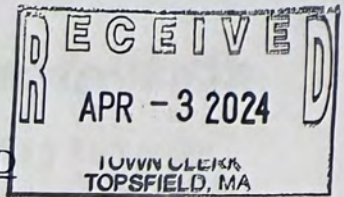


## TOWN OF TOPSFIELD

### SPECIAL PERMIT APPLICATION TO THE PLANNING BOARD FOR A TEMPORARY ACCESSORY APARTMENT



1. Applicant(s): (This application must be signed by all owners as identified in the deed attached to this application).

<u>Name</u>	<u>Address</u>
Philip & Carrie McGowan	15 Stagecoach Rd Topsfield MA 01983
Jane & Robert Fuller	15 Stagecoach Rd Topsfield MA 01983

☒ Deed attached

2. Property Address: 15 Stagecoach Rd Topsfield MA 01983
3. Registry of Deeds Title Reference: Book 90653 , Page 147
4. Attach list of all abutters within 300 feet of each lot line to whom notice of the application shall be given.
5. State the names and ages of all occupants of the main dwelling.

<u>Name</u>	<u>Age</u>	<u>Name</u>	<u>Age</u>
Philip McGowan	38		
Carrie McGowan	39		
Rhys McGowan	1		

6. State the names and ages of all proposed occupants of the temporary accessory apartment.


<u>Name</u>	<u>Age</u>	<u>Name</u>	<u>Age</u>
Jane Fuller	70	Robert Fuller	67

7. State the identity of and the family or other relationship between the owner or occupant of the main dwelling and the owner or occupant of the Temporary Accessory Apartment upon which this application is based.



Janet Rob are Carrie's parents & Rhys's grandparents

8. State the reason for the Temporary Accessory Apartment. (Article VII § 7.03 of the bylaw requires that the primary purpose of the Temporary Accessory Apartment shall be to maximize privacy, dignity, and independent living among the occupants of the main dwelling and the Temporary Accessory Apartment).

 Amnesty requested.

Private dwelling for both parties

9. State estimated cost of all improvements to create the Temporary Accessory Apartment.

\$0 (already built by previous owners)

10. State whether improvements include structural work, and if so describe them.

No

11. State the description and frequency of the personal care assistance to be provided.

N/A

12. Did this residence have a previous Temporary Accessory Apartment permit? If so, please list the expiration date of that permit. yes, by prior owner, expired in 2019

13. State whether the occupant(s) of the Temporary Accessory Apartment will make any financial contribution to the applicants and if so explain in detail. (Article VII § 7.03 of the bylaw prohibits generating income as a primary purpose of the Temporary Accessory Apartment).

☒ Yes  
☐ No

If yes, state amount, frequency and explain in detail.

Shared monthly mortgage, we are co-owners

14. Attach scaled drawings of the floor plan of the existing main dwelling and the proposed Temporary Accessory Apartment including elevations if exterior modifications are proposed.



- ✍ Floor plan attached
- ✍ Elevation attached

15. Attach written certification by the Board of Health that the sewage disposal system has sufficient capacity to accommodate the occupants of the Temporary Accessory Apartment.

- ✍ Board of Health certification attached

16. Identify the zoning district and present use of the subject property and the commencement date of that use.

Zoning: ORA; present use: Single family w/ integrated inlaw  
a. apartment; commencement date: 3/28/24

By signing this application, all applicants verify that all purposes, procedures and requirements as set forth in the bylaw have been fulfilled and covenant that the use of the Temporary Accessory Apartment shall forthwith be discontinued upon termination as provided by the bylaw.

Dated: 4/2/24

Carrie K.M. Gowan

[Signature]

[Signature]

Jane K. Fuller



3 NE  
PC

SO. ESSEX #97 Bk:42012 Pg:119  
03/06/2024 11:42 DEED Pg 1/3

MASSACHUSETTS EXCISE TAX  
Southern Essex District ROD  
Date: 03/06/2024 11:42 AM  
ID: 1609179 Doc# 20240306000970  
Fee: \$4,446.00  
Cons: \$975,000.00

