

APPLICATION
 For Planning Board and Zoning Board of Appeals Approval



CITY OF SOMERVILLE
 Joseph A. Curtatone, Mayor
 Office of Strategic Planning and Community Development (OSPCD)
 City Hall . 93 Highland Avenue . Somerville, MA 02143
 617.625.6600 ext. 2500

City Clerk Stamp

Office Use: Case #	PB Date	ZBA Date	Filing Fee	Ad Fee
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Please review the application information sheet. Complete applications must be submitted to the City Clerk's Office. Failure to submit all required information is grounds for denial of the request. If this form does not provide adequate space for your response, please attach additional sheets of paper.

1. Property Information				
Street Address(es) 61 Myrtle Street	Zoning District(s) RB	Overlay District(s), if any	Ward 1-1	
Assessor's:		If there are multiple MBLs, enter the remainder in Section 7.		
Map 105	Block A	Lot 43		
Please indicate the name of the individual, individuals, corporation or trust that owns the property:				
Property Owner's Name	Complete Mailing Address	Phone Number(s)	Email	
Please indicate the name of the individual, individuals, corporation or trust that is applying (please note that the applicant should be the intended user or developer):				
Applicant's Name Elan Sassoon	Complete Mailing Address 295 Upland Ave Newton, MA 02461	Phone Number(s) 305 206 2971	Email sassoanelan@yahoo.com	
Please indicate the contact information for any agent, engineer or architect that will represent this application who may represent the owner and/or applicant in this application review process:				
Agent's Name (if applicable) Attorney or Other Agent	Complete Mailing Address	Phone Number(s)	Email	
Architect's Name (if applicable) David Schatzle	Complete Mailing Address 29 York Avenue Watertown, MA 02472	Phone Number(s) 857 210-7792	Email	
Engineer's Name (if applicable)	Complete Mailing Address	Phone Number(s)	Email	

2. Submission Type	
Check all that apply.	
<input type="checkbox"/>	Variance
<input checked="" type="checkbox"/>	Special Permit (SP)
<input type="checkbox"/>	Special Permit with Design Review (SPD)
<input type="checkbox"/>	Special Permit with Site Plan Review (SPSR)
<input type="checkbox"/>	Planned Unit Development (PUD) – Preliminary Master Plan Submission (PMP) / Special Permit with Site Plan Review (SPSR)
<input type="checkbox"/>	Subdivision or other Site Plan Approval
<input type="checkbox"/>	Comprehensive Permit under MGL Chapter 40B – Inclusionary Housing Development (follow SPSR submission and contact the Housing Director at 617.625.6600 ext. 2560)
<input type="checkbox"/>	Revision to Special Permit (only if certificate of occupancy or final sign-off is not yet received)
<input type="checkbox"/>	Administrative Appeal
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4. Applicable Section(s) of Zoning Ordinance and Prior Zoning Approvals
You may refer to the Inspectional Services Denial Letter for the section of the Zoning Ordinance cited.
Section 4.4 Nonconforming Structures - 4.4.1 Alteration, Reconstruction, Extension of Structural Change to a Nonconforming Structure (increase to a three family dwelling)
5. Met with Planning Department Staff to review application requirements.
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, date 9/25/18
6. Met with Engineering Department Staff to review application requirements.
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date
7. Existing Conditions Description
Briefly describe existing structure(s) and/or use(s). Include number of employees, occupants and hours of operation, if applicable.
Existing two family 2.5 story residential wood frame structure with attached storage shed.
8. Proposal Description
A. Briefly describe any changes in the structure(s) and/or use(s). Include whom the project is intended to serve, expected number of employees, and/or occupants and hours of operation, if applicable. In the CCD or TOD districts also include the square footage that will be allocated to each use cluster and associated parking.
Increase from 2 to 3 units within allowable du/lot area. Proposed demo of existing rear portion of building including attached storage. Renovation of existing building with additional finished basement area. Project is in RB district. Conforming FAR. Continues existing encroachment on rear yard setback.
B. Explain any green building practices that you are using. Please consult the Environmental Protection Agency's Residential Green Building Guide for ideas (www.epa.gov/ne/greenbuildings).
Limitation of demo material, recycling where possible to reduce solid waste disposal. Use of water saving plumbing fixtures. Use of energy efficient lighting. Reduction of non-permeable asphalt paving. Addition of non-invasive species landscape planting.
C. Is the proposal for a multi-family residence of three or more units, or for a place of public accommodation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, submit an Accessibility Narrative listed under Checklist of Required Information.
D. Are you demolishing a commercial structure or moving soil? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Identify and list any 21E reports and other environmental assessments, analysis, clean-up studies, enforcement actions and any other environmental documentation that is available for the property, including documentation on underground storage tanks. Attach copies of all identified documents. Failure to identify and attach these documents, if applicable, will result in an application being deemed incomplete.
<i>If you discover an underground storage tank you must call the Somerville Fire Department immediately.</i>

