



TOWN OF MEDWAY
Zoning Board of Appeals
155 Village Street, Medway, MA 02053
Phone: (508) 5321-4915 • Fax: (508) 321-4988

Application Checklist

It is the responsibility of the applicant to furnish all supporting documentation with the application. Please include the checklist with your application.

Ten copies of the following shall be submitted:

- Application** – Every application shall be submitted on an official application form, provided by the Community and Economic Development Office or Town Clerk. Please make sure to fill out the entire application completely.
- Plot Plans** – Prepared by and under the seal of a registered engineer or registered land surveyor, the plan shall include existing conditions and proposed changes to show clearly the nature of the specific request being made by the applicant. The plans shall include a north point, names of streets, zoning districts, property lines, dimensions of the subject lot, locations of buildings on the lot, parking areas, driveways and all other information pertinent to the petition or application as required by the Zoning Bylaw, other Bylaws or Rules and Regulations. All changes requested by the applicant shall be clearly identified. For Variance requests – show topography (and soil condition if pertinent) of the property.
- Building Plans** - If necessary, include accurate scaled renderings of elevations, showing exterior facades indicating height, materials, architectural features; and floor plans.
- Other supportive material** that will give the Board the necessary information about the project.

One copy of the following shall be submitted:

- Legal Notice Billing Agreement Form**
- Site Access Agreement Form**
- Certified List of Abutters** - Includes two sets of labels. Fill out the attached form and submit to Board of Assessors. (Note: It may take up to 10 days to receive this list, please request the abutters list as soon as possible)
- Fees** – All applications shall be accompanied by a filing fee made payable to the Town of Medway in the specified amount. See schedule of fees in this application packet.
- Electronic Submission** – All applications shall include one electronic copy of all information (except the Certified List of Abutters and fee) in a PDF form. All PDFs and electronic information should be labeled. Submissions may be accepted via email to zoning@townofmedway.org, thumb-drive or on CD.



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Zoning Board of Appeals - Application Fees

Fee for Application for Special Permit, Variance or Appeal is \$175.00

40B Comprehensive Permit Fee Structure:

Applications for Comprehensive Permit shall be accompanied by a fee according to the following schedule:

Number or housing units in proposed development
Application Fee

1 - 30	\$12,000
31 - 100	\$20,000
101 or more	\$20,000 + \$150/unit over first 100

Any additional fees necessary for proper review of the application shall be paid in full by the applicant prior to closure of the Board's public hearing on the application. Should the applicant fail to pay due amounts in full within 90 days, the Board shall close the public hearing and deny the Permit.

These fees are found on our website on the left hand side under Applications.

For more information contact:

Mackenzie Leahy

Administrative Assistant

508-321-4915

mleahy@townofmedway.org



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Zoning Board of Appeals
2017 Application Filing Deadlines

The following application deadlines have been approved by the ZBA. Please be aware that should you need to file an application with the Board, the application must be submitted on or before the application filing deadline date in order to be considered for the respective meeting date.

Meeting Date	Application Filing Deadline
January 4th	December 12 th , 2016
January 18th	December 26 th , 2016
February 1st	January 9 th
February 15th	January 23 th
March 1st	February 6 th
March 15th	February 20 rd
April 5th	March 13 th
April 19th	March 27 th
May 3rd	April 10 th
May 17th	April 24 th
June 7th	May 15 th
June 21st	May 29 th
July 5th	June 12 th
July 19th	June 26 th
August 2nd	July 10 th
August 16th	July 24 th
September 6th	August 14 th
September 20th	August 28 th
October 4th	September 11 th
October 18th	September 25 th
November 1st	October 9 th
November 15th	October 23 th
December 6th	November 13 th
December 20th	November 27 th



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Application for Zoning Board of Appeals Hearing

Be sure all questions are answered fully. If more space is necessary, attach additional sheets.

<i>Applicant Name(s)</i>	<i>Applicant Address</i>		
	<i>Applicant Telephone #</i>	<i>Applicant Email</i>	
<i>Attorney/Engineer/Consultant Name (if any)</i>	<i>Address</i>		
	<i>Telephone #</i>	<i>Email</i>	
<i>Property Owner (if different than Applicant)</i>	<i>Address</i>	<i>Telephone #</i>	
<i>Location of Property</i>		<i>Zoning District(s)</i>	
<i>Registry of Deeds Book & Page No. and Date or Land Court Certificate No. and Date of Current Title</i>		<i>Assessors Parcel ID #</i>	
<i>Present use of property</i>	<i>Proposed use of property</i>	<i>Have you applied for a building permit?</i>	<i>Has permit been denied?</i>
		Y N	Y N

Requested Relief (check all that apply):

