



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

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

Address: 39 Lamartine Street

Parcel ID or MBL: 05-014-00008

If more than one structure on the lot, identify relevant structure requiring relief: _____

Lot Area		Front Yard Setback		Rear Yard Setback	
Square footage required:		Setback required:		Setback required:	
Square footage provided:		Setback provided:		Setback provided:	
Relief requested:		Relief requested:		Relief requested:	
Frontage		Side Yard Setback		Exterior Side Yard Setback	
Frontage required:	200'	Setback required:		Setback required:	10'
Frontage provided:	159.28'+/-	Setback provided:		Setback provided:	1.1'
Relief requested:	40.78'+/-	Relief requested:		Relief requested:	8.9'
(Planning Board SP required) 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:			

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. 39 Lamartine Street
Address(es) – please list all addresses the subject property is known by
- b. 05-014-00008
Parcel ID or Map-Block-Lot (MBL) Number
- c. Worcester District Registry of Deeds, Book 67447 Page 1
Current Owner(s) Recorded Deed/Title Reference(s)
- d. BG-3.0
Zoning District and all Zoning Overlay Districts (if any)
- e. The property is presently a vacant lot consisting primarily of impervious surface containing approximately 18,154 square feet
Describe what is presently located on the property (Use as much detail as possible including all uses and square footage of each use):
0 existing bedrooms; 17-1 BR, 12-2 BR; 3-3BR and 6-bed penthouse. Total of 54 bedrooms proposed.
- f. 0 E.
If residential, describe how many bedrooms are pre-existing and proposed

2. Applicant Information

- a. Polar Views LLC
Name(s)
- b. 89 West Main Street, Unit 101, Northborough, MA 01532
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


Polar Views LLC

By:  Daniel Yarnie, Its Manager
(Signature)

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

- a. Same
Name(s)
- b. _____
Mailing Address(es)
- c. _____
Email and Phone Number

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. Owner Authorization

Authorization I, Daniel Yarnie, Manager of Polar Views LLC, Owner of Record of the property listed with the Assessing Division of the City of Worcester, Massachusetts as Map 05 Block 014 Lot(s) 00008, do hereby authorize Joshua Lee Smith, Esq. to file this application with the Division of Planning & Regulatory Services of the City of Worcester on this the 7th day of June, 2024.

Polar Views LLC

6. Proposal Description By  Daniel Yarnie, Its Manager

The Project includes the construction and development of a new 6-story building with approximately 48,613 gross square feet, two levels of parking, residential amenities, commercial retail space, 5 stories of multifamily Eligible Development which will include a mix of 1- and 2-bedroom apartments and a 6-bedroom penthouse suite on the top floor, as well as indoor and outdoor common areas, new landscaping and other site features.

- a. landscaping and other site features.
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. Please see Statement in Support.
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:

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.

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:

Please see Statement in Support.

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
- 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. Polar Views LLC
Full Legal Name
- k. MA 89 West Main Street, Unit 101, Northborough, MA 01532
State of Incorporation Principal Place of Business
- l. 89 West Main Street, Unit 101, Northborough, MA 01532
Mailing Address or Place of Business in Massachusetts
- m. Polar Views LLC
By: [Signature], Daniel Yarnie, 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
- 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