

SPECIAL PERMIT APPLICATION

CITY OF WORCESTER ZONING BOARD OF APPEALS

455 Main Street, Room 404, Worcester, MA 01608 Phone 508-799-1400 ext. 31440 - Fax 508-799-1406

	PE OF SPECIAL PERMIT (check the Special Permit you are requesting and answer only the associated oplementary questions on page 8-12)
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-Residential Use allowed only by Special Permit – Self Storage Facility (Article IV, Section 2, Table 4.1)
5.	Residential Conversion (Article IV, Section 9)
6.	Placement of Fill/Earth Excavation (Article IV, Section 5)
7.	■ Modification of Parking/Loading Requirements and/or Landscaping and Layout Requirements for Parking/Loading (Article IV, Section 7)
8.	Other Special Permit (Describe Special Permit sought):
1.	Property Information
a.	79 Pullman Street
۵.	Address(es) – please list all addresses the subject property is known by
b.	23-01A-0006A
	Parcel ID or Map-Block-Lot (MBL) Number
C.	Worcester District Registry of Deeds, Book 66783 Page 141 Current Owner(s) Recorded Deed/Title Reference(s)
٨	ML 0.5, MG 0.5
u.	Zoning District and all Zoning Overlay Districts (if any)
	The property is currently vacant. Previous use of the property was office / school (Sylvan Learning). The 2,500 +/- sf building was recently razed. The paved parking lot remains.
e.	Describe what is presently located on the property (Use as much detail as possible including all uses and

square footage of each use; attached separate narrative if necessary):

f.	
1.	If residential, describe how many bedrooms are pre-existing and proposed
2.	Applicant Information
a.	Lacy Topaz, LLC - Michael C. O'Brien, Manager
	Name(s)
b.	37 Sutton Road, Webster, MA 01570
	Mailing Address(es)
C.	mike@galaxydevelopment.net 508 721-0005
	Email and Phone Number(s)
d.	
	Interest in Property (e.g., Lessee, Purchaser, etc.)
	I certify that I am requesting the Worcester Zoning Board of Appeals to grant the Special Permit as described below
	all of the
	(Signature)
.	Owner of Record Information (if different from Applicant)
a.	
	Name(s)
b.	
	Mailing Address(es)
d.	Email and Phone Number
•	Representative Information
a.	MidPoint Engineering + Consulting, LLC - Patrick P. Doherty, PE
	Name(s)
	Date PD+
b.	Signature(s)
C.	37 Sutton Road, Webster, MA 01570
	Mailing Address(es)
4	pdoherty@midpointengineering.com 508 721-1900
u.	Email and Phone Number
Э.	Engineer
	Relation to Project (Architect/Attorney/Engineer/Contractor, etc.)

(For office use only: Project Number: ZB-20____-___)

-	Owner Authorization
	thorization I, Michael C. O'Brien, Manager, Owner of Record of the property listed with the
Ass	sessing Division of the City of Worcester, Massachusetts as Map $\frac{23}{}$ Block $\frac{01A}{}$ Lot(s) $\frac{0006A}{}$, do hereby
aut	thorize MidPoint Engineering + Consulting, LLC to file this application with the Division of Planning &
Re	gulatory Services of the City of Worcester on this the 30th day of January, 2024
6.	Proposal (attach a separate narrative if necessary)
a.	The Applicant proposed to remove all existing site improvements and construct a 2,328 square foot building with outdoor seating that will be used for "food service (with drive-thru)". A paved parking lot with capacity of 29 vehicles will be constructed as will landscaping, utility services etc. The proposed use drive thru will allow only pickup of food orders. The applicant also request a waiver to allow queue length of 180' where 240' is required for food service drive-thru.
	The applicant seeks to (Describe what you want to do on the property in as much detail as possible)
b.	Article IV Section 2 Table 4.1 Business Use Item 6. requires special permit review by the ZBA for Food Service with Drive Thru use.
	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.
	Unknown
•	
C.	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)
	Unknown
d.	
	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)?
e.	
	List any additional information relevant to the Special Permit (s)

(For office use only: Project Number: ZB-20____-___)

(For office use only	y: Project Number: ZB-20_	-

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:

The project will improve the aesthetic nature of the site and will provide additional opportunities for prepared food as well as employment opportunities.

2. Traffic flow and safety, including access, parking and loading areas:

The proposal will allow for safe convenient access to new restaurant. The proposed parking area has been designed in conformance to City ordinances and will contain sufficient parking for the proposed use.

