



ZONING BOARD OF APPEALS

CITY OF NEW BEDFORD
JONATHAN F. MITCHELL, MAYOR

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

Appeal Nr. 4208

Petition for a **Special Permit**

Date: _____

The undersigned petitions the Board of Appeals to grant a Special Permit in the manner and for the reasons hereinafter set forth under the provisions of the Zoning Ordinance to the following described premises:

1. Application Information

Street Address: 15 Irvington Ct NB 02745

Assessor's Map(s): 110 Lot(s) 370

Registry of Deeds Book: BK 11406 Page: 50

Zoning District: _____

Applicant's Name (printed): Mercedes Nogueira

Mailing Address: 15 Irvington Ct. NB 02745
(Street) (City) (State) MA (Zip)

Contact Information: 508-989-3829 cvc red tiger lady@gmail.com
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:

	CITY CLERK 20 SEP -4 P 2:31 CITY CLERKS OFFICE NEW BEDFORD, MA
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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 Division staff and Zoning 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.

8/26/15
Date

Mercedes Nogueira
Signature of Applicant

2. Dimensions of Lot(s) 38.45 104 Area 3973
Frontage Depth Sq. Ft.

3. Number of buildings on lot 1 house 1 Garage 38x25

4. Size of existing buildings 48x45

5. Size of proposed buildings same

6. Present use of premises Funeral home

7. Proposed use of Premises double 2 Family

8. Extent of proposed alterations Interior bathroom / Kitchen

9. Existing number of dwelling units & bedrooms 1 Commercial Proposed 2 Bdrms each
2 unit Residential

10. For commercial uses, please complete the following:

	Existing	Proposed
a) Number of customers per day:	_____	_____
b) Number of employees:	_____	_____
c) Hours of operation:	_____	_____
d) Days of operation:	_____	_____
e) Hours of deliveries:	_____	_____
f) Frequency of deliveries: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____		

11. Planning Board Site Plan Review and Special Permits:
_____ The applicant is also requesting Site Plan Review and Special Permit(s) from the Planning Board. If so, specify below:
No

12. Have plans been submitted to the Department of Inspectional Services? yes

13. Has the Department of Inspectional Services refused to issue a permit? yes

14. Provisions of the Zoning Ordinance under which a petition for a Special Permit is made
2400 Nonconforming uses and Structure
2410 - Applicability, 2430 Nonconforming Structures
Other than Single- and Two-Family Structures.
5300-5330 & 5360-5390 - Special Permit

15. Explain the need for the Special Permit and what modifications are proposed
Kitchen / Bathroom (tub only)

Not increasing or extending measurements
of the property. From Commercial to
Residential. 2 Family. Remodel bathroom
adding tub only and adding kitchen. Housing
purposes for my self and my daughter. 4 parking garage.
all wired/water and sewerage provided/available.

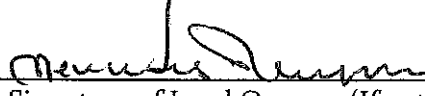
16. Verification of Ownership. By signing this application the petitioner is stating that they have read and understand this application and the accompanying instructions and information. If petition is granted, the approvals are specific to the plans submitted, unless the Board states otherwise. Also, if granted, that the Special Permit must be recorded and acted upon within one year.

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

I hereby authorize the following Applicant: Mercedes Noguera
at the following address: 15 Irvington Court ^{NB} 02745.
to apply for: special permit.
on premises located at: 15 Irvington Ct NB 02745
in current ownership since: June 2015.
whose address is: same.
for which the record title stands in the name of: Mercedes.
whose address is: same.

by a deed duly recorded in the:
Registry of Deeds of County: Bristol Book: 11406 Page: 50.
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.

8/26/15 . 
Date Signature of Land Owner (If authorized Trustee, Officer or Agent, so identify)

APPENDIX

- (1) Owner's/Landlord's Name Mercedes Nogueira
- (2) Title Reference to Property Deed

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

- (3) If the Applicant is Not the Owner, Provide:
1. Notarized authorization letter from owner to tenant or buyer for application for this permit, on letterhead.
 2. Copy of Purchase & Sale Agreement or lease, where applicable.
 3. 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.