- A **Special Permit** as provided in Section(s) _____ of the Medway Zoning Bylaws.
- A **Variance** from the requirements of Section(s) _____ of the Medway Zoning Bylaws.
- An **Appeal** of the Building Commissioner's decision. (*Attach copy of decision.*)
- A **Comprehensive Permit** under MGL c. 40B (subsidized housing)
- Other, please explain: _____

State briefly reasons for application:

TO BE COMPLETED IF REQUESTING A VARIANCE:

What circumstances exist relating to the shape, topography, or soil conditions of the subject property, which do not generally affect other land in the zoning district? (See MGL c. 40A Section 10)

What substantial hardship is caused by the circumstances listed above, when the Medway Zoning Bylaw is applied? (See MGL c. 40A Section 10)

State why you believe the grant of relief would not nullify or derogate from the intent of the Zoning Bylaw.

I hereby certify that the above statements and all testimony to be given by me during the Zoning Board of Appeals public hearing associated with this application are true to the best of my knowledge and belief.

Signature of Applicant(s)

Date

Signature of Property Owner (if different than Applicant)

Date

For Town Hall use only

To be filled out by the Building Commissioner:

Date Reviewed

Medway Building Commissioner

To be filled out by the Zoning Board of Appeals:

Date Received

Received by



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Legal Notice Billing Agreement Form

The Zoning Board of Appeals will prepare and submit a legal notice to be published in the *Milford Daily News*. This legal notice will appear in two consecutive issues of the newspaper, at least 14 days prior to the date of your hearing. The cost varies based upon the applicant request and information required for the notice. The Zoning Board of Appeals will forward the ad proof with the total to be paid by the applicant.

Applicant Name

Property Address

Telephone Number

Parcel ID

E-mail Address

Zoning District

I hereby agree to provide a check in the sum of the ad proof total provided by the Zoning Board of Appeals for the required legal notice for a public hearing before the Zoning Board of Appeals.

Signature

Date

Please Note: This form must be returned to the Zoning Board of Appeals when submitting your application package.



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Site Access Agreement Form

Please complete this form, sign at the bottom, and return to the address indicated above.

By submitting this form with an application to the Zoning Board of Appeals (the Board),

I, _____, hereby give the Board, and/or Staff to the Board, access to the
(Print Name)
property in order to complete a site visit, if determined necessary. The Board, and/or Staff to the Board,
may also determine and request the necessary site visits from other Town of Medway Staff, Consultants,
Boards, and/or Committees.

This request is made by _____, who is the applicant for this project and/or
(Print Name)
the rightful property owner.

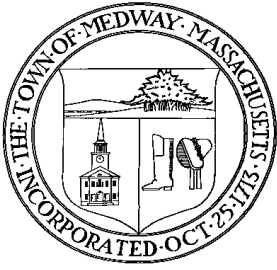
This form is submitted with the application for _____ with respect to the property
(Special Permit, Variance, or Appeal)
located at _____.
(Property Address and/or Parcel ID)

I am the:	<input type="checkbox"/> Applicant
(Check All That Apply)	<input type="checkbox"/> Property Owner

Signature: _____

Date: _____

By declining or neglecting to submit this form, you are denying access to the property prior to opening of the hearing. Upon opening of the hearing, the Board and/or Staff to the Board may determine that a site visit is necessary.



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BOARD OF ASSESSORS
155 VILLAGE STREET
MEDWAY, MA 02053
PHONE: 508-533-3203 FAX: 508-321-4981
www.townofmedway.org

REQUEST FOR ABUTTERS

Date of Request: _____

Property owner: _____

Property location: _____

Parcel (Property) ID: _____

Please specify: 100', 300' or 500' from subject parcel: 300'

THIS LIST IS REQUESTED FOR:

_____ Planning & Economic Development Board

_____ Zoning Board of Appeals

_____ Conservation Commission

REQUESTER INFORMATION:

Name: _____ Email address: _____

Address: _____

Phone: _____

**Please Return to MEDWAY ZBA
Mackenzie Leahy or Stephanie Mercandetti
Community & Economic Development Department**

THERE IS A FEE OF \$15.00 DUE AT THE TIME OF REQUEST. THE LIST IS VALID FOR 90 DATE OF CERTIFICATION DATE.

THE BOARD OF ASSESSORS RESERVES 10 WORKING DAYS TO PROVIDE ALL CERTIFIED LISTS OF ABUTTERS.

***IF YOU WISH TO HAVE THE LISTS MAILED BACK TO YOU,

YOU MUST PROVIDE A SELF ADDRESSED STAMPED ENVELOPE LARGE ENOUGH FOR THREE SETS OF LABELS.***
