



CITY OF NEW BEDFORD  
JONATHAN F. MITCHELL, MAYOR

## PLANNING BOARD

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

### SPECIAL PERMIT APPLICATION

The undersigned, being the Applicant, seeks Special Permit Approval for property depicted on a plan entitled: CHAN BUILDING ALTERATIONS by: M WALKER ARCHITECT dated: 4/11/2018

#### 1. Application Information

Street Address: 500 HORSENECK RD 804-812 Brock Ave  
Assessor's Map(s): 14 Lot(s) 232  
Registry of Deeds Book: 4715 Page: 114  
Zoning District: MUB  
Applicant's Name (printed): MICHAEL WALKER ARCHITECT  
Mailing Address: 500 HORSENECK RD DARTMOUTH MA 02748  
(Street) (City) (State) (Zip)  
Contact Information: 508-287-4313 mwdb@comcast.net  
Telephone Number Email Address

Applicant's Relationship to Property: ☐ Owner ☒ Contract Vendee ☐ Other \_\_\_\_\_

List all submitted materials (include document titles & volume numbers where applicable) below:

SPECIAL PERMIT APPLICATION ABUTTER'S LIST. Owner's verification  
DEED. P.B. SPEC PERMIT CHECKLIST. PHOTOS OF EXISTING CONDITIONS  
CAD FILE.

4 FULL SIZE PLANS 1 OF 1 12 11X17

By signing below, I/we acknowledge that all information presented herein is true to the best of my/our knowledge. I/we further understand that any false information intentionally provided or omitted is grounds for the revocation of the approval (s). I/we also give Planning Department staff and Planning Board Members the right to access the premises (both interior and exterior) at reasonable times and upon reasonable notice for the purpose of taking photographs and conducting other visual inspections.

4/12/2018  
Date

Michael Walker  
Signature of Applicant

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

## 2. Zoning Classifications

Present Use of Premises: RESIDENTIAL / COMMERCIAL

Proposed Use of Premises: SAME

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

N/A

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

CONSTRUCT 2 APARTMENTS IN FORMER VACANT COMMERCIAL SPACE

## 4. Please complete the following:

	Existing	Allowed/Required	Proposed
Lot Area (sq ft)	4202	15,000	N/C
Lot Width (ft)	61		N/C
Number of Dwelling Units <u>2 or 6?</u>	4	4 existing	6
Total Gross Floor Area (sq ft)			
Residential Gross Floor Area (sq ft)	9302 SF	—	N/C
Non-Residential Gross Floor Area (sq ft)	5100 SF	—	7219 ±
Building Height (ft)	3 stories	4	3
Front Setback (ft)	0	0	N/C
Side Setback (ft) (L)	0	0	N/C
Side Setback (ft) (R)	12'	10'	N/C
Rear Setback (ft)	12.6	20'	N/C
Lot Coverage by Buildings (% of Lot Area)	82%	40%	82%
Permeable Open Space (% of Lot Area)	0	0	PRE-EXIST
Green Space (% of Lot Area)	0	0	PRE-EXIST
Off-Street Parking Spaces	0	0	2
Long-Term Bicycle Parking Spaces	N/A	0	0
Short-Term Bicycle Parking Spaces	N/A	0	0
Loading Bays	NR	0	0



5. Please complete the following: **CHINESE TAKE-OUT**
- |                                 | Existing  | Proposed |
|---------------------------------|---|----------|
| a) Number of customers per day: | _____   | _____    |
| b) Number of employees:         | 1   | 1        |
| c) Hours of operation:          | 11am → 10pm   | EXISTING |
| d) Days of operation:           | 7 days  | 1        |
| e) Hours of deliveries:         | none  | none     |
| f) Frequency of deliveries:     | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____ |          |

## 6. OWNERSHIP VERIFICATION

This section is to be completed & signed by the property owner:

