

City of New Bedford REQUEST FOR WAIVER

CASE #: 18-02

APPLICATION FOR WAIVER FROM SITE PLAN REVIEW REQUIREMENTS

In certain instances, after consulting with the City Planner, the applicant may submit, in writing, a request for waiver for any of the submittal or technical requirements of Section 5430 and 5440 where the project involves relatively simple development plans. The Planning Board will take a separate vote on written waiver requests by the applicant. Each request for waiver must be submitted individually to be considered by the Board. Please provide one (1) original and fifteen (15) copies of the request.

Any granted waivers must be disclosed on the final submitted and approved site plan.

ASSESSOR'S MAP PLOT# 133 LOT(S)# 21 & Portion of 12 REGISTRY OF DEEDS BOOK: 4788 PAGE # 287 PROPERTY ADDRESS: 127 Duchaine Boulevard, New Bedford, MA 02745 ZONING DISTRICT: Industrial C OWNER INFORMATION NAME: Milhench 2001 Nominee Trust MAILING ADDRESS: 127 Milhench 2001 Nominee Trust APPLICANT'CONTACT PERSON INFORMATION NAME (IF DIFFERENT): APPLICANT'S RELATIONSHIP TO THE PROPERTY: OWNER CONTRACT VENDEE Describe MAILING ADDRESS (IF DIFFERENT): MAILING ADDRESS (IF DIFFERENT): TELEPHONE # 508-995-8331 EMAIL ADDRESS: heike@milhench.com Ay signing below, I/we acknowledge that all information presented herein is true to the best of my/our knowledge. I/we urther understand that any false information intentionally provided or omitted is grounds for the revocation of the piproval(S). If petition is granted, I/we understand that any false information intentionally provided or to the plans submitted, unless the Board tates otherwise and that if granted, that the walver(s) must be noted on the approved Site Plan and acted upon within one ear. Signature of Applicant/s Date									
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			Signature o	f Applican	t/s		Da	te	

If the applicant differs from the owner, this section must be completed/signed by the property owner/s:

I hereby authorize the applicant represented above and throughout this application to apply and to represent my/our interests on my/our behalf for the relief requested herein for the premises I/we own noted as "property address" above and presented throughout this application. Furthermore, by signing this application I/we acknowledge having read and understood this application and the accompanying instructions and information. If petition is granted, I/we understand the approvals are specific to the plans submitted, unless the Board states otherwise and that if granted, that the waiver(s) must be noted on the approved Sige Plan and acted upon within one year.

Signature of Owner/s

12/137/17
Date

		Ordinance Section	CLEARLY Describe why this request is being made.
		Example	***Example***
	1	5451. b. Topography and Drainage Plan	There currently exists a structure and pavement on the site. No excavation of the site is being proposed, therefore topography and drainage will not be altered.
NOI	2	5350 & 5455 Development Impact Study	The proposed work is minimal compared to the development already done on site, and similar businesses surround the property which operate at the same hours.
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DESCRIPTION	3		
	4		

Additional pages describing the waiver request may be attached to this form following the same chart format, if necessary.

	Please check here if additional pages are attached.					
1	Number of Waiver requests submitted for consideration					