



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

Sturbridge Market Realty

Address *PO Box 619*

City *Fiskdale* State *MA* Zip Code *01578*

Telephone No. *508-400-0073*

Email Address *bostmgmt@gmail.com*

2. NAME OF APPLICANT/ AGENT

Into The Grain Axethrowing

Address *89 Breakneck Rd*

City *Sturbridge* State *MA* Zip Code *01566*

Telephone No. *80481 5349*

Email Address *intothe grain axethrowing@gmail.com*

3. MATTERS RELATED TO THE APPLICATION SHOULD BE ADDRES TO (check one or more):

Owner



Applicant/Agent

RECEIVED
DEC 15 2022

TOWN OF STURBRIDGE
PLANNING BOARD

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: 559 Main Street Unit 208 Fiskdale MA

Lot(s): _____ Plan: _____

Assessment Lot Number(s): _____

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: Taqueria

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

9. Project Details

	Total Gross Floor Area		Total Gross Leasable Area		Number of Units	
	Existing	Proposed	Existing	Proposed	Existing	Proposed
Industrial						
Office						
Commercial						
Institutional						
Residential						
Total						

Part C

Project Narrative *Must be completed by applicant or agent*

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

Family Amusement by offering axe throwing as well as a nerf axe option for younger families. We will offer food from the Distillery as well as nonalcoholic to keep family friendly and local beers, wines & spirits. to continue to support other local businesses.

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

Using mills charm by adding wood to existing wall & using wood to make lanes Only painting and wrapping existing structures with wood. Painting wooden ceiling

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

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

N/A

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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other (please list below)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Other:

Business License (will submit after planning board mtg)
 Design Review Permanent Sign Application (submitted)

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	_____
<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

2. Proposed – meets zoning unless noted

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Lot dimensions	_____
<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

3. Grading

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Buffer zones and distances	_____
<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

4. Utilities

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Water lines and connections	_____
<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

5. Landscaping, Lighting and Signs

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Landscaping and calculations	_____
<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

6. Detail Sheets

YES	NO – must give reason below	For Planning Board use
<input type="checkbox"/>	<input type="checkbox"/> Tree planting	_____
<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"/> Fenestration	_____

Additional comments

7. Calculations and Studies unless waived

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

Additional comments

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

Board/Agency	Action or Conditions
<hr/>	<hr/>
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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)

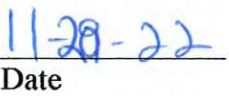
I am the record owner of the property for which this application is being filed and as such, I am familiar with the work proposed to be carried out on my property.

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.