



SPECIAL PERMIT CHECKLIST

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

STEP 1: PROVIDE THE FOLLOWING ITEMS, 1 DIGITAL COPY IN PDF FORMAT VIA EMAIL TO PLANNING@WORCESTERMA.GOV AND CONFIRM WITH STAFF BEFORE SUBMISSION OF 1 PHYSICAL COPY BY HAND DELIVERY OR MAIL:

- Application** with original signatures by all petitioners/owners; if you are not the owner of subject property, 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
- Zoning Determination Form** obtained from the Inspectional Services Division (email inspections@worcesterma.gov or call 508 – 799 – 1198 for more information)
- A **Certified Abutters List(s)** issued within 3 months of this application's filing date which includes all properties affected and includes any contiguous, commonly owned property(s). This can be obtained from the Assessor's Office and includes all abutters and abutters to abutters within 300' of the edge of the land owner's property.
Note: if the property(s) is within 300 ft. of another town an abutters list from that town may be required
- If the applicant is NOT the Owner, the **Owner(s) Authorization** for the applicant to apply is attached (page 4)
- Certification of Tax/Revenue Collection Compliance** - All current 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 (page 11)
- Site Plan** showing the full project scope and all elements listed on page 12 of this application, stamped and signed by all applicable professionals
- Architectural drawings or renderings** showing exterior elevation, height in feet and stories, exterior materials for all structures, and corresponding floor plans stamped and signed by all applicable professionals
- Traffic Study**, if necessary based on expected traffic generation (*contact staff to confirm*)

Note: Any application items not produced electronically, such as hand-drawn plans or schematics, handwritten applications, or other materials created prior to March 2013 that are not available to the applicant in electronic format, are not required to be submitted electronically.

STEP 2: ONCE STAFF CONFIRMS VIA EMAIL REPLY THAT YOUR APPLICATION IS COMPLETE, SUBMIT THE FOLLOWING TO DPRS:

- A. **Two Sets of Stamped Envelopes** with Assessor's Address Labels for abutters and applicant.
- Request two (2) sets of Assessor's Address Labels (listing all abutters and abutters to abutters) from the Assessor's Office (2nd floor, City Hall)-prepared for a fee
 - 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 and Regulatory Services; 455 Main Street, Room 404; Worcester, MA 01608
 - These envelopes will be used to send notices of the public hearing and outcome.
- B. **Appropriate fee.** Please make checks payable to the City of Worcester and list your project number on the memo line. Please confirm amount with staff prior to submission.



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

TYPE OF SPECIAL PERMIT (check the Special Permit you are requesting and answer only the associated supplementary 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. **56 Fruit St**

Address(es) – please list all addresses the subject property is known by

b. **02-045-00099**

Parcel ID or Map-Block-Lot (MBL) Number

c. **Worcester District Registry of Deeds, Book 69354 Page 364**

Current Owner(s) Recorded Deed/Title Reference(s)

d. **RG-5**

Zoning District and all Zoning Overlay Districts (if any)

1 family house being converted to a 2 family house
Enlarge existing 3rd floor dormer

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. 5 existing bedrooms proposed 1st famiy 3 bedrooms 2nd family 1 bedroom
If residential, describe how many bedrooms are pre-existing and proposed

2. Applicant Information

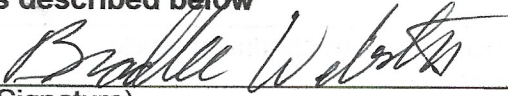
a. Bradlee Webster
Name(s)

b. 9 Mendon St Upton Ma 01568
Mailing Address(es)

c. bradleewebster@yahoo.com 508 951 8817
Email and Phone Number(s)

d. contractor doing work for owner
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


(Signature)

3. Owner of Record Information (if different from Applicant)

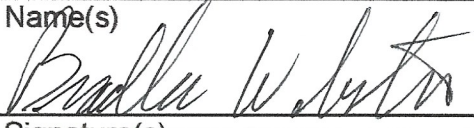
a. Jennifer Taggart
Name(s)

b. 2 Toprail Lane Eancho Palos Verdes Ca 90275
Mailing Address(es)

d. jyaggart@ddsffirm.com 213 920 4701
Email and Phone Number

4. Representative Information

a. Bradlee Webster
Name(s)

b. 
Signature(s)

c. 9 Mendon St Upton Ma 01568
Mailing Address(es)

d. bradleewebster@yahoo.com 508 951 8817
Email and Phone Number

e. contractor
Relation to Project (Architect/Attorney/Engineer/Contractor, etc.)

