

# **PLANNING BOARD**

SUBMIT TO: Planning Department 133 William Street Room 303 New Bedford, MA 0274

CITY OF NEW BEDFORD JONATHAN F. MITCHELL, MAYOR

### **SPECIAL PERMIT APPLICATION**

The undersigned, being the plan entitled: NORTHSTAR CHILL		al Permit Approv by: DAVIS SQUARE		epicted on a dated: <sup>07/13/18</sup>
1. Application Informat	ion	•		
Street Address:	Corner of Hyacinth S	t & Rivet St, Ne	ew Bedford, MA	02740
Assessor's Map(s):	30	Lot(s)	235, 233, 231	
Registry of Deeds Book:	247	Page:	205-207	
Zoning District:	RC			
Applicant's Name (printed)	Maria Rosario - Norti	nStar Learning	Centers	
Mailing Address:	53 Linden St	New Bedford	MA	02740
Contact Information:	(Street) 508-991-5907	(City) mı	(State) rosario@northstark	(Zip)
Contact Information,	Telephone Number		Email Address	
Applicant's Relationship to	• •		ildee 🖪 Other -	Prospective Owner
List all submitted materials	(include document title	es & volume nun	nbers where appli	
Application Form Architectural Plans (Site Certified Abutter's List Proof of Ownership Photos of existing site CD with electronic files	Survey, Site Plan, F	loor Plans and	Elevations)	CITY CLERK  CITY CLERKS OF
By signing below, I/we acknowledge. I/we further under grounds for the revocation of Board Members the right to a upon reasonable notice for the	erstand that any false info the approval (s). I/we als ccess the premises (both	ormation intentions of give Planning Date interior and exte	nally provided or o epartment staff a crior) at reasonable	est of my our point and Planning etimes and
07/12/18	/V/auaN	Kasalio		
Date City Hall • 122 William Stree	•	ture of Applican		

City Hall • 133 William Street • Room 303 • New Bedford, MA 02740 • <u>www.newbedford-ma.gov</u> PH: (508)979-1488 • FX: (508)979-1576

#### 2. Zoning Classifications

Present Use of Premises:

VACANT LOT

Proposed Use of Premises:

CHILD CARE FACILITY

Zoning Relief Previously Granted (Variances, Special Permits, with Dates Granted):

NONE

### 3. Briefly Describe the Proposed Project and Specify all Requested Special Permits:

THE PROPOSED PROJECT CONSISTS OF A NEW TWO STORY BUILDING HOUSING A CHILD CARE CENTER
WITH ACCESSORY ADMINISTRATIVE OFFICES AND SUPPORT SPACES. RELATED SITE IMPROVEMENTS WILL INCLUDE
ON SITE PARKING, LOADING AREA AND TRASH ENCLOSURE, WALKWAYS, PLAY SPACES AND PERIMETER FENCING.
THE PROJECT TEAM IS REQUESTING A SPECIAL PERMIT FOR A REDUCTION IN PARKING SPACES. 38 PARKING SPACES TOTAL
ARE REQUIRED PER ZONING ORDINANCE. THE PROJECT PROPOSES TO PROVIDE 19 PARKING SPACES, 19 SPACES LESS THAN
REQUIRED.

### 4. Please complete the following:

	Existing	Allowed/Required	Proposed
Lot Area (sq ft)	32,547.10 SF		
Lot Width (ft)	262'		
Number of Dwelling Units	N/A		0
Total Gross Floor Area (sq ft)	N/A		16,072 SF
Residential Gross Floor Area (sq ft)	N/A		0 SF
Non-Residential Gross Floor Area (sq ft)	N/A		16,072 SF
Building Height (ft)	N/A	60'	35' (25' TO ROOF)
Front Setback (ft)	N/A	4' (av. adjacent)	7' / 8'
Side Setback (ft)	N/A	8'	18.7'
Side Setback (ft)	N/A	12'	121'
Rear Setback (ft)	N/A	none	none
Lot Coverage by Buildings (% of Lot Area)	N/A	40%	26%
Permeable Open Space (% of Lot Area)	32,547.10 SF		40%
Green Space (% of Lot Area)	N/A	35%	40%
Off-Street Parking Spaces	N/A	38	19
Long-Term Bicycle Parking Spaces	N/A	N/A	0
Short-Term Bicycle Parking Spaces	N/A	N/A	8
Loading Bays	N/A	1	1

5. Please complete the following:		Existing	Proposed
a) Number of customers per day:		N/A	N/A
b) Number of employees:		N/A	35
c) Hours of operation:		N/A	6AM-6PM
d) Days of operation:		N/A	M-F
e) Hours of deliveries:		N/A	<u>10A-12P</u>
f) Frequency of deliveries: 🛛 Da	ily     Weekly	□Monthly	Other:
6. OWNERSHIP VERIFICATION			
This section is to be completed & sig	ned by the propert	y owner:	. 3
I hereby authorize the following A	Applicant: Nort	hStar Si	eurning Centers, Unc.
at the following ad	dress: <u>33 L</u>	inden o	Street
to app	ly for <u>Speci</u>	21 pera	nit
on premises loca	red at Corner	of Hyac	nth and Rivet Streets
in current ownership	1.	989	
-	^	Ox 2577	1, Fall River, MA 0272
for which the record title stands in the	0	A 11	olic Bishop of Fall River
whose addr	ess is: P.D.Bo)	(2570 F	all River, MA 02722
by a deed duly recorded in the: Registry of Deeds of		,	17 Page: 205-207
OR Registry District of the Land Court, Co	ertificate No.:	Book:	Page:
I/we acknowledge that all information presi/we further understand that any false info for the revocation of the approval(s). I/we also access the president of the access the president of the control of the president of the pres	rmation intentional also give Planning	ally provided or o Department staf or and exterior) a	omitted is grounds Fand Planning t reasonable times

and upon reasonable notice for the purpose of taking photographs and conducting other visual inspections.

