



**APPLICATION FOR SPECIAL  
PERMIT IN GENERAL  
BUSINESS DISTRICT**

**PLANNING BOARD  
BERKLEY, MA 02779**

\_\_\_\_\_, 20\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Street Address for Requested Special Permit: \_\_\_\_\_

Berkley Assessor's Map # \_\_\_\_\_ Lot # \_\_\_\_\_

Size of parcel (sq. ft./acres): \_\_\_\_\_ Frontage: \_\_\_\_\_

Size of proposed structure(s): \_\_\_\_\_

Intended Use for Special Permit: \_\_\_\_\_

Number of Parking Spaces: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Requested Hours of Operation: \_\_\_\_\_

Is a variance required from the Board of Appeals? ( ) yes ( ) no

If yes, specify the type and status of the application: \_\_\_\_\_

Is the proposed development served by a Public Water or Sewage system? ( ) yes ( ) no

Will any State or Federal Permits be required for this project? ( ) yes ( ) no

If yes, specify the type and agency requiring the study \_\_\_\_\_

Is the property subject to the Wetlands Protection Act and/or the General Wetlands Bylaw of the Town of Berkley?

( ) yes ( ) no

Is an environmental study or document required for this project under State or Federal Law? ( ) yes ( ) no

If yes, specify the type of study and the agency requiring the study \_\_\_\_\_

Description of the existing use (attach additional sheet if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of the proposed use (attach additional sheet if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attach a list of abutters with accompanying map, certified by the Berkley Assessor’s office, of owners of land directly opposite on any public or private way or street, and owners of land within 300 feet of the property line, including those applicable which may lie within any bordering towns.

\_\_\_\_\_  
**Applicant’s Signature**

\_\_\_\_\_  
**Owner’s Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Print Name**

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For Planning Board Use:

Date Received by Planning Board: \_\_\_\_\_

Site Plan Review: \_\_\_\_\_ Yes \_\_\_ No

Fee Received: \_\_\_\_\_

Mailing & Advertising Fees Received: \_\_\_\_\_

Form T Received: \_\_\_\_\_ Yes \_\_\_ No (All Taxes Must Be Current)

Affidavit Received: \_\_\_\_\_ Yes \_\_\_ No

Plan(s) Received: \_\_\_\_\_ Yes \_\_\_ No