

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 DIGITAL COPIES OF THE FOLLOWING ITEMS IN PDF FORMAT VIA EMAIL TO PLANNING@WORCESTERMA.GOV AND CONFIRM WITH DPRS STAFF BEFORE SUBMISSION OF ONE (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 (ISD) (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 <u>obtained from the Assessor's Office</u> and includes all abutters and abutters to abutters within 300' of the edge of the landowner'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 7)
	A Site Plan showing the full project scope and all elements listed on page 8 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, if applicable
othe	e: Any application items not produced electronically, such as hand-drawn plans or schematics, handwritten applications, or er materials created prior to March 2013 that are not available to the applicant in electronic format, are not required to be mitted electronically.
	2: ONCE STAFF CONFIRMS VIA EMAIL REPLY THAT YOUR APPLICATION IS COMPLETE, SUBMIT DLLOWING TO DPRS:
	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 (2 nd 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.
В. Арр	ropriate 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.



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

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

Address: One Chestnut Place a/k/a 10 Chestnut Street & Two Chestnut Place a/k/	/a 22 Elm Street
Parcel ID or MRI : 03-031-24-04	

If more than one structure on the lot, identify relevant structure requiring relief: 22 Elm Street Building (4 Stories)

Lot Area	Front Yard	Setback	Rear Yard Setba	Rear Yard Setback	
Square footage required:	Setback required:	5 ft	Setback required:		
Square footage provided:	Setback provided:	0 ft	Setback provided:		
Relief requested:	Relief requested:	5 ft	Relief requested:		
Frontage	Side Yard	Setback	Exterior Side Yard Setback		
Frontage required:	Setback required:		Setback required:		
Frontage provided:	Setback provided:		Setback provided:		
Relief requested:	Relief requested:		Relief requested:		
Off-street Parking	Heig	ıht	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 request	Relief requested:			
Loading provided:	Zoning Ordina Article & Secti	nce			
Relief requested:	Requirement:				
	Provided:				

If you are requesting Variances for more than one structure or lot, provide this sheet for each structure/lot. Only complete the sections pertaining to the Variances (s) you are applying for.

1.	Property Information
a.	One Chestnut Place a/k/a 10 Chestnut Street & Two Chestnut Place a/k/a 22 Elm Street Address(es) – please list all addresses the subject property is known by
b.	03-031-24-04
	Parcel ID or Map-Block-Lot (MBL) Number
C.	Worcester District Registry of Deeds, Book 68878 Page 345 Current Owner(s) Recorded Deed/Title Reference(s)
d.	BG-6.0; CCOD-D; DSOD
	Zoning District and all Zoning Overlay Districts (if any)
е	The property is currently comprised of an 11-story approximately 196,380 square foot office tower (the "One Chestnut Building") and a 4-story approximately 50,900 square foot office building (the "Two Chestnut Building")
	Describe what is presently located on the property (Use as much detail as possible including all uses and square footage of each use):
f	There are currently no residential units in either the One Chestnut Building or the Two Chestnut Building, and the Project is proposing the construction of 198 market-rate residential units in the One Chestnut Building and 22 affordable home ownership condominium units in the Two Chestnut Building. If residential, describe how many bedrooms are pre-existing and proposed
	If residential, describe now many bedrooms are pre-existing and proposed
2.	Applicant Information
a.	Chestnut Place Worcester Owner, LLC
	Name(s)
b.	c/o Synergy Investments LLC, 10 Post Office Square, 14th Floor, Boston, MA 02109 Mailing Address(es)
c.	jsmith@bowditch.com; (508) 926-3464
	Email and Phone Number(s)
d.	Owner 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 Chestnut Place Worcester Owner, LLC, By: Synergy Development, LLC, its Manager
	(Signature) David Greaney, its Manager
3.	Owner of Record Information (if different from Applicant)
a.	
	Name(s)
b.	Mailing Address(es)
	maining / teat 555(55)
C.	Fmail and Phone Number

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

4.	Representative Information	
a.	Joshua Lee Smith, Esq. Name(s)	
b.	Signature(s)	
C.	311 Main Street, Worcester, MA 01608 Mailing Address(es)	
d.	jsmith@bowditch.com; (508) 926-3464 Email and Phone Number	
e.	Attorney Relation to Project (Architect/Attorney/Engineer/Contractor, etc.)	
5. Aut	Owner Authorization Chestnut Place Worcester Owner, LLC, by its Manager, Synergy Development, LLC thorization I, By: David Greaney, its Manager, Owner of Record of the property listed with the	e
	sessing Division of the City of Worcester, Massachusetts as Map <u>03</u> Block <u>031</u> Lot(s) <u>24-04</u> , do here	
aut	thorize Joshua Lee Smith to file this application with the Division of Planning &	
	gulatory Services of the City of Worcester on this the 2nd day of April , 20 24 Chestnut Place Worcester Owner, LLC, By: Synergy Development, LLC its Manager	•
6.	Proposal Description By: David Greaney, its Manager	-V
a.	Chestnut Place Worcester Owner, LLC ("Synergy") is proposing to convert both office buildings to large-scale multifamily use, included construction of 198 market-rate residential units within the One Chestnut Building and 22 affordable home ownership condominium the Two Chestnut Building. The project includes division of the lot into two separate lots, including one lot that will contain the One Constituting and the other lot that will contain the Two Chestnut Building.	units in
u.	The applicant seeks to (Describe what you want to do on the property in as much detail as possible)	
b.	Notice of Variance, dated June 20, 1988, Worcester Registry District Certificate No. 11289 & 11363 at Book 57, Page 89	
	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.	Please see Statement in Support. List any additional information relevant to the Variance (s)	

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

i	For office use	only: Pro	iect Number:	ZB-20	- }
- 1	101011100000		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		/

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.

٠,٠	,,(0, 0
١.	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:
	Please see Statement in Support.
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:
	Please see Statement in Support.
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:
	Please see Statement in Support.
1.	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:
	Please see Statement in Support.

/For office use	e only: Project Number: ZB-20	_
froi office asc	, orny, i roject maniber, Lb Lo	

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:
	Name
	Signature certifying payment of all municipal charges
	Mailing Address
d.	Email and Phone Number
	If a Partnership or Multiple Owners:
	Names
f.	Signatures certifying payment of all municipal charges
	Mailing Address
h.	Email and Phone Number
i.	Applicant, if different from owner:
	Printed Name & Signature of Applicant, certifying payment of all municipal charges
	If a Corporation or Trust:
j.	Chestnut Place Worcester Owner, LLC Full Legal Name
k.	MA 10 Post Office Square, 14th Floor, Boston, MA 02109 State of Incorporation Principal Place of Business
l.	10 Post Office Square. 14th Floor. Boston. MA 02109 (Mailing Address or Flace of Business in Massachusetts Chestnut Place Worcester Owner, its C, by, Synergy Development, LLC, its Manager By: (David Greaney, its Manager
m.	By: David Greaney, its Manager 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
0.	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