

**For Official Use:**

Date of Receipt: \_\_\_\_\_

Received By: \_\_\_\_\_

File Number: \_\_\_\_\_

Date of Approval: \_\_\_\_\_

Completed: \_\_\_\_\_

Not Completed: \_\_\_\_\_

**Part A. General Information**

1. NAME OF REGISTERED OWNERS Julie & Wayne Zuidema  
Address 114 Lane 10 PO Box 1016  
City Sturbridge State MA Zip Code 01566  
Telephone No. 508-414-1522  
Email Address julieatsouthpond@aol.com

2. NAME OF APPLICANT/ AGENT Robert G. Murphy  
Address 214 Worcester ST.  
City No. Grafton State MA Zip Code 01536  
Telephone No. 508-839-0310  
Email Address rgmenvirom@verizon.net

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

RECEIVED  
JUN 12 2018

ZONING BOARD  
OF APPEALS

**Part B. Details of Application**

5. Location of Subject Property

Municipal Address: # 114 Lane 10

Lot(s): Parcel 114 Plan: \_\_\_\_\_

Assessment Lot Number(s): 393-0616-114

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 House  
with a 12' Right of Way

7. 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	
Type of sewage disposal (i.e. municipal sewage disposal or private septic system)	Septic System	
Type of storm drainage (i.e. sewers, ditches, swales or other means)	Swales	

9. Nature of Relief Requested:

Variance from Article/Section Chapter Nineteen which requires variance from intensity regs. to permit building addition within 20' setback.

Detailed explanation of request:

The owner wishes to build an addition  
to the single family house along

with a wooden deck and access stairs. The new construction will require a side setback variance within the RR Zoning District. Refer to the Site Plan.

10. Evidence to support grant of variance:

Because of the soil, shape or topography conditions described below, which especially affect the land or structure(s) in question, but which do not affect generally the Zoning District in which the land or structure is located, literal enforcement of zoning would cause substantial hardship, financial or otherwise:

The existing structure is located adjacent to a steep slope to the north of the residence. The soil structure is not acceptable for the foundation. The only feasible option is to extend the existing foundation in a westerly direction.

Because of the reasons set forth below, the variance requested can be granted without substantial detriment to the public good:

The existing trees and topography provide a natural buffer zone to the adjacent properties.

Because of the reasons set forth below, the variance requested can be granted without substantial derogation from the intent and purpose of the Zoning Bylaw/Ordinance:

There will be no visual or physical impacts to the abutting lots #112 and #118.

This is due To The nature of the existing Topography and Vegetation.

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

I hereby request that the Town of Sturbridge Zoning Board of Appeals review this application for Variance, 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 Variance submittal requirements of the Town of Sturbridge.

Julie Zudema                      5-26-18  
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.

Julie Zudema                      5-26-18  
Signature of Owner                      Date

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

Name of Representative: Robert G. Murphy  
Address of Representative: 214 Worcester St. Grafton, MA  
Telephone No.: 508-839-0310  
Relationship of representative to owner or applicant: N-A Consultant

