



TOWN OF WEST SPRINGFIELD PLANNING BOARD

26 Central Street, Ste. 20
West Springfield, MA 01089-2753
Phone: (413) 263-3271 FAX: (413) 736-4414

PLANNING DEPT.
W. SPRINGFIELD, MA 01089

JAN 02 2020

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APPLICATION FOR SPECIAL PERMIT (SPB Form A)

Application is hereby made for a Special Permit in accordance with Section 300-9.0F of the Zoning Ordinance.

LOCATION OF PROJECT 246 Memorial Ave
West Springfield 01089

DATE 12-30-2019

PROPERTY OWNER H & P Realty LLC

ADDRESS 38 BAUSHWOOD RD
STAMFORD CT 06903

TELEPHONE 203 329 8676

EMAIL ADDRESS Hills619@gmail.com

SIGNATURE Hillary Weinroth

PRINT NAME OF SIGNEE HILLARY WEINROTH

APPLICANT Abdullah Nassir

ADDRESS 150 Fairview Ave Chicopee MA 01013

TELEPHONE 413 306 8748

EMAIL ADDRESS Abd Saood@yahoo.com

SIGNATURE Abdullah Nassir

PRINT NAME OF SIGNEE Abdullah Nassir

413 883 5540

Emil

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2020 JAN - 8 P 12:19
TOWN OF WEST SPRINGFIELD
PLANNING DEPT.

ENGINEER/ARCHITECT _____

ADDRESS _____

TELEPHONE _____

EMAIL ADDRESS _____

SIGNATURE _____

PRINT NAME OF SIGNEE _____

DESCRIPTION OF PROJECT Waiver for parking requirement

for grocery store

Waiver of 16 spaces

In accordance with the provisions of Section XII, outline to the Planning Board how the proposed Special Permit application will comply with the requirements of the Zoning Ordinance and the required findings of §300-12.3 and any provisions of §300-12.4. (PLEASE ATTACH).

THE FOLLOWING INFORMATION MUST BE SUBMITTED TO CONSIDER THE APPLICATION COMPLETE:

____ ORIGINAL PLUS 8 COPIES OF APPLICATION FORM INCLUDING FINDINGS OUTLINED IN SEC. 12.3 AND 12.4 OF THE ZONING ORDINANCE

____ 8 COPIES OF ALL PLANS

____ 1 COPY OF PLANS ELECTRONICALLY SENT TO LSILVER@WEST-SPRINGFIELD.MA.US

____ 4 COPIES OF ALL SUPPORTING DOCUMENTATION, STUDIES & REPORTS

A CERTIFIED LIST OF ABUTTERS OBTAINED FROM THE ASSESSOR'S OFFICE

____ A CHECK FOR \$70.00 MADE PAYABLE TO: "**THE WEST SPRINGFIELD RECORD**"

____ A CHECK FOR \$125.00 MADE PAYABLE TO: "**TOWN OF WEST SPRINGFIELD**" AS INDICATED IN THE PLANNING BOARD'S FEE SCHEDULE

THE APPLICANT SHOULD BE FAMILIAR WITH THE REQUIREMENTS OF THE SPECIAL PERMIT AND SHOULD ENSURE THAT THE APPLICATION COMPLIES WITH SAID REQUIREMENTS. FAILURE TO COMPLY WITH THE REQUIREMENTS MAY RESULT IN A DENIAL OF THE APPLICATION.

THE FILING OF THIS APPLICATION WITH THE TOWN OF WEST SPRINGFIELD AUTHORIZES EMPLOYEES, AGENTS AND REPRESENTATIVES OF THE TOWN TO ENTER AND INSPECT THE SUBJECT PREMISES, INCLUDING LAND AND STRUCTURES, TO EVALUATE EXISTING AND PROPOSED CONDITIONS AS THEY RELATE TO THE SUBMITTED APPLICATION.

