



City of New Bedford
ZBA SPECIAL PERMIT APPLICATION

CASE #4260

1. SUBMITTAL CHECKLIST

The following documentation must be submitted, in duplicate (1 Original and 11 Copies):

Have you included...			Planning staff review finds...	
Yes	No		Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A <u>Completed and Signed Application</u>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	An <u>Existing Conditions Site Plan</u> , drawn to a scale not less than 1 inch: 40 feet, identifying positioning of existing structures must be provided. Your site plan must show footprint and dimensions of rear, front and side distances between structure(s) and boundary lines.	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A <u>Proposed Site Plan</u> showing all proposed alterations or additions with side, front and rear set property lines identified.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Sub-Division Plans</u> if Applicable.	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	A <u>Certified Abutter's List</u> prepared by planning staff and certified by the Assessor's Office.	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Plot Plan</u> as provided through Department of Inspectional Services or through the Assessor's Office (in person or online through parcel lookup).	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Filing Fee</u> in check form made payable to the City of New Bedford.	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Copy of <u>Building Permit Rejection Packet</u> (Containing Rejected Building Permit and all information submitted with Building Permit Application)	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Owner's Verification</u> including owner's signature and parcel deed for all involved parcels.	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Development Impact Statement (DIS)</u> , if required (per Chapter 9 section 5350 of the City of New Bedford Zoning Code)	<input type="checkbox"/>	<input type="checkbox"/>

Official Use Only:

Review of submittal compliance performed by _____ of the city's Division of Planning.

Staff review found the application packet to be complete incomplete on this date: _____.

This is page 1 of your ZBA Application.

Please remove the instruction pages when submitting your completed application packet but keep this as your first page.

APPLICATION SPECIFICS

DIMENSIONS OF LOT/S:	FRONTAGE 42.45'	DEPTH 80'	AREA in SQ FT 3,397		
EXISTING BUILDING/S	# OF BLDGS 1	EXISTING SIZE 34'x29'	TOTAL SQ FT BY FLOOR 972	NUMBER OF FLOORS 1	TOTAL SQ. FT ENTIRE STRUCTURE 972
	# OF DWELLING UNITS 0		# OF BEDROOMS 0		
PROPOSED BUILDING/S	# OF BLDGS	PROPOSED SIZE	TOTAL SQ FT BY FLOOR	NUMBER OF FLOORS	TOTAL SQ. FT ENTIRE STRUCTURE
	# OF DWELLING UNITS		# OF BEDROOMS		EXTENT OF PROPOSED ALTERATIONS
EXISTING USE OF PREMISES:	Chiropractic office				
PROPOSED USE OF PREMISES:	Massage therapy, accupuncture or Physical therapy.				
EXPLAIN WHAT MODIFICATIONS YOU ARE PROPOSING THAT NECESSITATE THE REQUESTED SPECIAL PERMIT:	Use of building for licensed massage therapy, licensed accupuncturist or licensed physical therapist to compliment the current chipopractic use.				

If there's a commercial use existing and/or proposed, please complete the following:

	EXISTING	PROPOSED
NUMBER OF CUSTOMERS PER DAY	15-20	Same
NUMBER OF EMPLOYEES	1-2	
HOURS OF OPERATION	9-6 9-4	
DAYS OF OPERATION	Mon-Friday, Saturday	
HOURS OF DELIVERIES		
FREQUENCY OF DELIVERIES (Check frequency)	<input type="checkbox"/> DAILY <input type="checkbox"/> WEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> OTHER	<input type="checkbox"/> DAILY <input type="checkbox"/> WEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> OTHER

If you are also requesting site plan review and special permit/s from the planning board, please specify here:

4. REQUIRED FINDINGS FOR GRANTING A SPECIAL PERMIT

City of New Bedford Code of Ordinances Chapter 9 Section 5320 requires the ZBA to find the benefit to the City and the neighborhood outweighs the adverse effects of the proposed use, taking into account the characteristics of the site and of the proposal in relation to that site.

This determination includes consideration of each of the following:

A

Social, economic, or community needs which are served by the proposal

B

Traffic flow and safety, including parking and loading

C

Adequacy of utilities and other public services

D

Neighborhood character and social structures

E

Impacts on the natural environment

F

Potential fiscal impact, including impact on City services, tax base, and employment

The full text of New Bedford Code of Ordinances can be accessed from: www.newbedford-ma.gov

Because the ZBA must be able to articulate their findings on each of the items listed above in order to grant a special permit, you must make your case as to HOW your application affects each of the criteria for consideration. ***This is an extremely important question and it is recommended that you answer this VERY carefully.*** You may use an additional sheet if needed.