I hereby authorize the following Applicant: \_\_\_\_\_

at the following address: \_\_\_\_\_

to apply for: \_\_\_\_\_

on premises located at: \_\_\_\_\_

in current ownership since: \_\_\_\_\_

whose address is: \_\_\_\_\_

for which the record title stands in the name of: \_\_\_\_\_

whose address is: \_\_\_\_\_

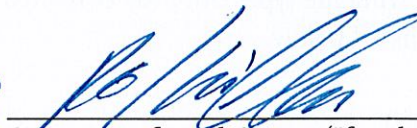
by a deed duly recorded in the:

Registry of Deeds of County: \_\_\_\_\_ Book: \_\_\_\_\_ Page: \_\_\_\_\_

OR Registry District of the Land Court, Certificate No.: \_\_\_\_\_ Book: \_\_\_\_\_ Page: \_\_\_\_\_

I/we acknowledge that all information presented herein is true to the best of my/our knowledge. I/we further understand that any false information intentionally provided or omitted is grounds for the revocation of the approval(s). I/we also give Planning Department staff and Planning Board Members the right to access the premises (both interior and exterior) at reasonable times and upon reasonable notice for the purpose of taking photographs and conducting other visual inspections.

4/12/2018  
Date

  
Signature of Land Owner (If authorized Trustee, Officer or Agent, so identify)

# Planning Board Special Permit Application Checklist

☒ 1. Completed Application Form (with all required signatures; Original plus 15 Copies)

☒ 2. Plans

- 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. Development Impact Statement (DIS), 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. Electronic PDF and AutoCAD Files

- 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\_Existing Conditions2.dwg

12-34\_General1.dwg

12-34\_General2.dwg

☒ **9. Application Fee** (All fees are due at time of application submission)

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**Official Use Only:**

For the Planning Board, this application has been received by the Planning Division of the Department of Planning, Housing & Community Development on the date specified below:

Review date: \_\_\_\_\_ All materials submitted: Yes No

Signature: \_\_\_\_\_ Fee \_\_\_\_\_





**MICHAEL WALKER DESIGN/BUILDER, LLC**

500 Horseneck Road  
South Dartmouth, MA 02748  
Tel: (508) 287-4313 Fax: (508) 300-6051  
e-mail: mwdb@comcast.net  
michaelwalkerarchitect.com

Michael Walker, A.I.A.

Wednesday, April 11, 2018

Re: 804-812 Brock Avenue, New Bedford (Map 14, Lot 232, Book 4715, page 114)


To whom it may concern

Po Yam Chan owner of the property located at 804-812 Brock Avenue, New Bedford (Map 14, Lot 232, Book 4715, page 114) authorizes Michael Walker Architect, to apply for the necessary permits for the above property located at 804-812 Brock Avenue.

Thank you.  
Sincerely,

Michael Walker Design Builder, LLC

Michael Walker  
Manager

  
\_\_\_\_\_  
Po Yam Chan

4/12/2018

  
\_\_\_\_\_  
Po Kin Chan





*City of New Bedford*  
**REQUEST for a CERTIFIED ABUTTERS LIST**

2018 APR 13 A 11:52  
CITY CLERK

This information is needed so that an official abutters list as required by MA General Law may be created and used in notifying abutters. You, as applicant, are responsible for picking up and paying for the certified abutters list from the assessor's office (city hall, room #109).

SUBJECT PROPERTY			
MAP #	14	LOT(S)#	232
ADDRESS: 804 BROCK AVE.			
OWNER INFORMATION			
NAME: PO YAM CHAN			
MAILING ADDRESS: 8 WHITELOCK ST., NEW BEDFORD 02745			
APPLICANT/CONTACT PERSON INFORMATION			
NAME (IF DIFFERENT): MICHAEL WALKER ARCHITECT			
MAILING ADDRESS (IF DIFFERENT): 500 HORSENECK, DARTMOUTH, 02748			
TELEPHONE #	508 287 4313		
EMAIL ADDRESS:	mwdb@comcast.net		
REASON FOR THIS REQUEST: Check appropriate			
<input checked="" type="checkbox"/>	ZONING BOARD OF APPEALS APPLICATION		
<input checked="" type="checkbox"/>	PLANNING BOARD APPLICATION		
<input type="checkbox"/>	CONSERVATION COMMISSION APPLICATION		
<input type="checkbox"/>	LICENSING BOARD APPLICATION		
<input type="checkbox"/>	OTHER (Please explain):		

Once obtained, the Certified List of Abutters must be attached to this Certification Letter.

