



## **SPECIAL PERMIT CHECKLIST**

**CITY OF WORCESTER PLANNING BOARD**  
455 Main Street, Room 404; Worcester, MA 01608  
Phone 508-799-1400 - Fax 508-799-1393

### **STEP 1: SUBMIT AN APPLICATION PACKAGE INCLUDING THE ORIGINAL AND FIFTEEN (15) STAPLED COPIES (*DOUBLE-SIDING IS ENCOURAGED*) OF THE FOLLOWING TO THE DIVISION OF PLANNING & REGULATORY SERVICES (DPRS):**

#### **A. Zoning Determination Form**

- Form is provided by the Building & Zoning Division of Inspectional Services located at 25 Meade Street.
- Form must be signed by an authorized Building & Zoning staff member. There is no fee for the zoning determination form.

#### **B. Application**

- The original, signed application.

#### **C. Certification of Tax/Revenue Collection Compliance**

- All owners of subject property and applicants must certify that all local taxes, fees, assessments, betterments, or any other municipal charges of any kind are current with the City Treasurer's Office.

#### **D. Certified List of Abutters**

- The original Certified Abutters List, signed by the Assessor (first floor, room 108, City Hall).

#### **E. Plan**

- Submit one (1) original and 15 copies of a site plan (parking plan for Shrewsbury Street Parking Overlay District). Verify with DPRS if your Special Permit also triggers Definitive Site Plan review. If it does, one set of 15 copies of the site plan will be sufficient for both filings (two separate applications are required, but only 15 copies of the Site Plan).
- See Article V of the Worcester Zoning Ordinance for site plan requirements.
- Verify with DPRS if you will also need to file a Definitive Plan-More than One Building on a Lot.

### **STEP 2: ALONG WITH THE APPLICATION PACKAGE, SUBMIT THE FOLLOWING TO DPRS:**

#### **A. Two (2) sets of Assessor's Address Labels (listing all abutters and abutters to abutters)**

- Prepared by the Assessor for a fee (first floor, City Hall)

#### **B. Two Sets of Stamped Envelopes with Assessor's Address Labels for abutters and applicant.**

- Create two (2) separate sets of stamped envelopes with Assessor's labels.
- Include two stamped, addressed envelopes for each applicant.
- The return address on the envelopes should be: City of Worcester, Division of Planning; 455 Main Street, Room 404; Worcester, MA 01608
- These envelopes will be used to send notices of the public hearing and outcome.

#### **C. Appropriate fee. Please make checks payable to the City of Worcester.**

**STEP 3: FILE ORIGINAL APPLICATION WITH THE CITY CLERK (2<sup>nd</sup> floor, City Hall). Your application must be processed by the Division of Planning & Regulatory Services before filing with the City Clerk.**

**DO NOT SUBMIT THIS PAGE – FOR YOUR INFORMATION ONLY**

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**SPECIAL PERMIT APPLICATION**

**CITY OF WORCESTER PLANNING BOARD**  
455 Main Street, Room 404, Worcester, MA 01608  
Phone 508-799-1400 - Fax 508-799-1393

**TYPE OF SPECIAL PERMIT** (check Special Permit you are requesting)

- |   |  |
|---|--|
| 1. <input type="checkbox"/> Density Bonus                               | 6. <input type="checkbox"/> Shrewsbury Street Parking Overlay District |
| 2. <input type="checkbox"/> Cluster Zoning                              | 7. <input type="checkbox"/> Arts Overlay District                      |
| 3. <input type="checkbox"/> Mixed Use Overlay District                  | 8. <input type="checkbox"/> Adaptive Reuse Overlay District            |
| 4. <input type="checkbox"/> Continuing Care Retirement Community        | 9. <input type="checkbox"/> Common Driveway                            |
| 5. <input type="checkbox"/> Water Resources Protection Overlay District | 10. <input type="checkbox"/> Wind Energy Conversion Facility           |