A Describe any social, economic, or community needs which are served by your proposal:

Our office will provide Chiropractic/massage services to the surrounding area as there are no other such office in the area.

B Describe how traffic flow and safety, including parking and loading, are addressed in your proposal:

Traffic flow and safety will not be affected because we will be on alternating schedules (Chiropractic + Massage therapist), and there is off street parking (5 spaces) and plenty of on street parking.

C Describe the utilities and other public services necessary for your proposal, and explain how these are adequately available for your proposal:

The property is serviced by all required utilities both private + public including water and sewer.

D Describe the neighborhood character and social structures surrounding your proposed location, and how your proposal will fit in this area:

Mt. Pleasant Street is lined with numerous small and larger businesses and I believe our office and its services will fit right in while also addressing a need there.

E Describe any impacts on the natural environments your proposal may have:

There will be no impact on the natural environments as there will be no changes to the exterior or its surroundings.

F Describe any potential fiscal impact, including impact on City services, tax base, and employment your proposal may have:

There will be no negative impact on city services and such as I have relocated a chiropractic business that over 8 years, never had any of these issues at prior location.

* Please review the section(s) of the zoning ordinance under which your Special Permit request is made, there may be additional criteria required for your request.

Describe how your proposal meets any additional criteria required under zoning ordinance:

N/A



City of New Bedford
REQUEST for a CERTIFIED ABUTTERS LIST

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 #	123A	LOT(S)#	81
ADDRESS:	811 Mt Pleasant St. New Bedford, MA 02745		
OWNER INFORMATION			
NAME:	Arthur J. Hardy, Arthur J. Hardy Jr Trustee		
MAILING ADDRESS:			
APPLICANT/CONTACT PERSON INFORMATION			
NAME (IF DIFFERENT):	David Costa		
MAILING ADDRESS (IF DIFFERENT):	157 Gammons Rd. Acushnet, MA 02743		
TELEPHONE #	(508) 951-7101		
EMAIL ADDRESS:	Dcosta14@hotmail.com		
REASON FOR THIS REQUEST: <i>Check appropriate</i>			
<input checked="" type="checkbox"/>	ZONING BOARD OF APPEALS APPLICATION		
<input type="checkbox"/>	PLANNING BOARD APPLICATION		
<input type="checkbox"/>	CONSERVATION COMMISSION APPLICATION		
<input type="checkbox"/>	LICENSING BOARD APPLICATION		
<input type="checkbox"/>	OTHER (Please explain):		

PLANNING
 JUN 07 2016
 DEPARTMENT

CITY CLERKS OFFICE
 NEW BEDFORD, MA
 2016 JUN 15 PM 2:55
 2016 NOV 17 PM 5:11

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

This sheet is NOT part of your ZBA application but you will need to 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

4/2/2016

Printed Name

Signature

Date

June 7, 2016

Dear Applicant,

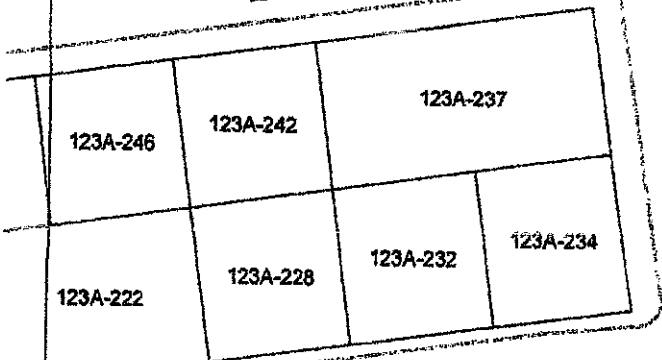
Please find below the List of Abutters within 300 feet of the property known as 881 Mt. Pleasant Street (123A-81). The current ownership listed herein must be checked and verified by the City of New Bedford Assessor's Office. Following said verification, the list shall be considered a Certified List 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.