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9. Zoning Data						
Refer to the SZO § 2.2 Definitions and SZO § 8 Dimensional Requirements for more information.						
Data	Existing	Proposed	Allowed	Existing or Permitted Nonconformity	New Violation	SZO Section Cited
	Fill in both columns: numbers must match those on plans and other attached documentation.		Office Use			
A. Use	residential	residential				
B. # of Dwelling Units*	2 units	3 units				
C. Lot Area	4611 square feet	4611 square feet				
D. Lot Area ÷ # of Dwelling Units	2305.5 sf per du	1537 sf per du				
E. Gross Floor Area of Footprints of All Buildings	1152 square feet	2235 square feet				
F. Ground Coverage (E. ÷ C.)	25.13 %	48.47 %				
G. Landscaped Area (landscaped area ÷ C.)	25.15 %	37.95 %				
H. Pervious Area (pervious area ÷ C.)	25.15 %	37.95 %				
I. Net Floor Area** / *** (sum of all usable square feet)	2305 square feet	4415 square feet				
J. Floor Area Ratio (FAR) (I. ÷ C.)	.5	0.96				
K. Building Height	26.9 feet	26.9 feet				
L. Front Yard Setback	15 feet	15 feet				
M. Rear Yard Setback	9.8 feet	8 feet				
N. Side Yard Setback (left when you face property)	1.6 feet	3.33 feet				
O. Side Yard Setback (right when you face property)	20 feet	10 feet				
P. Street Frontage	50 feet	50 feet				
Q. # of Parking Spaces	3	3				
R. # of Bicycle Parking Spaces	0	0				
S. # of Loading Spaces	0	0				
* 8 or more dwelling units - determine if Inclusionary Housing, Article 13, applies ** In CCD and TOD use GROSS floor area *** 30,000+ square feet - determine if Linkage, Article 15, applies						

