



Framingham Planning Board

Uniform Special Permit Application

Date of Application: February 28, 2014

Special Permits Requested:

Identify Applicable Site Plan Review pursuant to the Framingham Zoning By-Law:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Use Section III. <u>G.3.a</u> | <input type="checkbox"/> Open Space Residential Dev. Section IV.M. |
| <input type="checkbox"/> Active Adult Housing Section IV.P. | <input type="checkbox"/> Bonus Density Provisions Section IV.K.9. |
| <input type="checkbox"/> Planned Unit Development Section IV.J. | <input type="checkbox"/> Modification/Extension Request |
| <input type="checkbox"/> Proximity To Principal Use Section IV.B.2.a. | <input checked="" type="checkbox"/> Other (please indicate) <u>Waivers as set forth</u> |
| <input type="checkbox"/> Reduction In The Required Number Of Parking Spaces Section IV.B.1.c. | <u>in the Development</u> |
| <input type="checkbox"/> Dimensional Relief To Off-Street Parking Design Standards Section IV.B.3.g. | <u>Impact Statement and</u> |
| <input type="checkbox"/> Increase Floor Area Ratio (FAR) Sections III.C.1.f, III.C.2.f, IV.K.5.b. | <u>Access Permit.</u> |
| <input checked="" type="checkbox"/> Land Disturbance Section IV.H.2. | |

General Contact Information:

Note: all correspondence will be forwarded to the project contact only

Owner's name: CR 21 LLC c/o National Development phone: 617-527-9800

Owner's address: 2310 Washington Street, Newton Lower Falls, MA fax: _____
(number and street, town or city, state, zip code)

Applicant's name: Same phone: _____
(if other than owner)

Applicant's address: _____ fax: _____
(number and street, town or city, state, zip code)

Project contact's name: John J. O'Neil, III, Managing Partner phone: 617-559-5030
(if other than owner or applicant)

Project contact's address: 2310 Washington Street, Newton Lower Falls, MA fax: _____
(number and street, town or city, state, zip code)

Project contact's e-mail: joneil@natdev.com and Steve Senna at ssenna@natdev.com

General Property Information:

Address of lot or parcel: 490 and 432* Old Connecticut Path precinct#: 9

Framingham assessor's plan: sheet# 100/348.0 ,block# 0112 ,lot(s)# 0001.B
 sheet# 100/348.0 ,block# 0112 ,lot(s)# 0001.0*

The record title stands in the name of: CR 21 LLC

Parcel size (square feet/acres): 398,994 sq. ft. (490 Old Connecticut Path)

Gross floor area of building(s) on the site (see Section I.E.1. Of the Zoning By-Laws): 119,673 sq. ft.

Floor area ratio (gross floor area of building(s) ÷ size of parcel): .30

Current zoning of property: General Manufacturing (M)

Current use of property: Manufacturing (Former Sealtest Manufacturing Plant)

Proposed use of property (if different): "Health Club" (See Development Impact Statement for definition.)

Project Description:

Brief description of project (attach additional pages as necessary): See Development Impact Statement.

Parking Information:

Minimum number of parking spaces required (see Section IV.B.1.a. of the Zoning By-law): 594 spaces
Number of existing parking spaces: 102
Number of additional parking spaces proposed: 492
Method of calculating required number of off-street parking spaces to be provided: See Development Impact Statement.
(include no. of employees, occupants, dwelling units, seating capacity, gross floor area, etc., as applicable)
Peak hour maximum use = 1,782 occupants
1 space/3 occupants = 594 spaces

Fiscal Information:

Current assessed value of site: \$4,094,500 (490 Old Connecticut Path) and \$45,843 (432 Old Connecticut Path*)
Estimated value of project-related improvements: \$23,147,583
Current total local tax revenue from site: \$167,547 (490 Old Connecticut Path) and \$1,876 (432 Old Connecticut Path*)
Estimated post-development local tax revenue: \$1,011,486
Estimated number of project related jobs created: construction 80-100
permanent/part time 90 / 180

*Pro-rata value based on 30,047 square feet of 432 Old Connecticut Path to be acquired by Applicant as further discussed in the Development Impact Statement.

