



# TOWN OF TOPSFIELD

## ZONING BOARD OF APPEALS

8 West Common Street, Topsfield, Massachusetts 01983

2014 APR 18 AM 11: 13

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TOWN CLERK  
TOPSFIELD, MA

## ZONING BOARD OF APPEALS

### APPLICATION FORM A

**APPLICATION FEE \$200**

#### **ZONING BOARD OF APPEALS APPLICATION GUIDELINES:**

- Questions regarding the application should be directed to the Community Development Coordinator, Chairman of the ZBA or Inspector of Buildings.
- See Inspector of Buildings for permit denial.
- Procure an application from the Community Development Coordinator, Inspector of Buildings or Town Clerk
- See Assessor's Office for Abutters' List.
- File with the Town Clerk. "Each application for a special permit shall be filed by the petitioner with the town clerk and a copy of said application, including the date and time of filing certified by the town clerk, shall be filed forthwith by the petitioner with the special permit granting authority." (M.G.L. Chapter 40A, Section 9)
- The petitioner, after filing with the Town Clerk, files the granting authority's copies with the Community Development Coordinator who receives application for the permit granting authority, in this case the Zoning Board of Appeals.

Roberta M. Knight  
Community Development Coordinator  
Town Hall  
978-887-1504  
rknight@topsfeld-ma.gov

# Application for Zoning Relief

## Form A

Before you file this application, it is necessary that you be familiar with the requirements for filing plans and other materials in support of this application as specified in the Topsfield Zoning Bylaws and the Topsfield Zoning Board of Appeals Rules and Procedures that are available from the Town Clerk.

Incomplete applications will not be considered unless waivers are previously obtained from the Zoning Board of Appeals

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BOARD USE ONLY

Date Filed:

Date Action Due

Public Hearing:

Decision:

Revised Form Date: 04/26/2011

NATURE OF APPLICATION:

- Petition for Special Permit pursuant to Article III, Section 3.05 of the Zoning Bylaw.
- Petition for Finding pursuant to Article \_\_\_\_, Section \_\_\_\_ of the Bylaw.
- Petition for a Variance from Article \_\_\_\_, Section \_\_\_\_, of the Zoning Bylaw.
- Petition for Site Plan Review pursuant to Article IX of the Zoning Bylaw (and the Guidelines and Performance Standards for Activities Subject to the Provisions of Article IX of the Topsfield Zoning Bylaw; and Supplement Form C for submitted requirements and formats).
- Petition for a Comprehensive Permit pursuant to G.L.c. 40B, Section 20-23.
- Appeal from the decision dated \_\_\_\_\_ of the Building Inspector or others pursuant to L.L. c. 40A, Section 15.

DESCRIPTION OF APPLICANT:

- a. Name Essex Agricultural Society
- b. Address 207 Boston St., Topsfield, MA 01983
- c. Phone Number (978) 887-5000
- d. Interest in Premises (e.g., owner, tenant, prospective purchaser, etc.) Owner  
(Attach copy of lease and/or letter of authorization from owner, if applicable)

DESCRIPTION OF PREMISES:

- a. Assessor's Map 57-4, Lot(s) 1 & 2, Zoning District \_\_\_\_
- b. Location of Premises (number and street) 207 Boston St.
- c. Name and address of legal owner (if different from Applicant) N/A
- d. Deed to the Premises recorded at (if known):  
 Essex South District Registry of Deeds, Book 10134 Page 263  
 Essex South Registry District of the Land Court, Certificate Number \_\_\_\_
- e. Prior zoning decisions affecting the Premises (if any):  
Date of Decision 4/22/09 Name of Applicant Essex Agricultural Society  
Nature of Decision Approved
- f. Present use of the Premises Agricultural, educational
- g. Present structures conform to current Zoning Bylaw.  Yes  No. If no, in what respect does it not conform. \_\_\_\_\_

PROPOSAL (attach additional sheets if necessary):

