>	<input type="checkbox"/> Light poles	_____
<input type="checkbox"/>	<input type="checkbox"/> Hydrants	_____
<input type="checkbox"/>	<input type="checkbox"/> Catch basins	_____
<input type="checkbox"/>	<input type="checkbox"/> Man holes	_____
<input type="checkbox"/>	<input type="checkbox"/> Traps	_____
<input type="checkbox"/>	<input type="checkbox"/> Trenching	_____
<input type="checkbox"/>	<input type="checkbox"/> Road profiles	_____
<input type="checkbox"/>	<input type="checkbox"/> Curbing and Burms	_____
<input type="checkbox"/>	<input type="checkbox"/> Signs and support	_____
<input type="checkbox"/>	<input type="checkbox"/> Sewer fixtures	_____
<input type="checkbox"/>	<input type="checkbox"/> Water lines	_____
<input type="checkbox"/>	<input type="checkbox"/> Fencing	_____
<input type="checkbox"/>	<input type="checkbox"/> Headwalls	_____
<input type="checkbox"/>	<input type="checkbox"/> Siltation fencing	_____
<input type="checkbox"/>	<input type="checkbox"/> Facades	_____
<input type="checkbox"/>	<input type="checkbox"/> External materials & colors	_____
<input type="checkbox"/>	<input type="checkbox"/> Penetration	_____

**Additional comments**

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**7. Calculations and Studies unless waived**

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Lot coverage	<u>no changes</u>
<input type="checkbox"/>	<input type="checkbox"/> ITE trip generation calculations	_____
<input type="checkbox"/>	<input type="checkbox"/> Planting calculations and schedule	_____
<input type="checkbox"/>	<input type="checkbox"/> Traffic impacts	_____
<input type="checkbox"/>	<input type="checkbox"/> Drainage calculations	_____
<input type="checkbox"/>	<input type="checkbox"/> Water and sewer demands	_____
<input type="checkbox"/>	<input type="checkbox"/> Hydrant pressure tests	_____
<input type="checkbox"/>	<input type="checkbox"/> Water and aquifer studies	_____
<input type="checkbox"/>	<input type="checkbox"/> Other	_____

**Additional comments**

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**8. Permits applied for / received from other boards, agencies or commissions**

Board/Agency	Action or Conditions
_____	<u>none</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



**AUTHORIZATION (Must be signed by applicant)**

I hereby request that the Town of Sturbridge Planning Board review this application for Site Plan approval, 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 Site Plan Review Regulations of the Planning Board of the Town of Sturbridge.

\_\_\_\_\_  
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.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

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

Name of Representative: \_\_\_\_\_

Address of Representative: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Relationship of representative to owner or applicant: \_\_\_\_\_

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 submitted to the Planning Board 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 submittal meeting with the Town Planner.