



**City of Worcester  
Department of Inspectional Services  
Zoning Determination Form**



To obtain a building permit, you are required to file the following Board application(s):

**Property Address:**

11 Parker Street & 54 Mason Street  
\_\_\_\_\_

**Zoning District:** RG-5

**Planning Board** (indicate all that apply)

**Site Plan** (circle all that apply):

Preliminary                      Definitive

Trigger(s) <sup>1</sup>: (circle all that apply) \_\_\_\_\_

15% Slope              Lodging              Historical

WRP                      # of Units              GFA

Subdivision              Flood Plain<sup>i</sup>

Special Permit related

**Parking Plan:**

# of Spaces \_\_\_\_\_

**Special Permits** (circle all that apply)<sup>1</sup>

AROD      FPOD      CCRC

WRP      MU      Cluster      CCOD

Common Drive      AHDB      AOD

**Other Filings** (either Board)

- Amendment** \_\_\_\_\_
- Administrative Appeal**
- Extension of Time**
- Comprehensive Permit**
- Other** \_\_\_\_\_

**Zoning Board of Appeals** (indicate all that apply)

**Variance(s)** (indicate relief needed for all that apply)

Dimension	Requirement	Provided	Relief Requested
Gross Area (SF)			
Frontage (ft.)			
Setback (ft.)	Front		
	Side		
	Exterior Side		
	Rear		
Height (ft.)			
Floor to Area Ratio			

Parking (spaces)	24		
Landscaping			
Other	22 provided		

**Applicable Section of Zoning Ordinance**

Article: IV  
Section: 7  
Paragraph: a (2)

**Special Permit** (circle all that apply):

Expansion/Change of pre-existing nonconforming

Structure              Use

Non-Residential/Residential Conversion

Other Special Permit

Seeking relief of Parking Requirements - 1. relief of 2 spaces to 22 total vs. 24 required

2. Aisle width reduction from 24' to 22' 3. parking 15' from lot line vs. the 25' required

Department of Inspectional Services

Authorized Signature Required      TM      DJH      DC

*Todd Miller*

<sup>1</sup> AOD= Arts Overlay District, AHDB=Affordable Housing, AROD=Adaptive Reuse Overlay District, CCRC=Continuing Care Retirement Community, FPOD = Flexible Parking, FP Flood Plain, MU= Mixed Use WRP=Water Resources Protection.



**SPECIAL PERMIT APPLICATION**

**CITY OF WORCESTER ZONING BOARD OF APPEALS**  
455 Maint Street, Room 404: Worcester, MA 01608  
Phone 508-799-1400 Ext. 31440 - Fax 508-799-1406

**TYPE OF SPECIAL PERMIT** (check the Special Permit you are requesting and describe what you are requesting)

- 1.  Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming Structure and/ or Use (Article XVI, Section 4)
- 2.  Residential Use allowed only by Special Permit (Article IV, Section 2, Table 4.1)
- 3.  Non-Residential Use allowed only by Special Permit (Article IV, Section 2, Table 4.1)
- 4.  Non-Accessory Sign (Article IV, Section 6)
- 5.  Residential Conversion (Article IV, Section 9)
- 6.  Placement of Fill/Earth Excavation (Article IV, Section 5)
- 7.  Modification of Parking/Loading Requirements (Article IV, Section 7)
- 8.  Modification of Landscaping Requirements for Parking/Loading (Article IV, Section 7)
- 9.  Other Special Permit (Describe Special Permit sought):

1. Assessor's **ADDRESS OF SUBJECT PROPERTY:** 54 Mason Street & 11 Parker Street  
(List property subject to the application and include any lot numbers. Please note: The street number may be different than the Assessor's address).

2. Is this property known by any other address: \_\_\_\_\_

3. **OWNER OF RECORD:** Daniel Yarnie  
(The owner of record is the person or entity who owns title to the property as of today's date)

4. Address (es) of owner of record is /are 89 West Main Street Unit 101 Northborough, MA 01532

5. Worcester District Registry of Deeds (WDRD) Book(s) 68001, Page(s) 336  
(List Book and Page number of deed filed for the subject property as recorded at the WDRD)

6. City of Worcester Assessor's Office Map6 Block20 Lot 19 & 37  
(List MBL number for the subject property as listed at Assessor's Office)

7. **NAME OF APPLICANT(S):** Daniel Yarnie

8. Address of Applicant: 89 West Main Street Unit 101 Northborough, MA 01532

9. Telephone: (774) 303-9860

10. Email: yarniepm@gmail.com

11. Check if you are an: owner (s) , lessee (s) , optionee (s)  (If you are not the owner of the subject property and are a lessee or optionee, it is recommended that you provide supporting information such as a lease or a purchase and sale agreement that shows your interest in the property.)