5. Owner Authorization

Authorization I, Jennifer Taggart, Owner of Record of the property listed with the Assessing Division of the City of Worcester, Massachusetts as Map 02 Block 045 Lot(s) 99, do hereby authorize Bradlee Webster to file this application with the Division of Planning & Regulatory Services of the City of Worcester on this the 7 day of February, 2024.

6. Proposal (attach a separate narrative if necessary)

Convert 1family house to a 2 family house. Enlarge existing 3rd floor dormer and add 2nd floor bathroom. Install 2 HVAC systems and fire sprinkler system.

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

b. _____
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.
no

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)
no

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)

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:

we are not changing what the property is zoned for and will change the social, economic or community needs.

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

we are not changing what the property is zoned for or adding any off street parking.

3. Adequacy of utilities and other public services:

we are not changing what the property is zoned for and will have no impact on utilities or public services.

4. Neighborhood character and social structure:

we are not changing what the property is zoned for and will not change the character or social structure

5. Impacts on the natural environment:

we are not changing what the property is zoned for and will have no impact on the natural environment

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

we are not changing what the property is zoned for and will have no fiscal impact on city services, tax base or employment

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 XVI, Section 4)

1. Describe what is currently nonconforming about this structure (list specific dimensional nonconformities)
Structure falls short of front setback by estimated 3 feet

2. Indicate how long the nonconforming aspects of the structure have been in existence:
1894

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)
yes

4. Describe the proposed extension, alteration or change:
Adding a second floor bathroom
enlarging existing 3rd floor dormer

5. Indicate the total square footage of any physical expansion:
Square footage is not changing

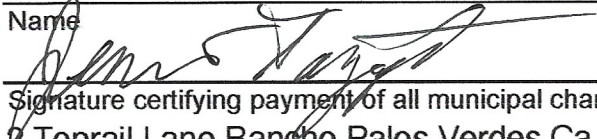
6. Indicate the number of off-street parking spaces currently provided and to be provided for the proposed structure as extended, altered or changed: Note: In residential districts, the use as extended, altered or changed shall meet the off-street parking requirements of the zoning ordinance.
6 and not increasing

7. Explain how the structure as extended, altered or changed will not be substantially more detrimental to the neighborhood than the existing structure:
Not changing the square footage just converting from 1 family to 2 family house.

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. Jennifer Taggart
Name
- b. 
Signature certifying payment of all municipal charges
- c. 2 Toprail Lane Rancho Palos Verdes Ca 90275
Mailing Address
- d. jtaggart@ddsfirm.com 213 920 4701
Email and Phone Number

If a Partnership or Multiple Owners:

- e. _____
Names
- f. _____
Signatures certifying payment of all municipal charges
- g. _____
Mailing Address
- h. _____
Email and Phone Number


Applicant, if different from owner:

- i. _____
Printed Name & Signature of Applicant, certifying payment of all municipal charges

If a Corporation or Trust:

- j. _____
Full Legal Name
- k. _____ _____
State of Incorporation Principal Place of Business
- l. _____
Mailing Address or Place of Business in Massachusetts
- m. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges
- n. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges
- o. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges
- p. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges

4. Representative Information

- a. Bradlee Webster
Name(s)
- b. 
Signature(s)
- c. 9 Mendon St. Upton Ma. 01568
Mailing Address(es)
- d. bradleewebster@yahoo.com 5089518817
Email and Phone Number
- e. contractor
Relation to Project (Architect/Attorney/Engineer/Contractor, etc.)

5. Owner Authorization

Authorization I, Jennifer Taggart, Owner of Record of the property listed with the Assessing Division of the City of Worcester, Massachusetts as Map 02 Block 045 Lot(s) 99, do hereby authorize Bradlee Webster to file this application with the Division of Planning & Regulatory Services of the City of Worcester on this the 26 day of February, 2024.

6. Proposal Description

- a. we do not see any potential hardships due to the fact we are not changing the dwelling occupancy from how it was purchased. we are looking to upgrade and bring dwelling upto todays codes
The applicant seeks to (Describe what you want to do on the property in as much detail as possible)
- b. no
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)
- d. no
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. when purchased 3rd floor had already been converted to single apartment with bath, kitchen and own zone heating system.
List any additional information relevant to the Variance (s)

VARIANCE - FINDINGS OF FACT

In the spaces below, please 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)(3) of the Zoning Ordinance. Attach additional supporting documentation as necessary.