- a. General Description:  
Special Permit to allow parking of cars & the use of loudspeakers until 11:00 P.M. & to operate The Midway until 11:30 P.M., at the annual fair to be held October 3-13 in 2014 & for the following four years during the fair dates (up to 4 preceding Columbus Day)

b. If proposal is for construction or alteration of an existing structure, please state:

	FRONT	REAR	SIDE(S)
1. Setbacks required per bylaw	_____	_____	_____
2. Existing setbacks	_____	_____	_____
3. Setbacks proposed	_____	_____	_____
	FRONTAGE		AREA
4. Frontage and area required by bylaw	_____		_____
5. Existing frontage (s) and area	_____		_____
6. Frontage (s) and area proposed	_____		_____
	FEET	STORIES	
7. Existing Height	_____	_____	
8. Height proposed	_____	_____	

c. Other town, state or federal permits or licenses required, if any:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NECESSARY ACCOMPANYING DATA:

It is required that every application be accompanied by appropriate supporting data. Failure to submit appropriate and complete data could result in delay and/or denial of application for zoning relief. Place a check next to the applicable accompanying supporting data:

Variance of Special Permit Applications:

(See Zoning Board of Appeals Rules and Procedures Section III)

All required supporting data attached  Yes  No

Site Plan Review Applications:

(See Town of Topsfield Zoning Bylaw, Article IX, Section 9.05. See also Guidelines and Performance Standards for Activities Subject to the Provisions of Article IX of the Topsfield Zoning Bylaw)

All required supporting data attached  Yes  No

Comprehensive Permit Applications:

(See G.L.c. 40B, Sections 20-23)

All required supporting data attached  Yes  No

Appeals from decisions of Building Inspector or Others:

(See Zoning Board of Appeals Rules and Procedures, Section III (1) (e))

All required supporting data attached  Yes  No

If all required supporting data is not attached, why not:

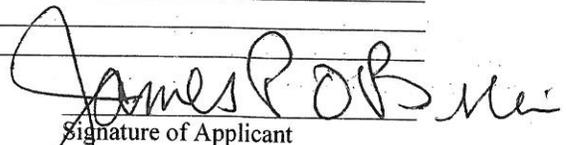
\_\_\_\_\_

\_\_\_\_\_

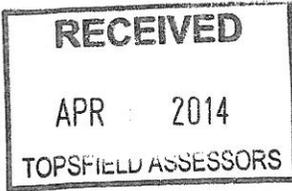
\_\_\_\_\_

4/18/2011

Date



Signature of Applicant



TOWN OF TOPSFIELD, MA  
ZONING BOARD OF APPEALS

Application Supplement Form B

Attach to this form a copy of the Assessor's map (scale 1" equals 200') showing the property and all other properties and roadways within 300 feet of any portion of the property. Also, show the lot number and lot owner's name on each lot within the 300'.

List below the lot owner names and mailing addresses as shown in the Assessors' records, beginning with the property of the Applicant (locus).

Applicant's Name, Mailing Address: Paula Burke  
Essex Agricultural Society / P.O. Box 134 / Topsfield, MA 01983  
Telephone No. \_\_\_\_\_

Locus: 207 Boston ST                      57-4-1      957-4-2

<u>Map</u>	<u>Block</u>	<u>Location</u>	<u>Owner</u>	<u>(If different from location) Mailing Address</u>
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SEE ATTACHED LIST