Signature of Land Owner (Fauthorized Trustee, Officer or Agent, so identify)
Edgar M. da Cunha, Bishop of Fall River
By: David T. Gay, Legal Counsel

# Planning Board Special Permit Application Checklist

1. <u>Completed Application Form</u> (with all required signatures; Original plus 15 Copies)

# ✓<sub>2. Plans</sub>

- Four (4) stapled and folded sets of full-sized plans (24" x 36") and Twelve (12) sets of reduced plans (11" x 17") are required for all applications. Staff reserves the right to require additional copies.
- One (1) electronic copy (PDF & CAD) of all proposed activity plans (See Section 10 of Checklist for Requirements)
- All plans oriented so that north arrow points to top of sheet
- Plans shall be drawn at a minimum scale of 1"= 40' or less
- All plans shall be stamped by Commonwealth of Massachusetts-registered Professional Engineer, Professional Land Surveyor, and/or Professional Landscape Architect, as appropriate
- Plan sets shall be comprised of separate sheets as listed below unless otherwise approved by the City Planner
- All plans shall have a title block comprised of the following: Project Title, Sheet Title, Sheet Number; Registrant Stamp (i.e. PE, PLS, LA); Registrant's name and address; Street addresses of the project area parcels; Scale at which the plan is drawn; Plan Issue Date; and all plan revision dates (with corresponding revision descriptions).
- **✓** 3. Certified Abutters List (4 copies)
- 4. **Proof of Ownership** (Deed(s) for All Involved Parcels; 4 Copies)
- 5. Photos Depicting Existing Conditions (Minimum of 3, In Color, 1 Aerial + 2 Other Views; 16 Copies)
- 6. <u>Development Impact Statement (DIS)</u>, completed per §5350 of Zoning Code, (16 Copies), if required by Board
- 7. Traffic Impact & Access Study (TIAS) (16 Copies), if required by Board
- **✓** 8. <u>Electronic PDF and AutoCAD Files</u>
  - Shall consist of a CD with a printed CD Label in a CD case
  - CAD files shall be 2010 format or the latest revision of AutoCAD Civil 3D
  - All project submissions shall include the following file types. All project related Drawing Files shall be provided in all 2 supported formats, listed below.
    - AutoCAD Drawing format (.dwg)
    - Adobe Portable Document Format (.pdf)

- PDF files shall be created from within the AutoCAD environment and contain Layer information.
- It is a requirement that each project drawing/sheet created for a project shall be published/plotted to DWG and PDF, and placed in the appropriate folder in the CD submission. All external references (DWG, DWF, DGN, PDF, TIFF, MrSID, JPG, etc.) which are used in support of the creation of these project sheets shall be stored within the XREF folder only (Subfolder of DWG) on the CD. Also the AutoCAD support files (fonts, plot style, etc.) should be supplied on the CD.

#### File Naming:

The following file naming standard for all CAD related files created, used, or submitted to the Planning Department shall be followed. This applies to all CAD drawings, DWF's, PDF's used in support of, or used in conjunction with this CAD Standard.

File names shall begin with their project Planning Board Case number assigned (available through the Planning Department), followed by an underscore and the appropriate discipline code. In the instance where there is more than one file, assign an appropriate sequential number to the end (ex. 1,2,3). Special characters are not permitted except for the following; hyphens [ - ], underscores [ \_ ], and/or parenthesis [ ( ) ].

#### Example 1.

A set of engineering design plans and documents were prepared for project file number 12-34; acceptable filenames would be as follows:

12-34\_Existing Conditions1.dwg

12-34\_Exisitng Conditions2.dwg

12-34\_General1.dwg

12-34\_Generale.dwg

<b>V</b>	9. Application Fee (All fees are due at time of application submission)
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## Special Permit Application fee \$600

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For the Planning Board,	this application has been	received by the	Planning Division	of the Department of
	mmunity Development o			<u>*</u>

Review date:	All materials submitted:	Yes	No	
Signature:	Fee			

### **NOTICE BY PUBLICATION & ABUTTERS NOTIFICATION**

(Follow Massachusetts General Laws, Chapter 40A, Section 5)

- 1) The applicant shall be responsible for paying for the legal advertisements in the New Bedford Standard-Times once in each of two (2) successive weeks, the first publication to be not less than fourteen (14) days prior to the date of said hearing. This cost is included in the Application Fee. The City of New Bedford Planning Division shall be responsible for placing the legal ad in the New Bedford Standard-Times.
- 2) The applicant shall be responsible for certifying the abutters list and mailing, by Certified Mail, with Return Receipt Requested, a copy of the notice to each affected abutter.
- 3) A Legal Advertisement will be drafted by Planning Staff, including the date, time and location of the public hearing, and provided to the Applicant upon submittal of a complete application. This Legal Advertisement may not be altered or amended by the Applicant prior to use in notifying Abutters.