Parcel ID	Owner	Owner Address	Owner City	Owner State	Owner Zip	Property Address
598-00616-110	CURBELO RAUL H	110 SOUTH SHORE DRIVE	STURBRIDGE	MA	01566	110 SOUTH SHORE DRIVE
598-00626-055	FACTEAU PAUL	55 SOUTH SHORE DRIVE	STURBRIDGE	MA	01566	55 SOUTH SHORE DRIVE
393-00616-126	GOODWIN F PHILIP	PO BOX 135	WOODVILLE	MA	01784	126 LANE TEN
455-00617-347	HAWKINS SUSAN & REBECCA	11 PLEASANT STREET	BRISTOL	VT	05443	347 NEW BOSTON ROAD
393-00616-118	ILCHUK GRACE C	264 EAST BROADWAY	NEW YORK	NY	10002	118 LANE TEN
455-00627-339	LAVIGNE ERIK	339 NEW BOSTON ROAD	STURBRIDGE	MA	01566	339 NEW BOSTON ROAD
598-00626-051	NEUENSCHWANDER FRED M	51 SOUTH SHORE DRIVE	STURBRIDGE	MA	01566	51 SOUTH SHORE DRIVE
598-00616-059	PINCINCE MARK A	59 SOUTH SHORE DRIVE	STURBRIDGE	MA	01566	59 SOUTH SHORE DRIVE
598-00626-106	RUDE JAMES R	25 HIGHRIDGE ROAD	CROMWELL	CT	06416	106 SOUTH SHORE DRIVE
598-00626-108	SER HOWARD L	108 SOUTH SHORE DRIVE	STURBRIDGE	MA	01566-3005	108 SOUTH SHORE DRIVE
598-00616-112	TASSE MARITA	PO BOX 747	STURBRIDGE	MA	01566	112 SOUTH SHORE DRIVE
598-00626-104	VERSCHURE ROBERT M	104 SOUTH SHORE DRIVE	STURBRIDGE	MI	01566	104 SOUTH SHORE DRIVE
393-00616-120	VIZARD DOUGLAS L TRUSTEE OF THE	PO BOX 441	STURBRIDGE	MA	01566	120 LANE TEN
393-00616-124	VIZARD THOMAS C	PO BOX 441	STURBRIDGE	MA	01566	124 LANE TEN
	BOARD OF ASSESSORS					
	Above persons listed are record owners as they appear on the most recent applicable tax list.					
	Assessors are not responsible for errors or omissions. RE: M.G.L. - Chapter 40A, Section 11					
	Abutters List -					
	RE: 114 LANE TEN					
	Planning/Zoning Board - 300'					
	Certified Copy					
	Assessor:					
	Date:					

*John P. Murphy*

4-5-2018



# TOWN OF STURBRIDGE

Zoning  
~~PLANNING~~ BOARD (4b)

## Permit Application

For Official Use:

Date of Receipt: 6/10/2018  
File Number: \_\_\_\_\_  
Completed: \_\_\_\_\_

Received By: JMB  
Date of Approval: \_\_\_\_\_  
Not Completed: \_\_\_\_\_

Application Type

Special Permit

Site Plan Review

Waiver

Part A General Information

1. NAME OF REGISTERED OWNER Julie E Wayne Zuidema  
Address 114 Lane 10 PO Box 1016  
City Sturbridge State MA Zip Code 01566  
Telephone No. 508-414-1522  
Email Address julieatouthpond@aol.com
2. NAME OF APPLICANT/ AGENT Robert Murphy  
Address 214 Worcester St  
City N. Grafton State MA Zip Code 01536  
Telephone No. 508-826-1859  
Email Address rgmenviron@verizon.net
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

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Lot(s): Par. 114 Plan: \_\_\_\_\_

Assessment Lot Number(s): 393-0616-114

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7. Existing use of Property: Single Family House  
w 12' Right of Way

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	
Type of sewage disposal (i.e. municipal sewage disposal or private septic system)	Septic	
Type of storm drainage (i.e. sewers, ditches, swales or other means)	Swales	

9. Nature of Relief Requested:

Special Permit pursuant to Article/Section 20.05 of the Zoning

Ordinance/Bylaw which authorizes Change in nonconforming use.  
to permit addition To exist. house.

Detailed explanation of request:

Special Permit required To  
enlarge existing house with a  
24' x 20' addition. Project will  
Take 6 months.

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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:

Proposed addition is in line with the existing house on a heavily treed lot. There will be no visual impacts to the local neighborhood.

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

Existing zoning setback is to remain. Proposed structure will not increase the existing non-conformity with respect to the current zoning intensity regulations. The current allowed use of the property is to remain unchanged.

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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.

Julie Zucadema      5-26-18  
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.

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Julie Zucadema      5-26-18  
Signature of Owner      Date

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Name of Representative: Robert G. Murphy  
Address of Representative: 214 Worcester St. Grafton, MA  
Telephone No.: 508-839-0310  
Relationship of representative to owner or applicant: N-A Consultant

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