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10. Checklist of Required Information									
<p>This checklist will help you determine what you need to submit with this application form. Find the column for your submission type. The rows contain the number of copies of each item that you must submit and "Y" indicates include one copy. For each item check the column 'included' if you are submitting it or the 'Waiver Requested' column for items that are not applicable to your proposal. Planning Staff may contact you to submit items for which you are requesting a waiver. If your application includes more than one type, submit the greatest number of copies listed. Please submit plans and other documentation electronically on a CD, flash drive or via email in addition to hard copies noted below.</p>									
<p>Checklist key: # = # of copies Y = include 1 copy I/A = if applicable include 1 copy N/A = not applicable SPSR-A = SPSR in Assembly Sq. Mixed-Use District TOD = Transit Oriented District CCD = Corridor Commercial District †† = within 500 feet of property</p>	Variance	SP / SPD	SPSR	PUD PMP	Subdivision	Revision to SP	Included	Waiver Requested	
Application Form & Supplemental Questions	3	3	3	3	3	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Denial Letter from Inspectional Services Division – if you received one	I/A	I/A	I/A	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Recorded Deed(s) to all properties involved in the project	1	1	1	N/A	1	N/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Fees for Filing, Advertising & Abutter List. See fee schedule on application information sheet. Submit 3 separate checks or money orders payable to the City of Somerville or cash.	Y	Y	Y	Y	Y	Y	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abutter List from neighboring municipality if your property is less than 300' from the Somerville boundary. Obtain list from neighboring municipality of the property owners' names and addresses that are within 300' of your property.	I/A	I/A	I/A	I/A	I/A	I/A	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Site Plans</p> <p>➤ See appropriate Site Plan Review Checklists: (located in forms library under Planning and Zoning and Engineering):</p> <ul style="list-style-type: none"> • alterations with no change in footprint & no site work • alterations with no change in footprint & site work • residential additions or structures with <250 sf footprint • residential additions or structures with >250 sf footprint and all commercial additions or structures <p>➤ If substantially altering a nonconforming structure, indicate the location of where the existing nonconformity will be maintained.</p>	3	3	3	3	3	3			
	3 hard copies at initial filing, 8-10 copies at final filing								
<p>Elevations front, side and rear of building(s) and signage with vertical height - measure from either lowest point between building and lot line, or 15' from building, to the highest point of roof beam, deck line of a mansard roof or average height between the plate and ridge of a gable, hip or gambrel roof – and description of proposed materials and colors. Include proposed mechanical and electrical system components, exhaust / ventilation systems, transformers, and satellite dishes and method of screening</p>	3	3	3	N/A	N/A	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	3 hard copies at initial filing, 8-10 copies at final filing								
Conceptual Floor Plans with square footage and # of units	Y	Y	Y	N/A	N/A	Y	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Neighborhood Context Map showing the neighborhood in which the tract lies and any impacts upon the area (scale no less than 1"=100')	N/A	Wire-less only ††	SPS R-A only	Y	Y	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Photographs showing the development site and surrounding parcels	Y	Y	Y	Y	Y	Y	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Traffic/Parking Analysis	3	3	3	3	3	N/A			
Traffic Study (if less than 25,000 square feet) estimate peak hour traffic volumes generated by proposed use, relation to existing volumes and projected future conditions	N/A	I/A	I/A, Y in TOD	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Traffic Impact Analysis (if 25,000 square feet or more) prepared by a professional traffic engineer who is registered with the Commonwealth of Massachusetts as a professional engineer in either traffic or transportation engineering, or any individual who has been certified by the Transportation Professional Certification Board, Inc. as a Professional Traffic Operations Engineer (PTOE). No other professional registration or qualification shall substitute for this requirement	N/A	I/A	I/A, Y in TOD	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Transportation Demand Management Plan	N/A	N/A	SPS R-A & TOD only	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Parking Optimization Plan	N/A	N/A	TOD only	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	

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(Checklist of Required Information Continued)	Variance	SP / SPD	SPSR	PUD PMP	Subdivision	Revision to SP	Included	Waiver Requested
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Building Shadow Analysis	I/A, Y in CCD/ TOD	I/A, Y in CCD/ TOD	Y	Y	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>
Accessibility Narrative For multi-family residences of three or more units, and for places of public accommodation: describe the major accessibility requirements, if any, for the proposed project under federal or state law(s), as well as the applicant's strategies for meeting those requirements. If your project is exempt from any accessibility requirements due to scoping parameters in the applicable standard(s), be sure to explain how and why. Please consult the Americans with Disabilities Act (ADA), the Fair Housing Act (FHA), the regulations of the Massachusetts Architectural Access Board (MAAB), and other accessibility standards as necessary. This narrative may take the form of a brief memo, prepared by a licensed architect or code consultant.	I/A	I/A	I/A	I/A	I/A	I/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Housing Projects including 4 or more Units Explain measures taken to provide for, protect, or increase the affordability of housing units within the proposed structure; the degree of such affordability to households of low or moderate income, as defined by HUD; and the duration of legal assurances of such affordability.	I/A	I/A	I/A	I/A	I/A	I/A	<input type="checkbox"/>	<input type="checkbox"/>
LEED Worksheet (if greater than 10,000 square feet)	N/A	N/A	SPS R-A & TOD only	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>
Conceptual 3-D Model of the Master Plan at 20 scale or alternate scale acceptable to the SPGA. In CCD and TOD include abutting properties.	I/A	I/A	SPS R-A, CCD & TOD only	I/A	I/A	I/A	<input type="checkbox"/>	<input type="checkbox"/>
Rendering or Computer-Simulated Photograph (from at least 2 prominent locations along the surrounding rights-of-way)	N/A	Wire- less only	N/A	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>

11-17. Supplemental Questions
Answer the supplemental questions for the permit you are seeking.