REQUEST FOR CERTIFIED LIST OF ABUTTERS

Attach the Certified List of Abutters to this Certification Letter and Submit all

The applicant shall complete the request form below, and submit to Planning Department, City Hall, 133 William Street, Room 303, so that a list may be created for use by the applicant.

CITY CLERK
2015 SEP - 4 P 2:32
CITY OF ENRS OFFICE
NEW BEDFORD, MA

I, Carla Almeida, Administrative Assistant to the Board of Assessors of the City of New Bedford, 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.

Date: 8/26/2015

SUBJECT PROPERTY:

MAP 110 LOT 370
LOCATION 15 Irvington Ct. New Bedford MA 02745
OWNER'S NAME Mercedes Nogueira
MAILING ADDRESS 15 Irvington Ct
CONTACT PERSON Christine Barbosa
TELEPHONE NUMBER 508-989-3829
EMAIL ADDRESS _____
REASON FOR REQUEST: Zoning board of appeals

PLANNING
AUG 25 2015
DEPARTMENT

August 26, 2015
 Dear Applicant,

Please find below the List of Abutters within 300 feet of the property known as 15 Irvington Ct (110-370) 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
110-415	13 PRINCETON ST 81	KOPACZEWSKI JOHN P "TRUSTEE", KOPACZEWSKI CYNTHIA A "TRUSTEE" 29 WEST SMITH NECK ROAD SO DARTMOUTH, MA 02748
110-413	19 PRINCETON ST	SYLVIA ANTHONY R, 19 PRINCETON STREET NEW BEDFORD, MA 02745
110-414	17 PRINCETON ST	NADEAU JODY, 12 MARKS LANE EAST FREETOWN, MA 02717
110-367	20 IRVINGTON ST 18	MIRANDA VIRGIL, MIRANDA CRYSTAL 20 IRVINGTON STREET NEW BEDFORD, MA 02745
110-368	16 IRVINGTON ST	DESROSIERS KYLE L, 15 TANNER LANE FAIRHAVEN, MA 02719
110-416	9 IRVINGTON CT	DELGADO VICTOR M, DELGADO FILOMENA S 6 LYNNE ELLEN DRIVE ACUSHNET, MA 02743
110-417	1901 ACUSHNET AVE	NUNES STEPHEN D, NUNES LINDA A 1129 MAIN ST ACUSHNET, MA 02743
110-370	15 IRVINGTON CT	AFFILIATED FAMILY FUNERAL SERVICE, INC., C/O SCI-PROPERTY TAX DEPT 2920 Mercedes Nogueira P.O. BOX 130548 - 15 Irvington Ct. HOUSTON, TX 77219-0548 New Bedford, MA 02745
115-1	1997 ACUSHNET AVE	CITY OF NEW BEDFORD, BROOKLAWN PARK 131 WILLIAM ST NEW BEDFORD, MA 02740
112-1 WS	ACUSHNET AVE	CITY OF NEW BEDFORD, BROOKLAWN PARK 131 WILLIAM ST NEW BEDFORD, MA 02740

QUITCLAIM DEED

AFFILIATED FAMILY FUNERAL SERVICE, INC., a Massachusetts corporation
of 1929 Allen Parkway, Harris County, Houston, Texas 77019

for consideration paid and in full consideration of Eighty Three Thousand and 00/100
Dollars (\$83,000.00)

Grants to MERCEDES NOGUEIRA, a single woman, of 203 Ash Street, New Bedford,
Bristol County, Massachusetts, 02740

with QUITCLAIM COVENANTS and further subject to the restriction described in
Exhibit "A", the land and buildings thereon in New Bedford, Bristol County,
Massachusetts bounded and described as follows:

BEGINNING at the northeast corner of this parcel at the intersection of the
south line of Irvington Street as shown on said plan with the westerly line of a
proposed street twenty three (23) feet wide as shown on said Plan;

thence WESTERLY in said southerly line of Irvington Street one hundred four
(104) feet to Lot numbered (94) on said Plan;
thence SOUTHERLY by Lot numbered 94 on said Plan, eighty (80) feet;

thence BOUNDED SOUTHERLY by Lot numbered 91 on said Plan ninety-three
and 13/100 (93.13) feet to the westerly line of the proposed Street aforesaid; and

thence NORTHERLY in the westerly line of said proposed Street seventy-eight
and 83/100 (78.83) feet to the place of beginning.