Submit this form to the Planning Division Room 303 in City Hall, 133 William Street. You, as applicant, are responsible for picking up and paying for the certified abutters list from the assessor's office (city hall, room #109).

**Official Use Only:**

As Administrative Assistant to the City of New Bedford's Board of Assessors, I do hereby certify that the names and addresses as identified on the attached "abutters list" are duly recorded and appear on the most recent tax.

Carlos Amado

Printed Name

*Carlos Amado*

Signature

3/19/2018

Date

PLANNING  
MAR 12 2018  
DEPARTMENT





March 15, 2018

Dear Applicant,

Please find below the List of Abutters within 300 feet of the property known as 804 Brock Avenue (14-232). The current ownership listed herein must be checked and verified by the City of New Bedford Assessor's Office. Following said verification, the list shall be considered a Certified List of Abutters.

Please note that multiple listed properties with identical owner name and mailing address shall be considered duplicates, and shall require only 1 mailing. Additionally, City of New Bedford-Owned properties shall not require mailed notice.

Parcel	Location	Owner and Mailing Address
14-259	59 ELLEN ST	LAJOIE MICHAEL P, 28 WATERFALL ROAD ACUSHNET, MA 02743
13-125	799 BROCK AVE	AMARAL ARTHUR, 107 AMOURA AVENUE VENICE, FL 34285
14-179	53 ELLEN ST	MEGGISON PETER F, MEGGISON THOMAS J- <i>Joshua L. Santiago</i> <del>18 SLADES FARM LANE</del> <i>53 Ellen St.</i> <del>SOUTH DARTMOUTH, MA 02748</del> <i>New Bedford, MA 02744</i>
13-119	823 BROCK AVE	OBRIAN STEPHEN E, 823 BROCK AVE NEW BEDFORD, MA 02744
14-178 <i>SS</i>	ELLEN ST	INTER-CHURCH COUNCIL ELDERLY HOUSING INC, 412 COUNTY ST NEW BEDFORD, MA 02740
13-138	805 BROCK AVE	FURTADO SIMON, 805 BROCK AVENUE NEW BEDFORD, MA 02744
14-38 <i>ES</i>	BROCK AVE	INTER-CHURCH COUNCIL ELDERLY HOUSING INC, 412 COUNTY ST NEW BEDFORD, MA 02740
14-188	790 BROCK AVE	INTERCHURCH COUNCIL ELDERLY, HOUSING INC 790 BROCK AVENUE NEW BEDFORD, MA 02744
14-232 <i>-812</i>	804 BROCK AVE	CHAN PO KIN, CHAN PO YAM 8 WHITELOCK STREET NEW BEDFORD, MA 02745
14-26 <i>-828</i>	826 BROCK AVE	LAJOIE MICHAEL P, 28 WATERFALL ROAD ACUSHNET, MA 02743
14-139	57 ELLEN ST	MENARD RICHELLE, DESPRES MARK J <i>Juan Ayala</i> <del>57 ELLEN STREET</del> <i>107 Osborn St.</i> <del>NEW BEDFORD, MA 02744</del> <i>02740</i>
13-129	791 BROCK AVE	HEARN JOHN P III, HEARN KEVIN D 373 FOXCROFT DRIVE IVYLAND, PA 18974
14-140	50 ELLEN ST	MONIZ JOAO P, MONIZ CECILIA B 50 ELLEN STREET NEW BEDFORD, MA 02744