QUITCLAIM DEED

Property Address: 15 Stagecoach Road, Topsfield, Massachusetts 01983

We, DAVID M. MARTIN and KAREN S. MARTIN as TRUSTEES of the MARTIN FAMILY LIVING TRUST u/d/t dated January 7, 2022 and evidenced by a Trustee's Certificate pursuant to M.G.L. c. 184, §35 recorded with the Essex County Southern District Registry of Deeds in Book 40653, Page 147, of Topsfield, Essex County, Massachusetts, for consideration paid and in full consideration of Nine Hundred Seventy Five Thousand and No/100 Dollars (\$975,000.00) grant to PHILIP E. McGOWAN and CARRIE K. McGOWAN a married couple as tenants by the entirety, and ROBERT RANNEY FULLER and JANE KELLY FULLER, a married couple as tenants by the entirety, and each such married couple as joint tenants with rights of survivorship, now all of 15 Stagecoach Road, Topsfield, Essex County, Massachusetts,

with QUITCLAIM COVENANTS,

The land in Topsfield, Essex County, Massachusetts, with the buildings and improvements thereon situated on the southwesterly side of Stagecoach Road and bounded and described as follows:

- NORTHERLY by Stagecoach Road, 460 feet;
- EASTERLY by Lot #5 on a plan hereinafter referred to, 259.90 feet;
- SOUTHWESTERLY on three courses by land now or formerly of MacMullen, 27.20 feet; 150.73 feet, and 40.89 feet, respectively;
- SOUTHEASTERLY by said MacMullen land, 310.25 feet; and
- WESTERLY by Lot #2 on said plan, 252.04 feet.

Containing 87,600 square feet of land and being shown as Lot #3 on a plan dated June 30, 1956 and recorded in Essex South District Registry of Deeds, Plan Book 88. Pan 52.

With the execution hereof, we, the within grantors, release all rights of homestead in the premises conveyed hereby and attest under the pains and penalties of perjury that there are no persons who can claim homestead rights in the premises through us.



Meaning and intending to convey the same premises as were conveyed to the withing grantors by Deed January 7, 2022 and recorded with the Essex County Southern District Registry of Deeds on January 13, 2022 in Book 40653, Page 149.

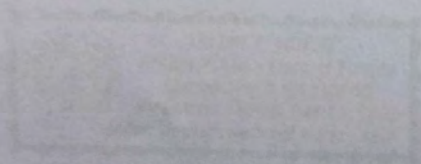
STATE OF FLORIDA COMMISSIONER OF REVENUE

Essex County

On the 23 day of February

2024 before me the undersigned authority duly sworn and qualified appeared the above named David M. Martin and Karen S. Martin as Trustees of the Martin Family Living Trust, proved to me through satisfactory evidence of their identity and authority to execute the foregoing instrument.

They acknowledged to me that they signed the foregoing instrument voluntarily and for the purposes and consideration therein expressed.



*David M. Martin*

*Karen S. Martin*

Notary Public, State of Florida



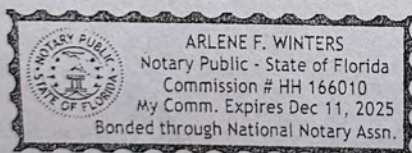
Witness our hands and seals this 23<sup>rd</sup> day of February, 2024.

David M. Martin  
David M. Martin, Trustee of the  
Martin Family Living Trust

Karen S. Martin  
Karen S. Martin, Trustee of the  
Martin Family Living Trust

STATE of Florida  
Sumter County ~~Essex County, ss.~~ COMMONWEALTH OF MASSACHUSETTS

On this 23 day of February, 2024, before me, the undersigned notary public, personally appeared the above-named David M. Martin and Karen S. Martin as Trustees of the Martin Family Living Trust, proved to me through satisfactory evidence of identification, which was/were Driver's License, to be the persons whose names are signed on the preceding or attached document and acknowledged to me that they signed it voluntarily for its stated purpose.

