

## **BELLINGHAM ZONING BOARD**

# 10 MECHANIC STREET BELLINGHAM, MASSACHUSETTS 02019 (508) 657-2893 ZoningBoard@bellinghamma.org

#### **SPECIFY TYPE OF APPLICATION**

(circle)

Appeal

Special Permit

Variance

#### **APPEAL OF BUILDING INSPECTORS DECISION:**

■ Please attach a copy of the Building Inspector's letter/decision. **SPECIAL PERMIT:** (check all that apply) ■ Principal Use ■ Non-Conforming Situation ■ Flood Plain ■ Accessory Use Home Occupation ■ Comprehensive Permit ■ Multi-Family Housing ■ Earth Removal ■ Family Apartment □ Other **VARIANCE**: (check all that apply) Rear Yard Setback ■Area ■Lot Width ■Side Yard Setback ■Lot Frontage ■Percent Area Building ■Front Yard Setback Signature & Address \$70 Phone 50 8 500 710 0 **Property Owner** Signature Email MCW4( Mink Phone SOX 520 Address of Subject Premises If no address, description of property\_\_



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Dimensions of Lot: Frontage: 70'  Area: 1900 M Lot Width: 70'	
Zoning District(s) subject premises located: B-	
Assessor's Map: Lot:	
Describe proposed activity: RENIN 45 MAIN RESIDENCE ENGINE REPENT DISINESS.	t Resime small
Are there any buildings on the premises (if so, please describe them including their dimension)?	
Sinch Family Name applies 30×30	& Story
Describe the subject premises (terrain, septic systems) Single Fainly of business  + who water + source, parking	em, description of area, etc.)  GENTIGE & drive won 5
How long have you owned the subject premises? 33years What is the present use of the subject premises?	
State grounds for the Special Permit/Variance or Return School Permit/Variance or Return School Permit/Variance or Return School Permit School	Appeal: (please be specific)
Owner: Robert Chimen Signature Robert Chimen Signature Robert Chimen	Date 11 1 2 3
Effective 8/2017	Dan H O
Plea unle	se note: This application cannot be processed si initialed by the Town Collector:  n Collector:  Date: 1   0   23