12. Zoning district(s) of the property (Indicate if more than one zoning district and any zoning overlay districts):  
RG-5

13. Describe what is presently located on the property (Use as much detail as possible including all uses and square footage of each use):  
Property currently contains an office building a 6,089 sq.ft. GFA office building at 54 Mason Street and 1,621 sq.ft. GFA auto service garage at 11 Parker Street, along with bituminous concrete pavement and areas of lawn

14. The applicant seeks to (Describe what you want to do on the property in as much detail as possible):  
Construct an 12 unit, 3+ story multi-family low rise apartment building with 22 parking spaces. Parking includes exterior spaces and garage in lowest level of building.

15. 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):  
Article 4, Section 2, Table 4.1-Residential Use 11. Multi-family dwelling, low rise

16. 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):  
Worcester Historic Commission - Demolition Delay Waiver

17. Have you applied for or are you aware if other applicants have applied for a Building Permit for this site and been refused for non-compliance with the Zoning Ordinance (e.g. a cease and desist order has been issued)? If so, explain:  
None known

18. List any additional information relevant to the Special Permit (s):



## SPECIAL PERMIT FINDINGS OF FACT

In the spaces below explain how the adverse effects of the proposed use will not outweigh its beneficial impacts to the City with respect to each of the following considerations per Article II, Section 6(A)(2) of the Zoning Ordinance. (Attach additional supporting documentation as necessary.)

1. Social, economic or community needs that are served by the proposal:  
Development will provide additional housing options within the City of Worcester
  
2. Traffic flow and safety, including access, parking and loading areas:  
Parker Street is a paved roadway way with 32' paved width. Adequate parking and access is provided with off street exterior and garage parking.
  
3. Adequacy of utilities and other public services:  
Units will be services by City of Worcester water and sewer system.
  
4. Neighborhood character and social structure:  
Proposed use is consistant with with existing development on Mason and Parker Streets which includes apartment and condominium development.
  
5. Impacts on the natural environment:  
Site development will have minimal impact on the natural environment as property currently contains impervious areas associated with buildings and pavement. Additional tree planting are proposed as part of the development.
  
6. Potential fiscal impact, including city services needed, tax base, and employment:  
Development of the site will result in an increase to the tax base. Due to the scale of the development impacts to City Services will be negligible

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.

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

89 west Main Street unit 101  
\_\_\_\_\_  
(Address) Northborough Ma 01532

7743039860  
\_\_\_\_\_  
(Contact Phone Number)

Yarniepm@gmail.com  
\_\_\_\_\_  
(Email)

11/07/23  
\_\_\_\_\_  
(Date)

## SUPPLEMENTARY QUESTIONS FOR SPECIAL PERMITS

Complete the requested information for the Special Permit requested. Attach additional documentation as necessary. Only complete the sections which pertain to the Special Permit (s) you are applying for.

### **Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming Structure (Article XVI, Section 4)**

1. Describe what is currently nonconforming about this structure (list specific dimensional nonconformities)
2. Indicate how long the nonconforming aspects of the structure have been in existence:
3. At the time of construction, did the structure meet applicable zoning requirements? (Check with the zoning ordinance, as amended, that would have been in effect at the time of construction. Past zoning ordinances are available for research at the City Clerk's office. Past zoning maps are available at the Division of Planning and Regulatory Services)
4. Describe the proposed extension, alteration or change including total square footage of any physical expansion:
5. Explain how the extension, alteration, or change itself complies with the current Ordinance requirements:
6. Indicate the number of off-street parking spaces currently provided and to be provided for the proposed structure as extended, altered or changed: Note: In residential districts, the structure as extended, altered or changed shall meet the off-street parking requirements of the zoning ordinance.
7. Explain how the structure as extended, altered or changed will not be substantially more detrimental to neighborhood than the existing nonconforming structure.

**Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming Use**

**(Article XVI, Section 4)**

1. Describe what is currently nonconforming about this use:
2. Indicate how long the nonconforming use has been in existence? What year did the use begin? (Check with the zoning ordinance, as amended, that would have been in effect at the time of construction. Past zoning ordinances are available for research at the City Clerk's office. Past zoning maps are available at the Division of Planning and Regulatory Services)
3. At the time the use was initiated, was the use allowed under the then applicable Zoning Ordinance?
4. Describe the proposed extension, alteration or change of use and the total square footage utilized for that use:
5. Explain how the extension, alteration or change itself complies with the current requirements of the Ordinance:
6. Indicate the number of off-street parking spaces currently provided and to be provided for the proposed use: Note: In residential districts, the use as extended, altered or changed shall meet the off-street parking requirements of the zoning ordinance.
7. Explain how the use as extended, altered or changed will not be substantially more detrimental to the neighborhood than the existing use:

**Residential Use allowed only by Special Permit in a particular zoning district  
(Article IV, Section 2, Table 4.1)**

1. Describe the proposed residential use:
2. Total number of dwelling units proposed, number of bedrooms per unit, and square footage of units:
3. Number and dimensions of off-street parking spaces to be provided and location (garage, driveway). Off-street parking spaces must be located outside of the front yard and exterior side yard setbacks.