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Agent's Name (if applicable) Attorney or Other Agent	Complete Mailing Address	Phone Number(s)	Email	
Architect's Name (if applicable) David Schatzle	Complete Mailing Address 29 York Avenue Watertown, MA 02472	Phone Number(s) 857 210-7792	Email	
Engineer's Name (if applicable)	Complete Mailing Address	Phone Number(s)	Email	

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<p>Applicant Signature (if the applicant is the owner, the owner should also sign below): As Applicant, I make the following representations:</p> <ol style="list-style-type: none"> 1.) The information supplied on and with this application form is accurate to the best of my knowledge. 2.) If the current use of the property is a nonconforming use, I will furnish proof to the satisfaction of the SPGA that the nonconforming use is legal. 3.) I will make no changes to the approved project plans without the prior approval of the SPGA. 4.) If the proposed project is subject to linkage (SZO Article 15), I will sign all documents required by the Planning Staff/SPGA governing the amount and the method of payment of the linkage fee. 5.) I will return the notice sign or pay for its replacement. 6.) I will pay the fees associated with advertising the case in the newspaper and mailing notices to abutters. 7.) I hereby certify that the agent, engineer and/or architect listed on this application form have been authorized by me to represent me before the Planning Staff, the Planning Board and/or the Zoning Board of Appeals as it relates to the development and/or use of this property. <p><i>(sign here)</i></p> <hr style="border: 1px solid black;"/>														
<p>Indicate applicants relationship to owner:</p> <p>This applicant is (check one):</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 40%;">An individual</td> <td style="width: 55%;"> <ul style="list-style-type: none"> • application to be signed by applicant </td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>More than one individual, or a partnership</td> <td> <ul style="list-style-type: none"> • application to be signed by all applicants </td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>A corporation or LLC</td> <td> <ul style="list-style-type: none"> • application to be signed by an officer authorized to do so by <u>the corporation</u> • attach corporate articles of organization </td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>A trust</td> <td> <ul style="list-style-type: none"> • application to be signed by authorized trustee • attach certificate of trust </td> </tr> </table>			<input type="checkbox"/>	An individual	<ul style="list-style-type: none"> • application to be signed by applicant 	<input type="checkbox"/>	More than one individual, or a partnership	<ul style="list-style-type: none"> • application to be signed by all applicants 	<input checked="" type="checkbox"/>	A corporation or LLC	<ul style="list-style-type: none"> • application to be signed by an officer authorized to do so by <u>the corporation</u> • attach corporate articles of organization 	<input type="checkbox"/>	A trust	<ul style="list-style-type: none"> • application to be signed by authorized trustee • attach certificate of trust
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4. Applicable Section(s) of Zoning Ordinance and Prior Zoning Approvals
You may refer to the Inspectional Services Denial Letter for the section of the Zoning Ordinance cited.
Section 4.4 Nonconforming Structures - 4.4.1 Alteration, Reconstruction, Extension of Structural Change to a Nonconforming Structure (increase to a three family dwelling)
5. Met with Planning Department Staff to review application requirements.
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, date 9/25/18
6. Met with Engineering Department Staff to review application requirements.
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date
7. Existing Conditions Description
Briefly describe existing structure(s) and/or use(s). Include number of employees, occupants and hours of operation, if applicable.
Existing two family 2.5 story residential wood frame structure with attached storage shed.
8. Proposal Description
A. Briefly describe any changes in the structure(s) and/or use(s). Include whom the project is intended to serve, expected number of employees, and/or occupants and hours of operation, if applicable. In the CCD or TOD districts also include the square footage that will be allocated to each use cluster and associated parking.
Increase from 2 to 3 units within allowable du/lot area. Proposed demo of existing rear portion of building including attached storage. Renovation of existing building with additional finished basement area. Project is in RB district. Conforming FAR. Continues existing encroachment on rear yard setback.
B. Explain any green building practices that you are using. Please consult the Environmental Protection Agency's Residential Green Building Guide for ideas (www.epa.gov/ne/greenbuildings).
Limitation of demo material, recycling where possible to reduce solid waste disposal. Use of water saving plumbing fixtures. Use of energy efficient lighting. Reduction of non-permeable asphalt paving. Addition of non-invasive species landscape planting.
C. Is the proposal for a multi-family residence of three or more units, or for a place of public accommodation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, submit an Accessibility Narrative listed under Checklist of Required Information.
D. Are you demolishing a commercial structure or moving soil? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Identify and list any 21E reports and other environmental assessments, analysis, clean-up studies, enforcement actions and any other environmental documentation that is available for the property, including documentation on underground storage tanks. Attach copies of all identified documents. Failure to identify and attach these documents, if applicable, will result in an application being deemed incomplete.
<i>If you discover an underground storage tank you must call the Somerville Fire Department immediately.</i>

