

PROPOSED LOT 1

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: 138 Cohasset Street

Parcel ID or MBL: 18-028-00013

If more than one structure on the lot, identify relevant structure requiring relief: Lot 2 (area)

Lot Area	Front Yard Setback	Rear Yard Setback	
Lot Alea		Rear Fard Setback	
Square feetage required:	Setback		
Square footage required:	required:	Setback required:	
Causes fortone was ideal.	Setback		
Square footage provided:	provided:	Setback provided:	
Dalla for an account of the	Relief		
Relief requested:	requested:	Relief requested:	
Frontage	Side Yard Setback	Exterior Side Yard Setback	
	Setback		
Frontage required:	required:	Setback required:	
	Setback		
Frontage provided:	provided:	Setback provided:	
	Relief		
Relief requested:	requested:	Relief requested:	
Off-street Parking	Height	Accessory Structure 5-foot Setback	
	Height		
Parking required:	permitted:	Type of structure:	
	Height	Square footage of	
Parking provided:	provided:	structure:	
3,	Relief	ou dotal o.	
Relief requested:	requested:	Relief requested:	
Off-street Loading	Oth	er Variances	
Loading required:	Relief requested:		
	Zoning Ordinance		
Loading provided:	Article & Section:		
Relief requested:	Requirement:		
	1 toquiroment.		
	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.



PROPOSED LOT 2

VARIANCE APPLICATION

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Address: 138 Cohasset Street

Parcel ID or MBL: 18-028-00013

If more than one structure on the lot, identify relevant structure requiring relief: Lot 2 (area)

Lot Area		Front Yard	Setback	Rear Yard Setba	ıck
Square footage required:	5,000	Setback required:		Setback required:	
Square footage provided:	4,000	Setback provided:		Setback provided:	
Relief requested:	1,000	Relief requested:		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				Accessory Struct 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			Othe	r Variances	
Loading required:		Relief requeste	d:		
Loading provided:		Zoning Ordinance Article & Section:			
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.	138 Cohasset Street		
b.	Address(es) – please list all addresses the subject property is known by 18-028-00013		
	Parcel ID or Map-Block-Lot (MBL) Number		
C.	Worcester District Registry of Deeds, Book 70069 Current Owner(s) Recorded Deed/Title Reference(s)		
d.	RG-5		
	Zoning District and all Zoning Overlay Districts (if any)		
е	Single family dwelling with detached accessory 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	Three bedrooms existing dwelling with three additional proposed for new structure.		
	If residential, describe how many bedrooms are pre-existing and proposed		
2.	Applicant Information		
a.			
	Name(s)		
b.	7 Powder House Road, Dover, MA 02030		
	Mailing Address(es)		
c.	doverinvestmentgroup@gmail.com; (774) 262-3187		
d.	Email and Phone Number(s) 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		
	Me De Atlant For		
	(Signature) Afternation The Many of Tree moneyer Bover throwth most Group be a		
3.	Owner of Record Information (if different from Applicant)		
a.			
	Name(s)		
b.	Marilla a Addition ()		
	Mailing Address(es)		
C.	Email and Phone Number		

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

4.	Representative Information
a.	Donald J. O'Neil Name(s)
b.	Signature(s)
c.	688 Pleasant Street, Worcester, MA 01602 Mailing Address(es)
d.	djo@oneilbarrister.com; (508) 755-5655 Email and Phone Number
e.	Lawyor
Aut Ass aut	Owner Authorization The Anomalian Notice The Notice Th
5 .	Proposal Description
a.	A literal enforcement of the Zoning Ordinance would limit the potential use of the parcel to the owners detriment and impose a substantial financial hardship on the owner by preventing the The applicant seeks to (Describe what you want to do on the property in as much detail as possible)
b.	Unknown. 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.	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.	Existing house to occupy conforming lot with no relief for same being required. List any additional information relevant to the Variance (s)

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

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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:

A literal enforcement of the Zoning Ordinance would limit the potential use of the parcel to the owners detriment and impose a substantial financial hardship on the owner by preventing the premises for being put to its highest and best use as a multifamily property.

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:

The hardship in this case arises out of the existing dwelling on the premises which does not lend itself to expansion by addition to add additional dwelling units to fully utilize the frontage and area available for housing. The existing single family use on a lot of this size is atypical for lots located in RG-5 zoning districts which in general support greater density.

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:

Relief will allow for the construction of an additional dwelling unit without exceeding applicable density controls as the property, taken as a whole, has sufficient area and frontage to accommodate up to five dwelling units under the density controls set forth in the Zoning Ordinance.

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:

Requested relief is the minimum necessary to allow for the proposed use of the property. Proposal meets applicable frontage, building setbacks, and off street parking requirements under the Zoning Ordinance for both lots proposed with minimal relief being required for Lot 2 only.

(For office use only: Project Number: ZB-20	1
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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.	·
9.	Mailing Address
h.	· · · · · · · · · · · · · · · · · · ·
	Email and Phone Number
	Applicant, if different from owner:
	Applicant, it different from owner:
	Printed Name & Signature of Applicant, certifying payment of all municipal charges
	If a Corporation or Trust:
	Dover Investment Group, LLC
j.	Full Legal Name
k.	Magagabusatta
Κ.	State of leasure 4:
ř	7 Powder House Road, Dover, MA 02030 Principal Place of Business
	Mailing Address or Place of Business in Massachusetts
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