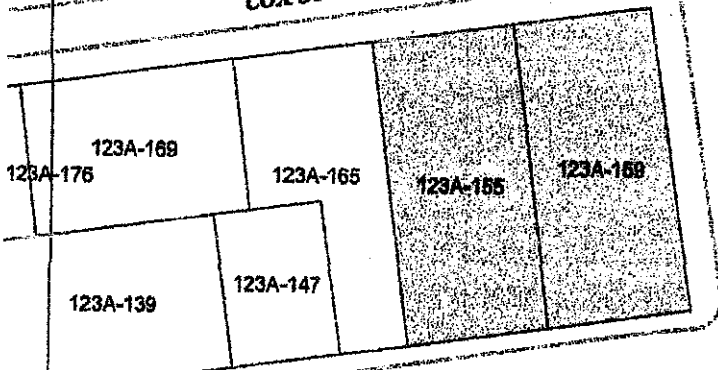
Parcel	Location	Owner and Mailing Address
123A-80 <i>WS</i>	MT PLEASANT ST	SEPPALA JOSEPHINE, C/O JEANNE FABIAN + <i>John F. Fabian</i> 70 NESTLE'S LANE ACUSHNET, MA 02743
123A-81	811 MT PLEASANT ST	HARDY ARTHUR J JR "TRUSTEE", HARDY NORMA M "TRUSTEE" 811 MOUNT PLEASANT STREET NEW BEDFORD, MA 02745
123A-72	217 DOWNEY ST	LAPINTE MELANIE D, 217 DOWNEY ST NEW BEDFORD, MA 02745
123-81 <i>ES</i>	MT PLEASANT ST	CITY OF NEW BEDFORD, AIRPORT COMMISSION 131 WILLIAM ST NEW BEDFORD, MA 02740
123A-79	801 MT PLEASANT ST	SEPPALA JOSEPHINE, C/O JEANNE FABIAN + <i>John F. Fabian</i> 90 NESTLE'S LANE ACUSHNET, MA 02743
123A-159	831 MT PLEASANT ST <i>833</i>	DAVID ANTHONY J, 1172 OLD PLAINVILLE ROAD NEW BEDFORD, MA 02745
123-79	822 MT PLEASANT ST	822 MT PLEASANT STREET LLC, 12 BLUE HERON LANE EASTON, MA 02334
123-87	796 MT PLEASANT ST	BABBITT STEAM, SPECIALTY CO P O BOX 51208 NEW BEDFORD, MA 02745
123A-155	19 HASKELL ST	VALENTINE MARY C, 19 HASKELL STREET NEW BEDFORD, MA 02745
123A-78	797 MT PLEASANT ST	RODRIGUES JOHN P, 1042 BEVERLY STREET NEW BEDFORD, MA 02745
123A-82	220 HASKELL ST	ANDRADE ROBERT, 220 HASKELL NEW BEDFORD, MA 02745
123A-88	224 HASKELL ST	ALMEIDA GABRIEL P, ALMEIDA CARMASITA 224 HASKELL STREET NEW BEDFORD, MA 02745

123A-300 123A-304 123A-305 123A-308 1-312

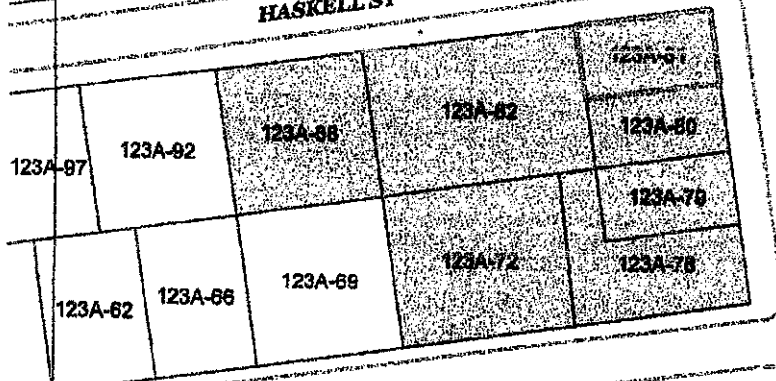
HAMMOND ST



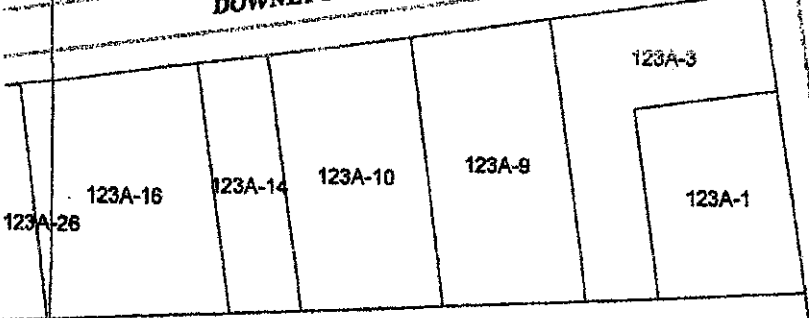
COX ST



HASKELL ST



DOWNEY ST



Legend

123A-81

City Border



123-14

123-93

ALFRED M BESSETTE MEMORIAL HWY

123-78

123-95

123-81

123-87

123-88

123-86

3. PARCEL LEGAL DOCUMENTATION

Title Reference to Property

Deed

(Attach copy of Deed, Certificate of Title & most recent Recorded Plans showing affected lot or lots)

Is the applicant also the owner? Yes No

If no, please attach the following three items to your application and indicate they are attached:

A notarized authorization letter on letterhead from the owner to tenant/buyer for application of this permit.