3. Adequacy of utilities and other public services:

The proposed redevelopment will occur in a densely developed commercial / industrial area which has adequate utility infrastructure for the proposed use.

4. Neighborhood character and social structure:

The project is consistent with existing uses in the vicinity of the site and within the zoning district which generally consist of service retail and light industrial use.

5. Impacts on the natural environment:

The project will improve on existing conditions by constructing a modern stormwater management system and introduce landscaping and street trees where few exist.

6. Potential fiscal impact, including city services needed, tax base, and employment:

The project will provide temporary construction and permanent full and part time jobs. The project increase the property value by construction of a new building resulting in increase in tax revenue.

(For office use only:	roject Number: ZB-20	١

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.

1a.	Extension,	Alteration or	Change of a	Privileged	Pre-existing,	Nonconforming	Structure
			(Article	e XVI, Secti	ion 4)		

	1
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:
5.	Indicate the total square footage of any physical expansion:
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 use 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 the neighborhood than the existing structure:

(For office use only: Pro	oject Number: ZB-20 -)

1b. Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming *Use* (Article XVI, Section 4)

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:
5. Indicate the total square footage to be utilized for the proposed use:
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 structure:
2. 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:
1. Describe the proposed residential ase.
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.

(For office use onl	y: Project Number: ZB-20	-

3. 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)

The proposed use is a QSR Restaurant with order pickup window. The restaurant hours will be 10am - 11pm seven days per week. The store will employ 20-30 employees with 8-10 working during a shift. The pickup window will allow only pick up of orders. Ordering and payment are via an App.

2. Total square footage of proposed use:

2,328 GSF

- 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.
 - 29 on premises parking spaces are proposed. Two spaces will be handicap accessible. Twenty percent of parking spaces will be EV charing ready.
- 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.

4. Non-Residential Use allowed only by Special Permit – Self Storage (Article IV, Section 2, Table 4.1)

- 1. Provide information that demand for self-storage exists both locally in proximity to the proposed site as well as overall in the city as demonstrated by a current market assessment
- 2. What conditions make the site poorly suited for other permitted uses?

(For office use only: Project Number: ZB-20)
3. Can adequate access can be provided without adversely affecting neighboring uses or the public realm?
4. Will structures with architectural or historical integrity will be appropriately preserved or improved, and that no such structures have been demolished within the past five (5) years to prepare the site for redevelopment?
5. 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?
6. 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.

(For office use only	y: Project Number: ZB-20_	-)

- 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.

7. Modification of Parking/Loading Requirements and/or Landscaping and Layout Requirements for Parking/Loading (Article IV, Section 7)

- Indicate what relief is being sought under the Special Permit:
 The applicant requests relief from Article IV Section A.7 specifically the Applicant requests relief from Drive thru and escape lane minimum length and location adjacent to parking spaces.
- 2. If applicable, indicate locations, square footages, and dimensions of relief sought under the Special Permit:
 - The Applicant requests that the pickup window queue length be 180 If where 240 If is required. The applicant also requests that the escape lane be 95 If prior to interfering with adjacent parking spaces.
- 3. If applicable, provide number of parking/loading spaces required and relief requested through the Special Permit:

8. 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:

(For office use only: Project Number: ZB-20)
---	---

TAX CERTIFICATION

This certification must be completed by all applicants and owners of the property, certifying payment of all local taxes, fees, assessments, betterments, or any other municipal charges of any kind. Failure to include a completed certification shall result in the application being deemed incomplete.

_	If a Single Owner or Proprietorship:						
a.	Name						
b.							
	Signature certifying payment of all municipal charges						
C.	Mailing Address						
d.	Email and Phone Number						
	If a Partnership or Multiple Owners:						
e.	Names						
f.							
_	Signatures certifying payment of all municipal charges						
g.	Mailing Address						
٦.	Email and Phone Number						
	Email and Phone Number						
	Applicant, if different from owner:						
	Printed Name & Signature of Applicant, certifying payment of all municipal charges						
	If a Corporation or Trust:						
	Lacy Topaz, LLC						
	Full Legal Name						
	Massachusetts Massachusetts State of Incorporation Principal Place of Business						
	37 Sutton Road Webster, MA 01570						
	Mailing Address of Place of Business in Massachusetts						
٦.	Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges						
	The designature of the state of						
	Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges						
	Distribution (Company Tourism of Company Tourism of						
	Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges						
	Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges						