



Received at the Office of the City Clerk

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Received by: \_\_\_\_\_

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

CITY OF NORTH ADAMS, MASSACHUSETTS

Zoning Board of Appeals

**SPECIAL PERMIT APPLICATION**

Date: \_\_\_\_\_

1. Name of applicant: \_\_\_\_\_
2. Project address: \_\_\_\_\_
3. Name and address of each attorney, agent or representative (*on back*).
4. The undersigned applicant is ( ) the owner of ( ) the holder of a written purchase option on the premises which is the subject of this application (*check one*).
5. The record title to said premises stands in the name(s) of: \_\_\_\_\_

6. Whose address is: \_\_\_\_\_

7. By a deed duly recorded in the Northern Berkshire Registry of Deeds in: Book \_\_\_\_\_ Page \_\_\_\_\_

**A COPY OF THE PROPERTY DEED MUST BE ATTACHED TO THIS APPLICATION FOR THE APPLICATION TO BE PROCESSED.**

8. Nature of the special permit (*circle one*)
  - a. Hotels, motels, inns, tourist cabins establishments (Section 13)
  - b. Off-site parking facilities (Section 6)
  - c. Alteration, reconstruction or extension of a non-conforming use (Section 5)
  - d. Off-site sign or billboard (Section 7)
  - e. Extension for removal of sign for terminated business (Section 7)
  - f. Roof signs (Section 7)
  - g. Temporary sign extension (Section 7)
  - h. Sign larger than permitted by right or announcing the name of a subdivision, multi-family housing development or shopping center (Section 7)
  - i. Veterinary Hospitals (Z-13.[57])
  - j. Other: \_\_\_\_\_

9. Please attach an accurate site plan indicating the dimensions of the property and the location, size and height of any existing and proposed buildings, and site improvements including parking areas, driveways, landscaping, utilities and any other information which will help the Zoning Board in its consideration of the application. If permit is requested for a sign, also include a drawing of the sign. **I understand that a public hearing on this application will not be scheduled until the required plan is submitted.**

10. A narrative is required. Please include information relative to signage, lighting, parking spaces, and number of clients/customers anticipated. Please note: **ALL REQUIRED INFORMATION MUST BE SUBMITTED BY THE APPLICATION DUE DATE OR THE APPLICATION WILL NOT BE PROCESSED.**

Applicant signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Received from applicant, sum of \$ \_\_\_\_\_ Hearing date: \_\_\_\_\_