If needed, attach additional sheets. \_\_\_\_\_

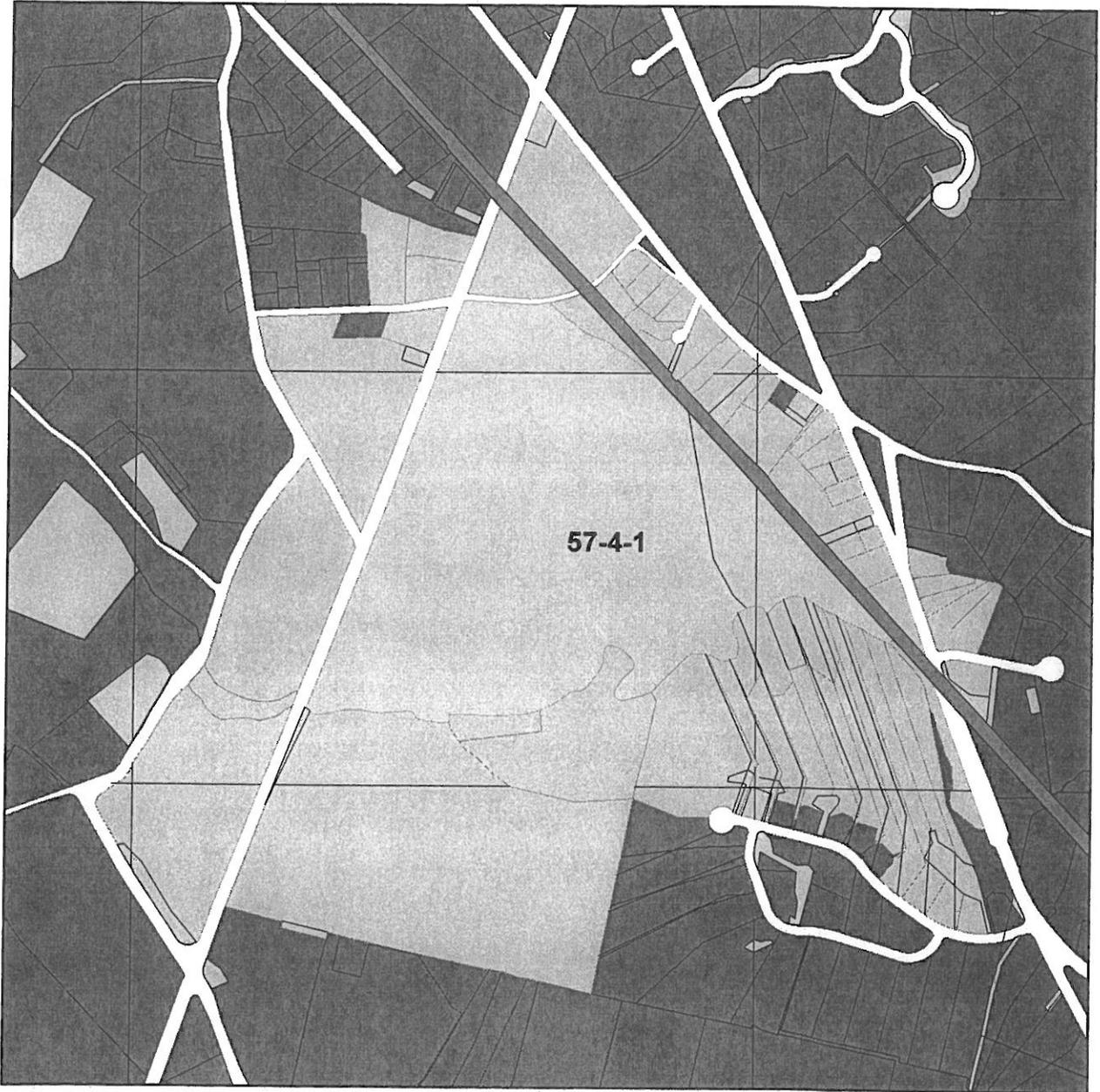
Assessor's Certification

To the Topsfield Zoning Board of Appeals:  
  
This is to certify that, at the time of the last assessment for taxation made by the Town of Topsfield, the names and mailing addresses of the parties assessed as owners of land within 300' of the parcel of land shown in the attached sketch were as listed.