Requested Waivers from Submission Requirements:

Please submit written explanation with supporting documentation (if applicable) for all Waivers requested with this application.

Other Applicable Local, State and Federal Permits and Approvals:

Y	N	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Building Commissioner has reviewed this application/plans? <i>(Original written determination must be provided, form attached)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The lot is on a Scenic Road? <i>(see Article VI, Section 10 of the Town of Framingham' General By-Laws)</i> <i>(If yes, The applicant must indicate if any repair, maintenance, reconstruction, paving work or other activities result in the cutting or removal of trees, or the tearing down or destruction of stone walls, or portions thereof. A Modification to a Scenic Road application may need to be filed.)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The project impacts Public Shade Tree as protected by MGL c. 87, Sect. 3.?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The project involves alteration or demolition of buildings which are at least 50 years old? <i>(If yes, the applicant must obtain a determination of historical or architectural significance from the Framingham Historical Commission in conformance with Article V. Section 17A. of the Town of Framingham' General By-Laws.)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The lot is situated in an historic district? <i>(see Article V. Section 5. of the Town of Framingham's General By-Laws)</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The proposal has an impact on interests and values protected by the Framingham Wetland Protection By-Law? <i>(see Article V. Section 18. of the Town of Framingham's General By-Laws.)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The project is located in a designated federal Floodplain Hazard Zone?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The project has received or will require a special permit(s) from the Zoning Board of Appeals? <i>(Please attach a copy)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project has received or will require a variance(s) from the Zoning Board of Appeals? <i>(Please attach a copy)</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Project will require a Street Opening Permit from the Board of Selectmen?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project will require a Massachusetts Highway Department Permit?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Project will require a Public Way Access Permit? <i>(see Article VI., Section 8. of the Town of Framingham's General By-Laws.)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project is subject to the Highway Overlay District Regulations IV.K.?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project is subject to the Mixed Use Regulations IV.N.?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project is subject to the Affordable Housing By-Law, IV.O.?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project is subject to the Automatic Carwash/Self-service Carwash, IV.J.?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Project has received/apply for Wireless Communication Approval?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Project is requires a National Pollutant Discharge Elimination System (NPDES permit)?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Project is a designated Brownfield Site and/or subject of a 21E Survey?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	This Property was subject to a prior Permit(s) and/or Approval(s) issued by the Planning Board? <i>(Please indicate permits and approvals)_____</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	This Application is subject to the Central Business Design Standards? <i>(Article 17 of the Planning Board Administrative Rules and Regulations)</i>

Certification:

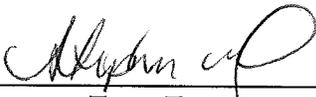
The Planning Board is entitled to rely on this representation as being the full and complete statement of the applicant(s)/owner. Therefore, the undersigned certifies that the information provided on the plan, this application, including appendices, and the information contained in any required impact statements is a true and accurate representation of facts pertinent to the subject parcel of land and proposed development/project.

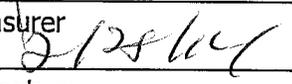
Signature of Applicant/Owner _____ Date: _____
 Signature of Applicant (Non-Owner) _____ Date: _____

To be completed by Town Treasurer:

♦**Note:** In accordance with Article IX of the By-Laws of the Town of Framingham, the Planning Board may withhold permits and approvals in the event that an applicant has neglected to pay local taxes, fees, assessments or other municipal charges. In order to satisfy the objective of this By-Law, Town Treasurer's Signature must be obtained below to verify that no such outstanding charges have accrued relative to this application. This application will not be accepted without the following confirmation:

The signature below confirms that the applicant/owner has paid all local taxes, fees, assessments or other municipal charges and has no outstanding obligations due the Town Of Framingham.



Town Treasurer


Date of Signature

To be completed by the Framingham Planning Board:

Date completed application received: _____
Date application distributed to other boards/departments: _____
Filing fee of: _____ Paid: _____
Scheduled hearing date: _____
Advertisement date(s): _____ publication _____
Affidavit of notice submitted on: _____ date abutter's notice mailed _____
Decision: _____

Date of decision: _____