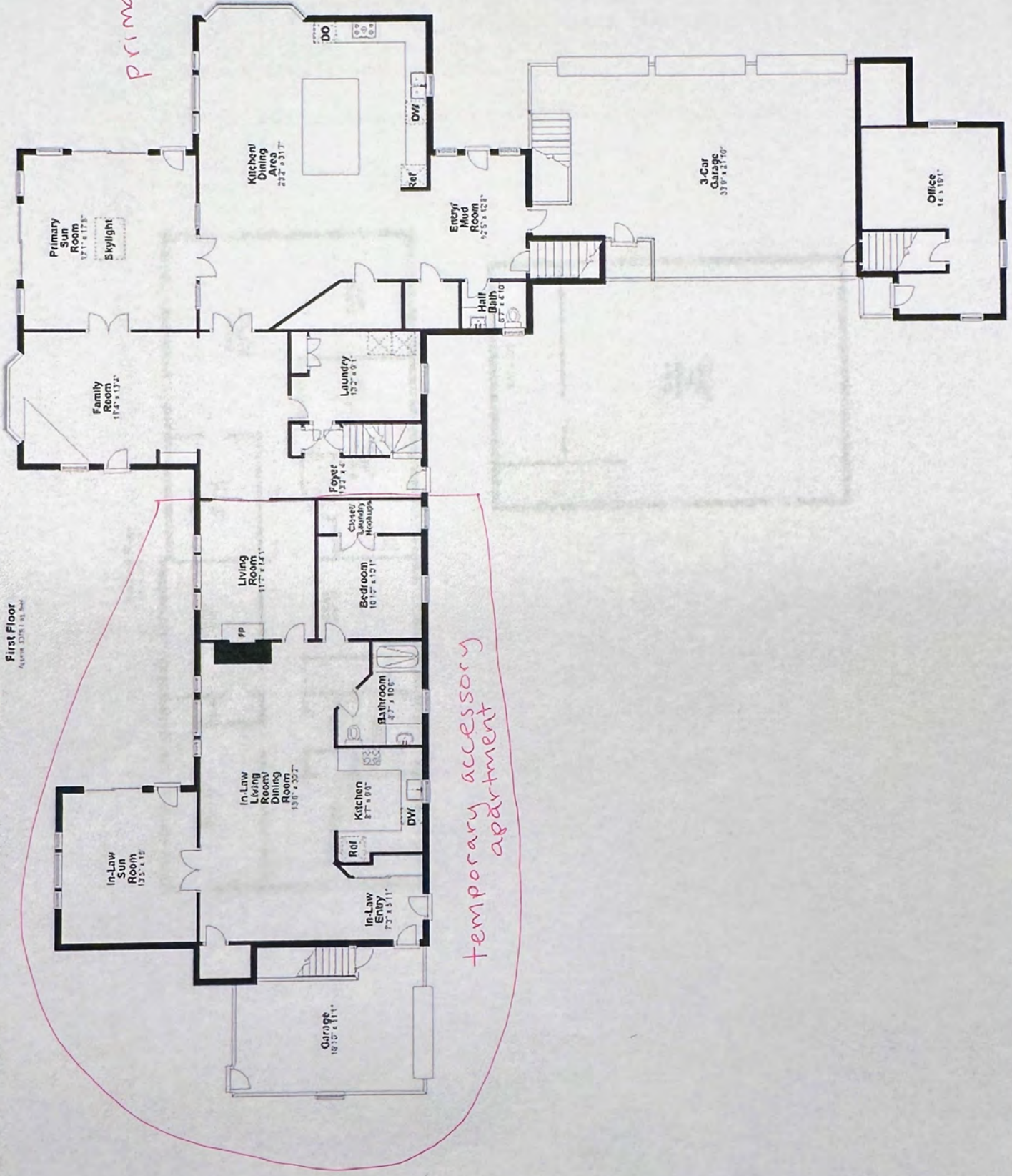


Arlene F. Winters  
Notary Public: Arlene F. Winters  
My commission expires: 12/11/2025



# 13-15 Stagecoach Road, Topsfield, MA

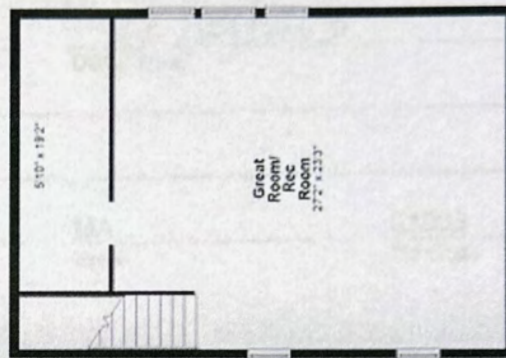
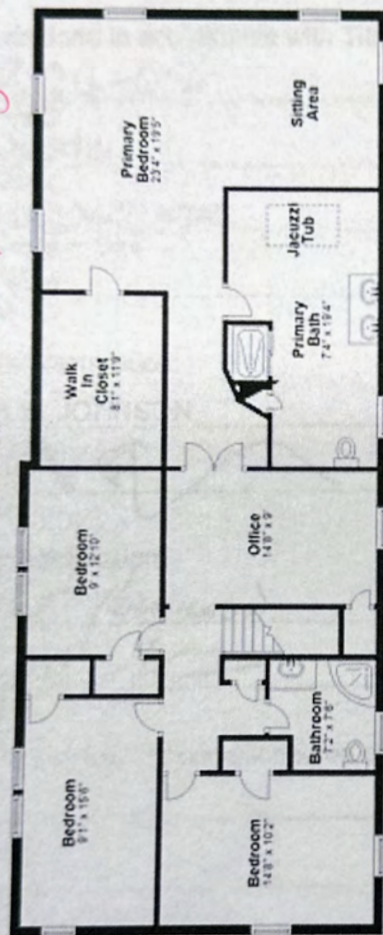
First Floor  
Approx. 2278 sq. ft.