1. Name of Applicant(s): \_\_\_\_\_

2. Address of Applicant: \_\_\_\_\_

3. Telephone: \_\_\_\_\_

4. Email: \_\_\_\_\_

5. That he / she is the owner (s)  , lessee (s)  , optionee (s)  , (check one) of certain premises situated at

\_\_\_\_\_ Worcester, Massachusetts

(List property subject to the application and include any lot numbers. Please note: The street number may be different than the Assessor's address).

and that the owner of record is in the name of \_\_\_\_\_

(The owner of record is the person or entity who owns title to the property as of today's date)

whose address (es) is /are \_\_\_\_\_, by a deed duly

recorded in the Worcester District Registry of Deeds, Book(s) \_\_\_\_\_,

Page(s) \_\_\_\_\_, and is further described by the City of Worcester Assessor's Office as

Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_.

6. Is this property known by any other address? \_\_\_\_\_

7. Zoning district(s) of the property (Indicate if more than one zoning district and any zoning overlay districts):

8. Describe what is presently located on the property (Use as much detail as possible including all uses and square footage of each use):

9. The applicant seeks to (Describe what you want to do on the property in as much detail as possible):

10. Such a use is permitted only by the City of Worcester Zoning Ordinance under Article (Insert Article, Section (s) of the Zoning Ordinance which permits the proposed used of the property):

11. Are you aware if this property has been previously granted approvals from any City Board or Commission?  
If so, please list (Provide dates of previous approvals, book and page numbers and/or certificate numbers of any recorded decisions and/or recorded/registered land. Also, please provide copies of previous recorded decisions):

12. List any requested waivers:

13. List any additional information relevant to the Special Permit:



WHEREFORE, the applicant(s) requests that this Board grant the special permit (s) as requested above.

By: \_\_\_\_\_  
(Signature of Applicant or Applicant's Agent)  
If more than one applicant, all applicants must fill out information.

\_\_\_\_\_  
(Name of Applicant)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Contact Phone Number)

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(Date)

By: \_\_\_\_\_  
(Signature of Property Owner or Owner's Agent)  
If more than one property owner, all owners must fill out information.

\_\_\_\_\_  
(Name of Property Owner)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Contact Phone Number)

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(Date)

**\*\*ALL APPLICATION DEADLINES ARE 2:00 P.M. UNLESS OTHERWISE SPECIFIED\*\*  
APPLICANTS ARE ENCOURAGED TO FILE BEFORE THE DEADLINE DATE WHENEVER POSSIBLE**

## **MIXED USE DEVELOPMENT OVERLAY ZONE**

The purpose of the Mixed Use (MU) Development Overlay Zone Article of the Zoning Ordinance is intended to provide for the coordinated and mixed development of residential, business, institutional and open/recreational space uses in the City of Worcester by:

1. Creating major new mixed-use areas in planned locations at appropriate densities, heights and mixture of uses;
2. Encouraging the preservation and rehabilitation of structures of historic or architectural merit in the overlay zones;
3. Encouraging flexibility in architectural design and building bulk;
4. Making recreation areas accessible to residents and visitors;
5. Creating environments conducive to a higher quality of life and environment for residents, businesses, employees and institutions.

### **Review Standards**

In addition to its special permit review criteria under Article II of the Zoning Ordinance, the Planning Board shall also consider the Mixed Use Development's conformance with the following planning and design objectives:

1. Whether the proposed use furthers the objectives of the Mixed Use District;
2. The relationship of the proposal to other planning considerations for the area and the City of Worcester as a whole, including the plans, programs and policies of other departments and agencies of the government;
3. The impact of the proposed site plan on neighborhood properties;
4. The proposed site plan including the relationship of different uses on the site and any other matters that are within the Planning Board jurisdiction;
5. Consideration of the traffic to be generated and its impact;
6. The location and design of vehicular access and parking facilities;
7. The number of parking and loading facilities;
8. The treatment of public space;
9. The availability of sewer and water capacity;
10. The impact of air quality;
11. The impact of noise.