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9. Zoning Data						
Refer to the SZO § 2.2 Definitions and SZO § 8 Dimensional Requirements for more information.						
Data	Existing	Proposed	Allowed	Existing or Permitted Nonconformity	New Violation	SZO Section Cited
	Fill in both columns: numbers must match those on plans and other attached documentation.		Office Use			
A. Use	residential	residential				
B. # of Dwelling Units*	2 units	3 units				
C. Lot Area	4611 square feet	4611 square feet				
D. Lot Area ÷ # of Dwelling Units	2305.5 sf per du	1537 sf per du				
E. Gross Floor Area of Footprints of All Buildings	1152 square feet	2235 square feet				
F. Ground Coverage (E. ÷ C.)	25.13 %	48.47 %				
G. Landscaped Area (landscaped area ÷ C.)	25.15 %	37.95 %				
H. Pervious Area (pervious area ÷ C.)	25.15 %	37.95 %				
I. Net Floor Area** / *** (sum of all usable square feet)	2305 square feet	4415 square feet				
J. Floor Area Ratio (FAR) (I. ÷ C.)	.5	0.96				
K. Building Height	26.9 feet	26.9 feet				
L. Front Yard Setback	15 feet	15 feet				
M. Rear Yard Setback	9.8 feet	8 feet				
N. Side Yard Setback (left when you face property)	1.6 feet	3.33 feet				
O. Side Yard Setback (right when you face property)	20 feet	10 feet				
P. Street Frontage	50 feet	50 feet				
Q. # of Parking Spaces	3	3				
R. # of Bicycle Parking Spaces	0	0				
S. # of Loading Spaces	0	0				
* 8 or more dwelling units - determine if Inclusionary Housing, Article 13, applies ** In CCD and TOD use GROSS floor area *** 30,000+ square feet - determine if Linkage, Article 15, applies						

