CITY OF GLOUCESTER

GLOUCESTER, MASSACHUSETTS - 01930

City of Gloucester
Special Council Permit - Application

_____
(Public hearing to be held no later than above date)

In conformance with the requirements of the Zoning Ordinance of the City of Gloucester, the undersigned hereby applies for a Special Council Permit (CC or CCS) in accordance with Section 1.8.3 of the Ordinance and other Sections as listed below:

Type of Permit(Give specific section of Zoning Ordinance)_____

_____

Applicant's Name:_____

Owner's Name_____
(if different from applicant)

Location _____**Map #** _____ **Lot #** ____
(Street Address)

Zoning Classification: _____

- Attached is a list of owners (with complete addresses) of land directly opposite on any public or private street or way, direct abutters, and abutters to the abutters of land within three hundred (300) feet of the property line, as they appear on the most recent City of Gloucester Assessor's Maps and Tax list.
- Attached is a listing of criteria set forth in Section 1.8.3(e) of the Zoning Ordinance, including any supportive material or comments the applicant may wish to include (i.e. ZBA decisions, Order of Conditions, ect.) if necessary.
- Attached are the necessary plans as set forth in Section of 1.8.3(b) of the Zoning Ordinance, which at a minimum consist of an accurate plot plan (to scale) showing existing and/or proposed building or structures.

City of Gloucester - Action

Fee: _____
City Clerk (received): _____
City Council (received): _____
Public Hearing (ordered) _____
Public Hearing (opened) _____
Public Hearing (closed) _____
Final Decision _____
Disposition _____
(Approved, Denied, Approved w/conditions)

Applicant:

_____
Name (Signature)

_____
Address

_____
Telephone

Certified for completeness:
Building Inspector: _____Date:_____

Planning Director: _____Date:_____

Section 1.8.3(e) - (Use additional sheets, if necessary)

1. Social, Economic, or community needs served by the proposal:

2. Traffic flow and safety :

3. Adequacey of utilities and other public services :

4. Neighborhood character and social structure :

5. Qualities of the natural environment :

6. Potential fiscal impact:

The applicant is advised that City staff is available to assist the applicant in preparing the application, including the Inspector of Buildings and City Planner.

Application For Special Permit

The undersigned applicant hereby applies for a special permit under M.G.G., Ch. 40A, § 9 as follows.

1. Applicant (includes equitable owner or purchaser on a purchase and sales agreement):

Name:_____

Address:_____

Tel. #: Days_____ Evenings_____
_____Check here if you are the purchaser on a purchase and sales agreement.

2. Owner, if other than applicant:

Name:_____

Address:_____

Tel. #: Days_____ Evenings_____

3. Property:

Street address:_____

Assessor's map:_____ Lot:_____

Registry of deeds where deed, plan, or both records:

_____

Deed recording: Book_____ Page _____

Plan recording: Plan #_____

Property is location in the _____ zoning district.

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4. Nature of relief requested:

Special permit pursuant to Artical/Section _____ of the

Zoning Ordinance/By-Law which authorizes _____ to permit

_____.

Detailed explanation of request:

_____

_____

_____

_____

_____

_____

5. Evidence to support grant of special permit:

Because of reasons set forth below, the special permit requested will be in harmony with the intent and purpose of the Zoning Ordinance/By-Law:

_____

_____

_____

_____

_____

_____

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

_____

_____

_____

_____

_____

_____

If someone other than owner or equitable owner (purchaser on a purchase and sales agreement) is the Applicant or will represent the Applicant, owner or equitable owner must designate such representative below.

Name of Represenitive:_____

Address of Represenitive:_____

Tel. #: Days_____ Evenings_____

Relationship of representative to owner or equitable owner:

_____

I hereby authorize _____ to represent my interests before the

Special Permit Granting Authority with respect to this Special Permit Application.

(Signed by owner/equitable owner) _____

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I hereby certify under the pains and penalties of perjury that the information contained in this Application is true and complete.

Signature of Applicant	Date	
Signature of Owner, if other than Applicant	Date	
Signature of Equitable Owner Who is filing Application to satisfy condition of Purchase and sales agreement	Date	

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