**PLEASE ANSWER THE FOLLOWING QUESTIONS REGARDING THE PROPOSED MIXED USE PROJECT:**

1. Explain how the proposed project furthers the objectives of the Mixed Use District:
2. Explain what the relationship is of the proposal to other planning considerations for the area and the City of Worcester as a whole, including the plans, programs and policies of other departments and agencies of the government?
3. Explain what the impact is of the proposed site plan on surrounding neighborhood properties?
4. Explain what the impact is of the proposed site plan including the relationship of different uses on the site and any other matters that are within the Planning Board jurisdiction?

5. Will the proposed site plan generate additional traffic and if so, would it impact the neighborhood? Please explain:

6. Explain how the location and design of vehicular access and parking facilities are adequate:

7. Explain how the number of parking and loading facilities are adequate:

8. Explain what the impact is of the treatment of public space?

9. Explain how the proposed use is served by the availability of adequate sewer and water capacity:

10. What is the impact of the development on air quality?

11. What is the impact of the development on noise?

**CERTIFICATION OF COMPLIANCE WITH WORCESTER REVISED ORDINANCES GOVERNING REVENUE COLLECTION**

**\*Note: This form must be completed and signed by both the applicant(s) and owner(s) of the property certifying payment of all local taxes, fees, assessments, betterments, or any other municipal charges of any kind. Failure to include a fully completed certification form with the application shall result in the application being deemed incomplete and ineligible for further processing by the Zoning Board of Appeals.**

Pursuant to Massachusetts General Law, Chapter 40, Section 57 and the City of Worcester General Revised Ordinance, Chapter 11, Section 26-28, the undersigned applicant and all parties having an ownership interest therein, hereby certify, under the pains and penalties of perjury, that the applicant(s) and owner(s) have complied with the laws of the Commonwealth of Massachusetts and the City of Worcester regarding payment of all local taxes, fees, assessments, betterments or any other municipal charges of any kind.

(Give first and last names in full. In case of a corporation give names of President, Treasurer and Manager; and in case of firms, give names of individual members.)

**(1) If a Proprietorship or Single Owner of residential property:**

Name of Owner \_\_\_\_\_

Business Address \_\_\_\_\_

Home Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Signature of owner (certifying payment of all municipal charges):

\_\_\_\_\_ Date: \_\_\_\_\_

**(2) If a Partnership or Multiple Owners of residential property:**

Full names and address of all partners

Printed Names

Addresses

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Signature of all owners of property (certifying payment of all municipal charges -attach multiple pages if necessary)

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

**(3) If a Corporation:**

Full Legal Name \_\_\_\_\_  
State of Incorporation \_\_\_\_\_  
Principal Places of Business \_\_\_\_\_  
Place of Business in Massachusetts \_\_\_\_\_

Printed Names of Officers of Corporation:	Title
_____	_____
_____	_____
_____	_____

Owners of Corporation: Printed Names	Address	% of stock
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of all owners of property (certifying payment of all municipal charges -attach multiple pages if necessary)

_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____

**(4) If a Trust:**

Name of Trust \_\_\_\_\_  
Business Address \_\_\_\_\_

Printed Names of Trustees:	Address
_____	_____
_____	_____
_____	_____

Printed Names of Beneficiaries:	Address
_____	_____
_____	_____
_____	_____

Signature of trustees of property (certifying payment of all municipal charges -attach multiple pages if necessary)

_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____

**(5) Signature of Applicant** (if different from owner, certifying payment of all municipal charges):

Printed Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## **CITY OF WORCESTER CERTIFIED LIST OF ABUTTERS**

Replace This Page with Certified List of Abutters  
From Assessor's Office

List of Abutters: The Applicant shall provide a list of "parties of interest" which shall be attached to the application form and shall include the names and address of all abutters and abutters to abutters within three hundred (300) feet of the Applicant's property line. All such names and addresses shall be obtained from the most recent applicable tax list maintained by the City's Assessing Department. The Assessing Department shall certify the list of names and addresses.