Authorized Signature Assessors' Office Katherine Jackson      4/4/14

Date of Verification 4/4/14

57-4-1

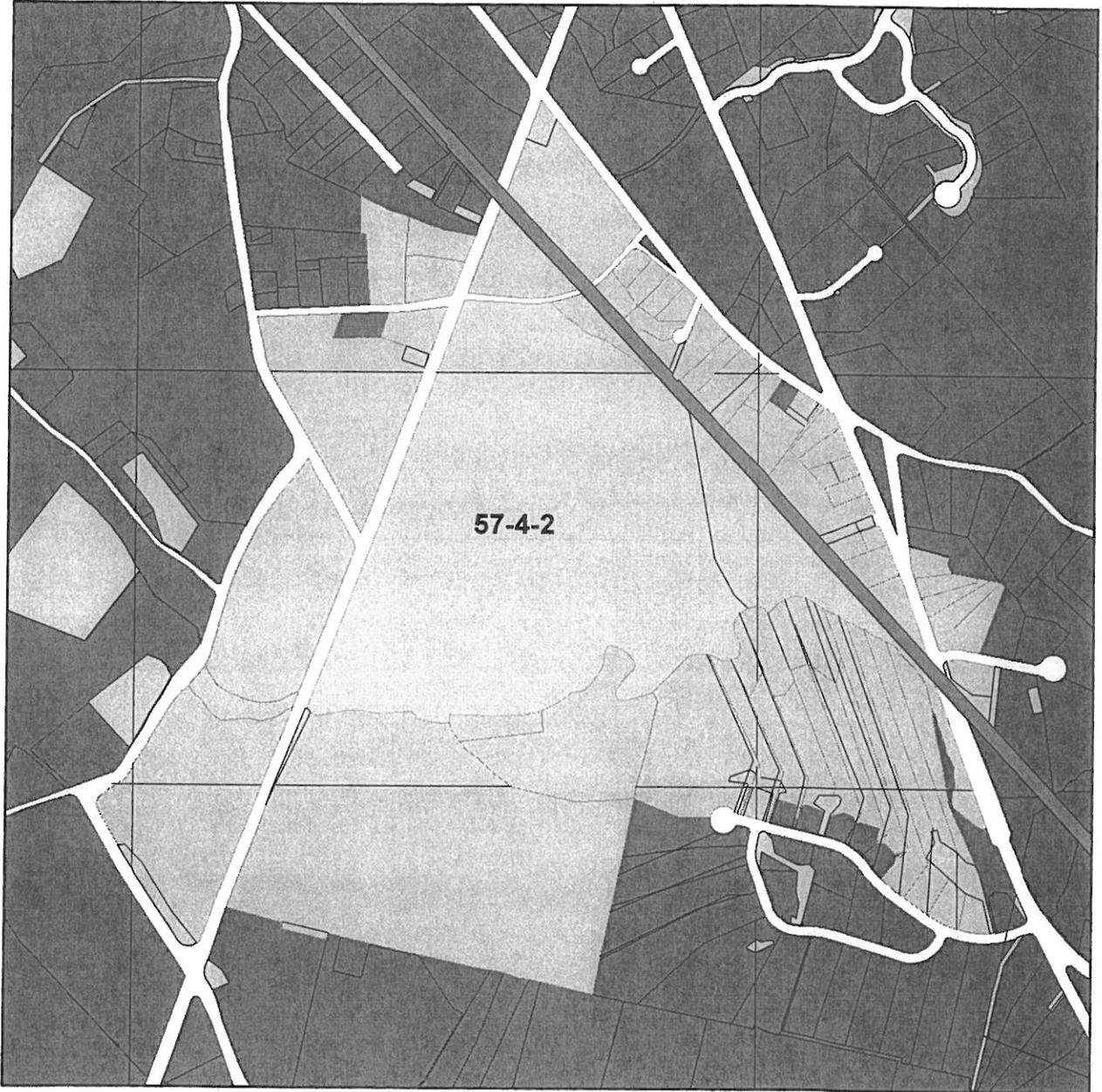


GEOGRAPHIC INFORMATION SYSTEM

VISION APPRAISAL TECHNOLOGY



57-4-2 207 BOSTON ST



GEOGRAPHIC INFORMATION SYSTEM

VISION APPRAISAL TECHNOLOGY