# 13-15 Stagecoach Road, Topsfield, MA

Second Floor — all primary dwelling







Commonwealth of Massachusetts  
City/Town of TOPSFIELD  
**Certificate of Compliance**  
Form 3

RECEIVED

DEC 20 2023

TOPSFIELD

BOARD OF HEALTH

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

**This is to Certify** that the following work on an On-Site Sewage Disposal System

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



- ☐ Construction of a new system  
☒ Repair or replacement of an existing system  
☐ Repair or replacement of an existing system component

Has been done in accordance with Title 5 and the Disposal System Construction Permit (DSCP):

DSCP Number R24-08 DSCP Date 11/29/23  
DAVID MARTIN  
Facility Owner  
15 STAGECOACH ROAD  
Street Address or Lot #  
TOPSFIELD MA 01983  
City/Town State Zip Code

Designer Information:

DANIEL B. JOHNSON DSD, INC.  
Name Name of Company  
[Signature] 12/18/23  
Signature Date

Installer Information:

MILT HAMILTON Hamilton Construction Inc  
Name Name of Company  
[Signature] 1/24/23  
Signature Date

Use of this system is conditioned on compliance with the provisions set forth below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The issuance of this certificate shall not be construed as a guarantee that the system will function as designed.

TOPSFIELD HEALTH DIRECTOR  
Approving Authority  
[Signature] 12.27.23  
Signature Date





## TOWN OF TOPSFIELD

### BOARD OF ASSESSORS

8 West Common Street

Topsfield, Massachusetts 01983

Telephone: (978) 887-1514 Fax: (978) 887-1502

This form must be completed and Assessor fee of \$20.00 must be paid before release of the certified abutters list.

Submission Date **Wednesday, March 20, 2024** Issue Date **Monday, March 25, 2024**

Department requiring list: **Planning Board**

300 Ft. ☒ 100 Ft. ☐ (Conservation Only) ☐ Direct Abutters

Person/Party requesting list: **Carrie McGowan**

Address: **15 Stagecoach Road Topsfield, MA**

Phone #: **617-833-9288** Email Address **Carriekmcgowan@gmail.com** Misc: \_\_\_\_\_

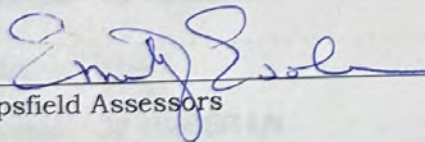
Property Owner: **Carrie and Phillip McGowan**

Assessor's Map(s) **11** Lot(s) **17** Location **15 Stagecoach Road**

Assessor's Fee Paid: ☒ Yes \_\_\_\_\_ No

The Assessors' Office requires ten (10) working days to certify an Abutters List. This list is valid for sixty days only from date of issue.

Certified By:

  
Topsfield Assessors



### Certification of Parties in Interest

The Board of Assessors of the Town of Topsfield do hereby certify, in accordance with the provisions of Section 10 and 11 of Chapter 808 of the Acts of 1975, that the following named persons, firms and corporations are parties in interest, as in said Section 11 defined, with respect to the premises herein above described.