BEING shown as Lots #92 and #93 on Plan of Brooklawn Terrace, made by R.
W. Seams, C.E., dated August 1906, and filed in Bristol County S.D. Registry of
Deeds in Plan Book 2, Page 86.

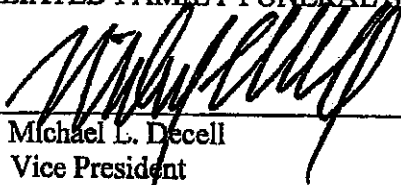
FOR TITLE, see deed of Affiliated Family Funeral Service, Inc., dated December 17,
1996 and recorded in the Bristol County (S.D.) Registry of Deeds in Book 3789, Page
226.

Property is being conveyed to Grantee in "as is, where is" condition.

15 Irvington Ct New Bedford ma

WITNESS OUR HANDS AND SEALS THIS 23rd day of June 2015.

AFFILIATED FAMILY FUNERAL SERVICE, INC.,


By: Michael L. Decell
Its: Vice President

COMMONWEALTH OF MASSACHUSETTS

State of Texas
County of Harris

On this 23rd day of June 2015, before me, the undersigned notary public, personally appeared, Michael L. Decell and proved to me through satisfactory evidence of identification, being (check whichever applies): driver's license or other state or federal governmental document bearing a photographic image, oath or affirmation of a credible witness known to me who knows the above signatory, or my own personal knowledge of the identity of the signatory, to be the person, whose name is signed above, and acknowledged the foregoing to be signed by her voluntarily for its stated purpose.

Deeds & Excise
REG OF DEEDS
REG #107
BRISTOL
06/26/15 11:27AM
000004272
FEE Deeds & Excise \$378.48
CASH \$378.48


Notary Public
My Commission Expires: 11-17-2016

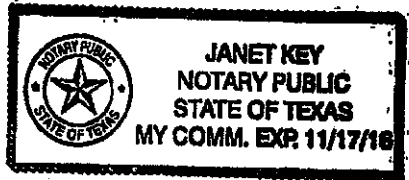


EXHIBIT "A"

Use Restriction

The Property shall be restricted from being used for a funeral home, crematory, cemetery, or for the sale of funeral, cremation and cemetery related services and/or merchandise, and this restrictive covenant shall run with the land.

A true copy of instrument as recorded in
Bristol County (S.D.) Registry of Deeds
in Book 11406 Page 50
ATTEST:

Imreedy
REGISTER

#4208
15 Irvington Ct

ZBA SPECIAL PERMIT APPLICATION SUBMITTAL CHECKLIST

The following documentation must be submitted, in duplicate (1 Original and 11 Copies), containing all items described below:

- Completed & Signed Application
- (a) Existing Conditions Site Plan, drawn to a scale not less than 1 inch: 40 feet, (For example, drawings at 1" : 10', 1" : 20' or 1" : 30' scale are acceptable) identifying positioning of existing structures must be provided. Site Plan must show footprint and dimensions of Rear, Front and Side distances between structure(s) and boundary lines.
- (b) Site Plan Identifying Proposed Plans, showing all proposed alterations or additions with side, front and rear set property lines identified.
- (c) Sub-Division Plans if Applicable
- A Certified Abutter's List
(Compiled by Planning Dept. and Certified in Assessor's Office)
- Plot Plan (Available at Inspectional Services Dept.)
- Filing Fee (Check made out to the City of New Bedford)
- Copy of Building Permit Rejection Packet
(Containing Rejected Building Permit and all information submitted with Building Permit Application)
- Appendix (Owner's Signature & Attached Deed for all Involved Parcels)
- Development Impact Statement (DIS)
(per Chapter 9 §5350 of the City of New Bedford Zoning Code)