If the Applicant is Not the Owner, Provide:

A copy of the Purchase & Sale Agreement or lease, where applicable.

A copy of the deed or deeds of abutting parcels if said parcels have been held in common ownership with the subject property at any time since January 1, 1976.

MASSACHUSETTS EXCISE TAX
Bristol ROD South 001
Date: 08/24/2016 03:29 PM
Ctrl# 0200403714 Doc# 00020244
Fee: \$752.40 Cons: \$165,000.00



Bk: 11797 Pg: 237 Pg: 1 of 3 BS
Doc: DEED 08/24/2016 03:29 PM

QUITCLAIM DEED

We, ARTHUR J. HARDY, JR. and NORMA M. HARDY, Trustees of the HARDY FAMILY NOMINEE TRUST, under Declaration of Nominee Trust dated February 8, 2002, and recorded at the Bristol County (S.D.) Registry of Deeds in Book 5417, Page 301, of 811 Mt. Pleasant Street, New Bedford, Massachusetts 02745

for consideration paid, and in full consideration of One Hundred Sixty-Five Thousand Dollars (\$165,000.00)

grant to MARIA PEREIRA COSTA, TRUSTEE of The 811 MT. PLEASANT STREET REAL ESTATE TRUST, under Trust Agreement dated August 11, 2016, and recorded at the Bristol County (S.D.) Registry of Deeds in Book *11797*, Page *218*, of 157 Gammons Road, Acushnet, Massachusetts 02743

with QUITCLAIM COVENANTS

the land, with any building(s) thereon, located on the Westerly side of Mt. Pleasant Street in New Bedford, Bristol County, Massachusetts, more particularly bounded and described as follows:

BEGINNING at the Northeasterly corner thereof at the point of the intersection of the Westerly line of Mt. Pleasant Street and the Southerly line of Haskell Street;
Thence Southerly in the Westerly line of Mt. Pleasant Street, Forty-two and 45/100 (42.45) feet to Lot 57 on the plan hereinafter mentioned;
Thence Westerly in line of last named lot, Eighty and 00/100 (80) feet to Lot 139 on said plan;
Thence Northerly in line of last named lot, Forty-two and 45/100 (42.45) feet to the southerly line of Haskell Street; and
Thence Easterly in the Southerly line of Haskell Street, Eighty and 00/100 (80) feet to the point of beginning.
CONTAINING three thousand, three hundred ninety-six (3,396) square feet, more or less, and being Lot 56 on the plan entitled "Plan of Nash Villa", recorded at the Bristol County (S.D.) Registry of Deeds in Plan Book 11, Page 42.

Property Address: 811 Mt. Pleasant Street, New Bedford, Massachusetts 02745.

The grantors herein hereby release any and all homestead rights that they may have in the above-described property and certify that no other person is entitled to claim the benefit of an existing estate of homestead.

Being the same premises described in a deed to the grantors herein dated February 8, 2002, and recorded at the Bristol County (S.D.) Registry of Deeds in Book 5417, Page 306.

Grantor & property

WITNESS our hands and seals this 24th day of August, 2016.

HARDY FAMILY NOMINEE TRUST

[Signature]
Witness

Arthur J. Hardy Jr.
By: ARTHUR J. HARDY, JR., Trustee

[Signature]
Witness

Norma M. Hardy
By: NORMA M. HARDY

COMMONWEALTH OF MASSACHUSETTS

BRISTOL, ss.

August 24, 2016

Then personally appeared the above-named ARTHUR J. HARDY, JR. and NORMA M. HARDY, duly authorized Trustees as aforesaid, who proved to me through satisfactory evidence of identification which was

MA Drivers licenses to be the persons whose names are signed on this document, and acknowledged to me that they signed it voluntarily for its stated purpose before me,

[Signature]
John E. Williams, Notary Public
My commission expires: 3/11/2022