**Non-Residential Use allowed only by Special Permit  
(Article IV, Section 2, Table 4.1)**

1. Describe the proposed use (include description of business, proposed hours of operation, and number of employees)
  
  
  
  
  
  
  
  
  
  
2. Total square footage of proposed use:
  
  
  
  
  
  
  
  
  
  
3. Number of off-street parking spaces to be provided. Indicate location of those parking spaces: garage, parking lot, parking spaces on a different lot provided through the same ownership and/or leased spaces (a 5-year minimum lease with renewal options must be provided) within 1,000 feet of the use it will serve.
  
  
  
  
  
  
  
  
  
  
4. For a proposed animal hospital, animal clinic, pet shop or animal shelter, per Article IV, Section 2, Notes to Table 4.1, Note 4, indicate the location of any animal runs if a residential zoning district is within 200 feet of the subject property.
  
  
  
  
  
  
  
  
  
  
5. For a proposed Bed and Breakfast use, provide additional documentation per Article IV, Section 11.
  
6. For a proposed Adult Entertainment use, provide additional documentation per Article IV, Section 10.
  
7. For a proposed Limited Residential Hospice House, provide additional documentation per Article IV, Section 2, Notes to Table 4.1, Note 10.
  
8. For a proposed non-accessory parking lot or a motor vehicle display lot, provide additional documentation showing compliance with Article IV, Section 7B.

**Non-Accessory Sign  
(Article IV, Section 6)**

1. Square footage, length and width of proposed sign, and height of total structure:
  
  
  
  
  
  
  
  
  
  
2. Distance of proposed sign from other non-accessory signs along each side of a street.
  
  
  
  
  
  
  
  
  
  
3. Indicate on the submitted plan the type and style of sign, exact location, etc.



**Residential Conversion  
(Article IV, Section 9)**

1. Total number of existing units/Total number of proposed units:

2. Will the external appearance of the structure remain unchanged except for new doors, windows, fire escapes, and stairways?

3. Number of off-street parking spaces to be provided (If new parking is being created, the applicant(s) may need to seek a Special Permit for extension, alteration or change of a pre-existing, nonconforming structure if existing structure does not meet current zoning dimensional requirements. If additional parking cannot be provided for new dwelling unit(s), the proposed conversion may also require a Variance or Special Permit from off-street parking requirements):

4. Which dimensional requirements/setbacks are you seeking relief by the Special Permit?

**Placement of Fill/Earth Excavation  
(Article IV, Section 5)**

1. Indicate whether the Special Permit is for Placement of Fill or Earth Excavation:

2. Attach documentation showing proposed measures to protect pedestrians and vehicles.

3. Provide a proposed timeline for completion of placement of fill.

4. Attach documentation from the Director of Public Health and the Conservation Commission as outlined in the City of Worcester Zoning Ordinance Article IV, Section 5.

5. Attach a site plan with all required information in support of the application per the City of Worcester Zoning Ordinance Article IV, Section 5.

**Modification of Parking/Loading Requirements  
(Article IV, Section 7)**

1. Indicate what relief is being sought under the Special Permit:

Article 4.Table 4.4.Note 2b. - Aisle width of twenty-two (22) feet instead of twenty-four (24) feet.

Article 4.Table 4.4.Note 5b.i) - Parking of motor vehicles in the front yard fifteen (15) feet from front lot line instead of twenty-five (25) feet.

Article 4.Section 7.A.2 - Reduction of number of parking spaces by ten percent (10%) from twenty-two (24) to twenty (22).

2. If applicable, indicate locations, square footages, and dimensions of relief sought under the Special Permit:

3. If applicable, provide number of parking/loading spaces required and relief requested through the Special Permit:

**Other Special Permits**

1. Describe Special Permit sought and provide relevant details on the plan of land and rendering. Provide square footage and height of any structures and indicate percentage of lot structure will occupy:

**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 Daniel Yarnie

Business Address 89 west Main Street unit 101 Northborough Ma 01532

Home Address 37 west millbury rd sutton Ma 01590

Business Phone \_\_\_\_\_ Home Phone 7743039860

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

 \_\_\_\_\_ Date: 11/7/23

**(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: Daniel Yarnie \_\_\_\_\_

Signature of Applicant:  \_\_\_\_\_ Date: 11/07/23 \_\_\_\_\_