



VARIANCE & 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

2021 NOV 25 PM 3:16
 WORCESTER ZONING BOARD
 RECEIVED

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

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:		Setback required:		Setback required:	
Frontage provided:		Setback provided:		Setback provided:	
Relief requested:		Relief requested:		Relief requested:	
Off-street Parking/Loading		Height		Accessory Structure 5-foot Setback	
Parking required:	124	Height permitted:		Type of structure:	
Parking provided:	12	Height provided:		Square footage of structure:	
Relief requested:	112	Relief requested:		Relief requested:	
Loading required:		Other Variances			
Loading provided:		Relief requested:			
Relief requested:		Zoning Ordinance Article & Section:			
Signs		Requirement:			
Area permitted:		Provided:			
Area provided:		Indicate if Variances are being requested for more than one structure or more than one lot. Only complete the sections which pertain to the Variances (s) you are applying for.			
Relief requested:					
Height permitted:					
Height provided:					
Relief requested:					
Setback permitted:					
Setback provided:					
Relief requested:					

TYPE OF SPECIAL PERMIT (check the Special Permit you are requesting and describe what you are requesting)

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-Accessory Sign (Article IV, Section 6)
5. Residential Conversion (Article IV, Section 9)
6. Placement of Fill/Earth Excavation (Article IV, Section 5)
7. Modification of Parking/Loading Requirements (Article IV, Section 7)
8. Modification of Landscaping Requirements for Parking/Loading (Article IV, Section 7)
9. Other Special Permit (Describe Special Permit sought):

1. Assessor's ADDRESS OF SUBJECT PROPERTY: 267 Lincoln Street Worcester, MA
(List property subject to the application and include any lot numbers. Please note: The street number may be different than the Assessor's address).

2. Is this property known by any other address: _____

3. OWNER OF RECORD: Lara Deli and Grocery
(The owner of record is the person or entity who owns title to the property as of today's date)

4. Address (es) of owner of record is /are 66 Vernon Street Worcester, Ma 01610

5. Worcester District Registry of Deeds (WDRD) Book(s) 68046, Page(s) 212
(List Book and Page number of deed filed for the subject property as recorded at the WDRD)

6. City of Worcester Assessor's Office Map 09 Block 013 Lot 0002
(List MBL number for the subject property as listed at Assessor's Office)

7. NAME OF APPLICANT(S): Saif Handhal

8. Address of Applicant: 3 Monticello Drive W Front Worcester, MA 01603

9. Telephone: 508-410-0912

10. Email: handhalsaif@gmail.com

11. Check if you are an: owner (s) , lessee (s) , optionee (s) (If you are not the owner of the subject property and are a lessee or optionee, 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.)

12. Zoning district(s) of the property (Indicate if more than one zoning district and any zoning overlay districts):

Right through the middle of BL-1.0 and IN-H

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

There are 2 units in the building. I am renting out unit #1 which is the hookah lounge. The hookah bar is designed and constructed to meet both the health and safety standards as recommended by the local authority. It is 3,450 square feet. Our occupancy is currently 138. According to the fire marshall and our architect, our occupancy load comfortably serves 243 occupants.

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

We are ONLY seeking to increase our occupancy number. No other changes to current business.

We are pleased to state that our business has grown and flourished beyond anticipated. With the lease agreements that we currently have for parking along with our valet parking service, we have had zero issues with parking. The only reason that we are currently addressing the zoning board is to increase our occupancy from the current 138 to our legal building limit of 243. Our environment is conducive to socializing and networking and we would like to respond to the requests of our clients by increasing occupants.

15. 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):

Article IV, Section 2, Table 4.1

16. 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):

Zoning board approvals : project numbers ZB-2023-050 and ZB-2023-96

17. 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)? If so, explain:

N/A

18. List any additional information relevant to the Variance (s) and Special Permit (s):

N/A

VARIANCE FINDINGS OF FACT

Complete the following questions. Your responses should provide justifications as to why the requested Variance(s) should be granted. Attach additional documentation as necessary.

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

The building is a historical property which has physical limitations as the business takes up the majority of the lot. Literal enforcement of the parking requirements would prevent the business owner from running a successful tax paying business.

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:

Our business is in a highly developed commercial area where the majority of the businesses face similar parking challenges. Umass Memorial Hospital has acquired all/any potential lots for the expansion of their facilities.

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:

The character of the business is consistent with the majority of the businesses on Lincoln Street. The neighboring businesses utilize off street parking. There is sufficient street parking on the numerous side streets as well as on both sides of Lincoln Street. Also, since the Hookah lounge is open after the other businesses are closed, there will not be any competition or shortage of parking spots.

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:

As we are applying for an increase in our occupancy from 138 to 243, we need a viable parking solution to remain profitable. We also have ample street parking and meters available. Since the Hookah lounge is open when the other businesses are closed, there will not be any problem parking on the street. We have not had any problems thus far. We counted over 10 parking spots on Duxbury Road. Five cars can comfortably park on both sides of the road. There are about 8 parking spots on Gilman Street. Also we counted over 16 parking spots on Lincoln Street. 8 parking spots on the same side of the lounge and 8 spots across the street. All of these off street parking spots are conveniently located under 1000 feet from the hookah lounge. The employees will park in the building loading dock area.

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 approval of this proposal will add to the city tax base and provide employment opportunities. We are looking forward to contributing to our local community and neighborhood activities and fundraisers. On a social level, we will provide an environment conducive to socializing and networking.