### **MEETING WITH YOUR NEIGHBORS**

While not required, it is recommended, when possible, that applicants meet with neighbors prior to the scheduled public hearing to discuss the proposed development. State law requires that direct abutters and abutters to direct abutters within a 300-foot radius of the site receive notification of the hearing. Those abutters will receive a brief notice in the mail from the Division of Planning and Regulatory Services indicating the date and time of the public hearing and the requested Special Permit. In some cases, abutters may have additional questions or concerns about the proposed development that are not answered by the legal notice they receive in the mail. Additionally, abutters may not be able to visit the Division of Planning and Regulatory Services office during business hours to view the actual petition and plan.

**DO NOT SUBMIT THIS PAGE – FOR YOUR INFORMATION ONLY**

The City of Worcester, by this document, does not provide legal advice. Questions about Special Permits should be directed to your legal counsel.

**IF YOUR SPECIAL PERMIT PETITION IS APPROVED, OBTAIN A CERTIFIED COPY OF THE APPROVED DECISION FROM THE CITY CLERK’S OFFICE AND RECORD THE DECISION AT THE REGISTRY OF DEEDS.**

**Special Permit Decisions:** Final decisions are typically signed at the next scheduled Board Meeting and filed the following day with the City Clerk. Typically, if there is no appeal of the decision after twenty days (20) has elapsed from the date the decision was filed with the City Clerk’s office, the applicant may obtain a properly certified copy of the approved decision from the City Clerk (Massachusetts General Law, Chapter 40A, Section 11).

City Clerk, City Hall  
455 Main Street -Second Floor, Room 206  
508-799-1121  
Monday 8:45am - 5:00pm  
Tuesday - Friday 8:45am - 4:15pm  
[www.worcesterma.gov](http://www.worcesterma.gov)

**Recording Special Permit(s):** Upon obtaining a properly certified copy of the approved decision, the applicant must bring the same copy to the Worcester District Registry of Deeds and have the decision recorded (Massachusetts General Law, Chapter 40A, Section 11).

City Square  
90 Front Street, Level 2  
508-798-7717  
Recording Hours: Monday – Friday 9 am to 4 pm  
Closed on State or Federal Holidays  
[www.worcesterdeeds.com](http://www.worcesterdeeds.com)

**Lapse of Special Permit(s):** Per the City of Worcester Zoning Ordinance, Article II, § 9 (D)(5): If the activity authorized by a special permit granted by the ZBA or SPGA is not initiated within one (1) year of the date of grant of such special permit except in the case of phased construction as approved by the ZBA or SPGA and/or if the activity is not completed within two (2) years, then the special permit shall lapse unless the Director of Code Enforcement makes a determination that failure to complete was for good cause. Otherwise, after a lapse, the special permit may be re-established only after notice and a new hearing pursuant to this Ordinance (Massachusetts General Law, Chapter 40A, Section 11).

**YOUR DECISION MUST BE RECORDED PRIOR TO USE OF APPROVED SPECIAL PERMIT**

**For more information about the rules and regulations of City of Worcester Boards and Commissions:**

1. The City of Worcester Zoning Ordinance and City of Worcester Zoning Map are available online at [www.worcesterma.gov](http://www.worcesterma.gov). Choose the “Document Center” option. Then click on “City Clerk” and scroll down to Zoning Ordinance or Zoning Map.
2. Copies of the City of Worcester Zoning Ordinance or Board Rules and Regulations can also be purchased at the City Clerk’s office, 2<sup>nd</sup> floor of City Hall.
3. For more information about M.G.L. Chapter 40A, Zoning: <http://www.mass.gov/legis/laws/mgl/index.htm>