# 300 feet Abutters List Report

Topsfield, MA  
March 25, 2024



## Subject Property:

Parcel Number: 11-17  
CAMA Number: 11-17  
Property Address: 15 STAGECOACH RD

Mailing Address: MARTIN DAVID M TR  
15 STAGECOACH RD  
TOPSFIELD, MA 01983

## Abutters:

Parcel Number: 11-10  
CAMA Number: 11-10  
Property Address: 20 STAGECOACH RD

Mailing Address: RIZZA MARK S TR  
20 STAGECOACH RD  
TOPSFIELD, MA 01983

Parcel Number: 11-15  
CAMA Number: 11-15  
Property Address: 29 STAGECOACH RD

Mailing Address: DIPIETRO JOSEPH D  
29 STAGECOACH RD  
TOPSFIELD, MA 01983

Parcel Number: 11-16  
CAMA Number: 11-16  
Property Address: 23 STAGECOACH RD

Mailing Address: GRAVES WILLIAM C TR  
23 STAGECOACH RD  
TOPSFIELD, MA 01983

Parcel Number: 11-18  
CAMA Number: 11-18  
Property Address: 7 STAGECOACH RD

Mailing Address: SERINO CINDY A  
7 STAGECOACH RD  
TOPSFIELD, MA 01983

Parcel Number: 11-19  
CAMA Number: 11-19  
Property Address: 19 ROWLEY RD

Mailing Address: WEIL THOMAS G TR  
19 ROWLEY RD  
TOPSFIELD, MA 01983

Parcel Number: 11-21  
CAMA Number: 11-21  
Property Address: 12 TIMBER LN

Mailing Address: RENDA ERIC M  
12 TIMBER LN  
TOPSFIELD, MA 01983

Parcel Number: 11-22  
CAMA Number: 11-22  
Property Address: 18 TIMBER LN

Mailing Address: RENDA ERIC M  
18 TIMBER LN  
TOPSFIELD, MA 01983

Parcel Number: 11-23  
CAMA Number: 11-23  
Property Address: 22 TIMBER LN

Mailing Address: MAJESKI STEPHEN V  
22 TIMBER LN  
TOPSFIELD, MA 01983

Parcel Number: 11-24  
CAMA Number: 11-24  
Property Address: 26 TIMBER LN

Mailing Address: BROWN JOHN  
26 TIMBER LN  
TOPSFIELD, MA 01983

Parcel Number: 11-25  
CAMA Number: 11-25  
Property Address: 30 TIMBER LN

Mailing Address: GREEN WINTHROP J  
30 TIMBER LN  
TOPSFIELD, MA 01983



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3/25/2024

Page 1 of 2





# 300 feet Abutters List Report

Topsfield, MA  
March 25, 2024



Parcel Number: 11-26  
CAMA Number: 11-26  
Property Address: 34 TIMBER LN

Mailing Address: PETERSON DAVID C  
34 TIMBER LN  
TOPSFIELD, MA 01983

Parcel Number: 11-3  
CAMA Number: 11-3  
Property Address: 17 PHEASANT LN

Mailing Address: BERRIAN DONALD W TR  
17 PHEASANT LN  
TOPSFIELD, MA 01983

Parcel Number: 11-4  
CAMA Number: 11-4  
Property Address: 15 PHEASANT LN

Mailing Address: SNODGRAS BAMBI L TR  
15 PHEASANT LN  
TOPSFIELD, MA 01983

Parcel Number: 11-5  
CAMA Number: 11-5  
Property Address: 13 PHEASANT LN

Mailing Address: SPOFFORD ANDREW A  
13 PHEASANT LN  
TOPSFIELD, MA 01983

Parcel Number: 11-6  
CAMA Number: 11-6  
Property Address: 11 PHEASANT LN

Mailing Address: BENNETT BRENDA  
11 PHEASANT LN  
TOPSFIELD, MA 01983

Parcel Number: 11-7  
CAMA Number: 11-7  
Property Address: 7 PHEASANT LN

Mailing Address: DILLION PETER M & SUSAN B TRS  
7 PHEASANT LN  
TOPSFIELD, MA 01983

Parcel Number: 11-8  
CAMA Number: 11-8  
Property Address: 25 ROWLEY RD

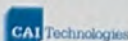
Mailing Address: BJORNSTAD BLAINE C  
25 ROWLEY RD  
TOPSFIELD, MA 01983

Parcel Number: 11-9  
CAMA Number: 11-9  
Property Address: 12 STAGECOACH RD

Mailing Address: GRITZ CLAYTON  
12 STAGECOACH RD  
TOPSFIELD, MA 01983

Parcel Number: 6-26  
CAMA Number: 6-26  
Property Address: 31 ROWLEY RD

Mailing Address: DIETRICH DENNIS R  
31 ROWLEY RD  
TOPSFIELD, MA 01983



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3/25/2024

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Page 2 of 2





Town of Topsfield, MA

1 inch = 300 Feet

March 25, 2024



CAI Technologies

Precision Mapping. Geospatial Solutions.

www.cai-tech.com



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