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

3. Adequacy of utilities and other public services:

Existing utilities and public services on Lincoln Street are adequate for the proposed use.

4. Neighborhood character and social structure:

The proposed use is consistent with the neighborhood character and social structure and will complement the neighborhood. It has not and will not be disruptive to the surrounding businesses.

5. Impacts on the natural environment:

The proposed use will have negligible impact on the natural environment. We will utilize existing roadways and infrastructure thereby minimizing the impact.

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

WHEREFORE, the applicant(s) requests that this Board grant the special permit (s) as requested above.

By: [Signature]
(Signature of Applicant or Applicant's Agent)

If more than one applicant, all applicants must fill out information.

Saif Handhal Ahmed Handal
(Name of Applicant)

3 Monticello Drive West Front Worcester, MA
(Address)

508-410-0912
(Contact Phone Number)

handhalsatif@gmail.com
(Email)

November 6 2024
(Date)

By: _____
(Signature of Property Owner or Owner's Agent)

If more than one property owner, all owners must fill out information.

(Name of Property Owner)

(Address)

(Contact Phone Number)

(Email)

(Date)

SUPPLEMENTARY QUESTIONS FOR SPECIAL PERMITS ONLY

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.

**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)

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:

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

1. 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:

**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:

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.

**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)

Our business is a hookah lounge that is designed and constructed to meet both the health and safety standards as recommended by the local authority. Our hours of operations are everyday from 7pm-2am. We currently employ 5 people and will be able to hire additional staff once our occupancy is increased.

2. Total square footage of proposed use:

Total square footage is 3,450 feet which provides a total occupancy calculation of 243.

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.

No traffic flow or safety issues are expected by the applicant. We have a lease agreement with The Genesis Club which is located at 274 Lincoln Street. They have 18 spots. We also have a lease agreement with Care Team on 286 Lincoln Street with 45 parking spaces. The majority of our clients use Uber and/or car pool. We also provide clear signage for our customers to direct them to the available parking options. We offer valet parking and hire Worcester Police during our busy nights.

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.

**Non-Accessory Sign
(Article IV, Section 6)**

1. Square footage, length and width of proposed sign, and height of total structure:

2. Distance of proposed sign from other non-accessory signs along each side of a street.

3. Indicate on the submitted plan the type and style of sign, exact location, etc.

**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?

**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.
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.

**Modification of Parking/Loading Requirements
(Article IV, Section 7)**

1. Indicate what relief is being sought under the Special Permit:

2. If applicable, indicate locations, square footages, and dimensions of relief sought under the Special Permit:

3. If applicable, provide number of parking/loading spaces required and relief requested through the Special Permit:

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:

CERTIFICATION OF COMPLIANCE WITH WORCESTER REVISED ORDINANCES GOVERNING REVENUE COLLECTION

***Note: This form must be completed and signed by both the applicant(s) and owner(s) of the property certifying payment of all local taxes, fees, assessments, betterments, or any other municipal charges of any kind. Failure to include a fully completed certification form with the application shall result in the application being deemed incomplete and ineligible for further processing by the Zoning Board of Appeals.**

Pursuant to Massachusetts General Law, Chapter 40, Section 57 and the City of Worcester General Revised Ordinance, Chapter 11, Section 26-28, the undersigned applicant and all parties having an ownership interest therein, hereby certify, under the pains and penalties of perjury, that the applicant(s) and owner(s) have complied with the laws of the Commonwealth of Massachusetts and the City of Worcester regarding payment of all local taxes, fees, assessments, betterments or any other municipal charges of any kind.

(Give first and last names in full. In case of a corporation give names of President, Treasurer and Manager; and in case of firms, give names of individual members.)

(1) If a Proprietorship or Single Owner of residential property:

Name of Owner _____

Business Address _____

Home Address _____

Business Phone _____ Home Phone _____

Signature of owner (certifying payment of all municipal charges):

_____ Date: _____

(2) If a Partnership or Multiple Owners of residential property:

Full names and address of all partners

Printed Names

Addresses

Business Address _____

Business Phone _____

Signature of all owners of property (certifying payment of all municipal charges -attach multiple pages if necessary)

_____ Date: _____
_____ Date: _____
_____ Date: _____
_____ Date: _____

(3) If a Corporation:

Full Legal Name Lara Deli and Grocery
State of Incorporation Massachusetts
Principal Places of Business 276 Lincoln Street Worcester, MA 01605
Place of Business in Massachusetts 276 Lincoln Street Worcester, MA 01605
Printed Names of Officers of Corporation: _____ Title _____

[Signature] _____

Owners of Corporation:

Printed Names	Address	% of stock
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of all owners of property (certifying payment of all municipal charges -attach multiple pages if necessary)

_____ Date: _____
_____ Date: _____
_____ Date: _____
_____ Date: _____

(4) If a Trust:

Name of Trust _____
Business Address _____
Printed Names of Trustees: _____ Address _____

Printed Names of Beneficiaries: _____ Address _____

Signature of trustees of property (certifying payment of all municipal charges -attach multiple pages if necessary)

_____ Date: _____
_____ Date: _____
_____ Date: _____
_____ Date: _____

(5) Signature of Applicant (if different from owner, certifying payment of all municipal charges):

Printed Name of Applicant: _____
Signature of Applicant: _____ Date: _____