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10. Checklist of Required Information									
This checklist will help you determine what you need to submit with this application form. Find the column for your submission type. The rows contain the number of copies of each item that you must submit and "Y" indicates include one copy. For each item check the column 'included' if you are submitting it or the 'Waiver Requested' column for items that are not applicable to your proposal. Planning Staff may contact you to submit items for which you are requesting a waiver. If your application includes more than one type, submit the greatest number of copies listed. Please submit plans and other documentation electronically on a CD, flash drive or via email in addition to hard copies noted below.									
Checklist key: # = # of copies Y = include 1 copy I/A = if applicable include 1 copy N/A = not applicable SPSR-A = SPSR in Assembly Sq. Mixed-Use District TOD = Transit Oriented District CCD = Corridor Commercial District †† = within 500 feet of property	Variance	SP / SPD	SPSR	PUD PMP	Subdivision	Revision to SP	Included	Waiver Requested	
Application Form & Supplemental Questions	3	3	3	3	3	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Denial Letter from Inspectional Services Division – if you received one	I/A	I/A	I/A	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Recorded Deed(s) to all properties involved in the project	1	1	1	N/A	1	N/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Fees for Filing, Advertising & Abutter List. See fee schedule on application information sheet. Submit 3 separate checks or money orders payable to the City of Somerville or cash.	Y	Y	Y	Y	Y	Y	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abutter List from neighboring municipality if your property is less than 300' from the Somerville boundary. Obtain list from neighboring municipality of the property owners' names and addresses that are within 300' of your property.	I/A	I/A	I/A	I/A	I/A	I/A	<input type="checkbox"/>	<input type="checkbox"/>	
Site Plans ➤ See appropriate Site Plan Review Checklists: (located in forms library under Planning and Zoning and Engineering): • alterations with no change in footprint & no site work • alterations with no change in footprint & site work • residential additions or structures with <250 sf footprint • residential additions or structures with >250 sf footprint and all commercial additions or structures ➤ If substantially altering a nonconforming structure, indicate the location of where the existing nonconformity will be maintained.	3	3	3	3	3	3			
	3 hard copies at initial filing, 8-10 copies at final filing								
Elevations front, side and rear of building(s) and signage with vertical height - measure from either lowest point between building and lot line, or 15' from building, to the highest point of roof beam, deck line of a mansard roof or average height between the plate and ridge of a gable, hip or gambrel roof – and description of proposed materials and colors. Include proposed mechanical and electrical system components, exhaust / ventilation systems, transformers, and satellite dishes and method of screening	3	3	3	N/A	N/A	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	3 hard copies at initial filing, 8-10 copies at final filing								
Conceptual Floor Plans with square footage and # of units	Y	Y	Y	N/A	N/A	Y	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Neighborhood Context Map showing the neighborhood in which the tract lies and any impacts upon the area (scale no less than 1"=100')	N/A	Wire-less only ††	SPS R-A only	Y	Y	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Photographs showing the development site and surrounding parcels	Y	Y	Y	Y	Y	Y	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Traffic/Parking Analysis	3	3	3	3	3	N/A			
Traffic Study (if less than 25,000 square feet) estimate peak hour traffic volumes generated by proposed use, relation to existing volumes and projected future conditions	N/A	I/A	I/A, Y in TOD	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Traffic Impact Analysis (if 25,000 square feet or more) prepared by a professional traffic engineer who is registered with the Commonwealth of Massachusetts as a professional engineer in either traffic or transportation engineering, or any individual who has been certified by the Transportation Professional Certification Board, Inc. as a Professional Traffic Operations Engineer (PTOE). No other professional registration or qualification shall substitute for this requirement	N/A	I/A	I/A, Y in TOD	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Transportation Demand Management Plan	N/A	N/A	SPS R-A & TOD only	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
Parking Optimization Plan	N/A	N/A	TOD only	I/A	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	

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(Checklist of Required Information Continued)	Variance	SP / SPD	SPSR	PUD PMP	Subdivision	Revision to SP	Included	Waiver Requested
<p>Checklist key: # = # of copies Y = include 1 copy I/A = if applicable include 1 copy N/A = not applicable SPSR-A = SPSR in Assembly Sq. Mixed-Use District TOD = Transit Oriented District CCD = Corridor Commercial District †† = within 500 feet of property</p>								
Building Shadow Analysis	I/A, Y in CCD/ TOD	I/A, Y in CCD/ TOD	Y	Y	I/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>
Accessibility Narrative For multi-family residences of three or more units, and for places of public accommodation: describe the major accessibility requirements, if any, for the proposed project under federal or state law(s), as well as the applicant's strategies for meeting those requirements. If your project is exempt from any accessibility requirements due to scoping parameters in the applicable standard(s), be sure to explain how and why. Please consult the Americans with Disabilities Act (ADA), the Fair Housing Act (FHA), the regulations of the Massachusetts Architectural Access Board (MAAB), and other accessibility standards as necessary. This narrative may take the form of a brief memo, prepared by a licensed architect or code consultant.	I/A	I/A	I/A	I/A	I/A	I/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Housing Projects including 4 or more Units Explain measures taken to provide for, protect, or increase the affordability of housing units within the proposed structure; the degree of such affordability to households of low or moderate income, as defined by HUD; and the duration of legal assurances of such affordability.	I/A	I/A	I/A	I/A	I/A	I/A	<input type="checkbox"/>	<input type="checkbox"/>
LEED Worksheet (if greater than 10,000 square feet)	N/A	N/A	SPS R-A & TOD only	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>
Conceptual 3-D Model of the Master Plan at 20 scale or alternate scale acceptable to the SPGA. In CCD and TOD include abutting properties.	I/A	I/A	SPS R-A, CCD & TOD only	I/A	I/A	I/A	<input type="checkbox"/>	<input type="checkbox"/>
Rendering or Computer-Simulated Photograph (from at least 2 prominent locations along the surrounding rights-of-way)	N/A	Wire- less only	N/A	N/A	N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>

11-17. Supplemental Questions
Answer the supplemental questions for the permit you are seeking.