1. Describe how a literal enforcement of the provisions of the City of Worcester Zoning Ordinance would involve a substantial hardship, financial or otherwise, to the petitioner or appellant:

we do not see any potential hardships due to the fact we are not changing the dwelling occupancy from how it was purchased. we are looking to upgrade and bring dwelling upto todays codes

2. Describe how the hardship is owing to circumstances relating to the soil conditions, shape, and/or topography of the land or structures and how the hardship especially affects said land or structures, but does not affect generally the zoning district in which it is located:

We are not changing the size of the dwelling and in so are not disturbing any soil or topography of the land.

3. Describe how desirable relief may be granted without detriment to the public good and without nullifying or substantially derogating from the intent or purpose of the City of Worcester Zoning Ordinance:

Wa are not looking to alter the dwellings exterior but just update and bring up to code.

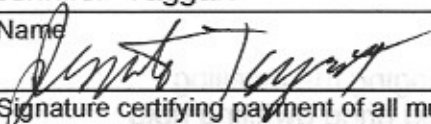
4. Describe how the dimensional variance as it relates to floor space, bulk, number of occupants, or other relevant measures, if granted, shall be no greater than the minimum necessary to provide relief from the statutory hardship:

we are not looking to alter current floor space, change occupancy requirements

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. Jennifer Taggart
Name
- b. 
Signature certifying payment of all municipal charges
- c. 2 Toprail Lane Eancho Palos Verdes Ca. 90275
Mailing Address
- d. jtaggart@ddsffirm.com
Email and Phone Number

If a Partnership or Multiple Owners:

- e. _____
Names
- f. _____
Signatures certifying payment of all municipal charges
- g. _____
Mailing Address
- h. _____
Email and Phone Number

Applicant, if different from owner:

- i. _____
Printed Name & Signature of Applicant, certifying payment of all municipal charges

If a Corporation or Trust:

- j. _____
Full Legal Name
- k. _____
State of Incorporation Principal Place of Business
- l. _____
Mailing Address or Place of Business in Massachusetts
- m. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges
- n. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges
- o. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges
- p. _____
Printed Name & Signature of Owner or Trustee, certifying payment of all municipal charges

VARIANCE 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

information for the Variances (s) you are applying for. Attach additional documentation as necessary.

Address: **56 Fruit St**

Parcel ID or MBL: **02-045-99**

If there is more than one structure on the lot, identify relevant structure requiring relief: **main house**

Lot Area		Front Yard Setback		Rear Yard Setback	
Square footage required:	6000	Setback required:	15	Setback required:	15
Square footage provided:	5400	Setback provided:	7.3	Setback provided:	30
Relief requested:	600	Relief requested:	7.7	Relief requested:	0
Frontage		Side Yard Setback		Exterior Side Yard Setback	
Frontage required:		Setback required:	8	Setback required:	
Frontage provided:		Setback provided:	14.3	Setback provided:	
Relief requested:		Relief requested:	0	Relief requested:	
Off-street Parking		Height		Accessory Structure 5-foot Setback	
Parking required:		Height permitted:		Type of structure:	
Parking provided:		Height provided:		Square footage of structure:	
Relief requested:		Relief requested:		Relief requested:	
Off-street Loading		Other Variances			
Loading required:		Relief requested:			
Loading provided:		Zoning Ordinance Article & Section:			
Relief requested:		Requirement:			
		Provided:			

1. Property Information

a. **56 Fruit St**

Address(es) – please list all addresses the subject property is known by

b. **02-045-99**

Parcel ID or Map-Block-Lot (MBL) Number

c. Worcester District Registry of Deeds, Book 45

Page 99

Current Owner(s) Recorded Deed/Title Reference(s)

d. **RG-5**

Zoning District and all Zoning Overlay Districts (if any)

e. **3 story house wih detached garage**

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

f. **5 pre-existing 4 proposed**

If residential, describe how many bedrooms are pre-existing and proposed

2. Applicant Information

a. **Bradlee Webster**

Name(s)

b. **9 Mendon St.Upton Ma. 01568**

Mailing Address(es)

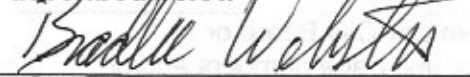
c. **bradleewebster@yahoo.com 5089518817**

Email and Phone Number(s)

d. **contractor**

Interest in Property (e.g., Lessee, Purchaser, etc.)

I certify that I am requesting the Worcester Zoning Board of Appeals to grant the Variance as described below



(Signature)

3. Owner of Record Information (if different from Applicant)

a. **Jennifer Taggart**

Name(s)

b. **2 Toprail Lane Eancho Palos Verdes Ca. 90275**

Mailing Address(es)

c. **jtaggart@ddsffirm.com 2139204701**

Email and Phone Number