Issue Date: 04/26/2011

RECEIVED
DEC 11 2015
TOWN CLERK
TOPSFIELD, MA

NATURE OF APPLICATION:

X Petition for Special Permit pursuant to Article III, Section 4.12B 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 Steve Kucher

b. Address 9 Madison Ave Groveland MA

c. Phone Number W 978 561 1477 H 978 374 5284

d. Interest in Premises (e.g., owner, tenant, prospective purchaser, etc.) skerch25@gmail.com
(Attach copy of lease and/or letter of authorization from owner, if applicable)

DESCRIPTION OF PREMISES:

a. Assessor's Map 40, Lot(s) 79, Zoning District BV

b. Location of Premises (number and street) 17 Main St

c. Name and address of legal owner (if different from Applicant) 4 Park St Brian Woodland

d. Deed to the Premises recorded at (if known):
____ Essex South District Registry of Deeds, Book _____ Page _____
____ Essex South Registry District of the Land Court, Certificate Number _____

e. Prior zoning decisions affecting the Premises (if any):
Date of Decision 2007, 2009 & 2010 Name of Applicant Riversky & Main St Market New Meadows
Nature of Decision Special Permit for Specialty Market

f. Present use of the Premises _____

g. Present structures conform to current Zoning Bylaw. ____ Yes X No. If no, in what respect does it not conform. variance given for setbacks

PROPOSAL (attach additional sheets if necessary):

a. General Description: Limited Service Restaurant

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 <u>not</u> attached, why not:

_____

_____

_____

_____

Dec 7.15
Date

Signature of Applicant

17 Main

TOWN OF TOPSFIELD, MA
PLANNING BOARD

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: Steve Kuchar

Telephone No. 978-561-1477

Locus:

Map	Block	Location	Owner	(If different from location) Mailing Address
40	79	17 Main ST.		

SEE ATTACHED LIST

If needed, attach additional sheets.

Assessor's Certification

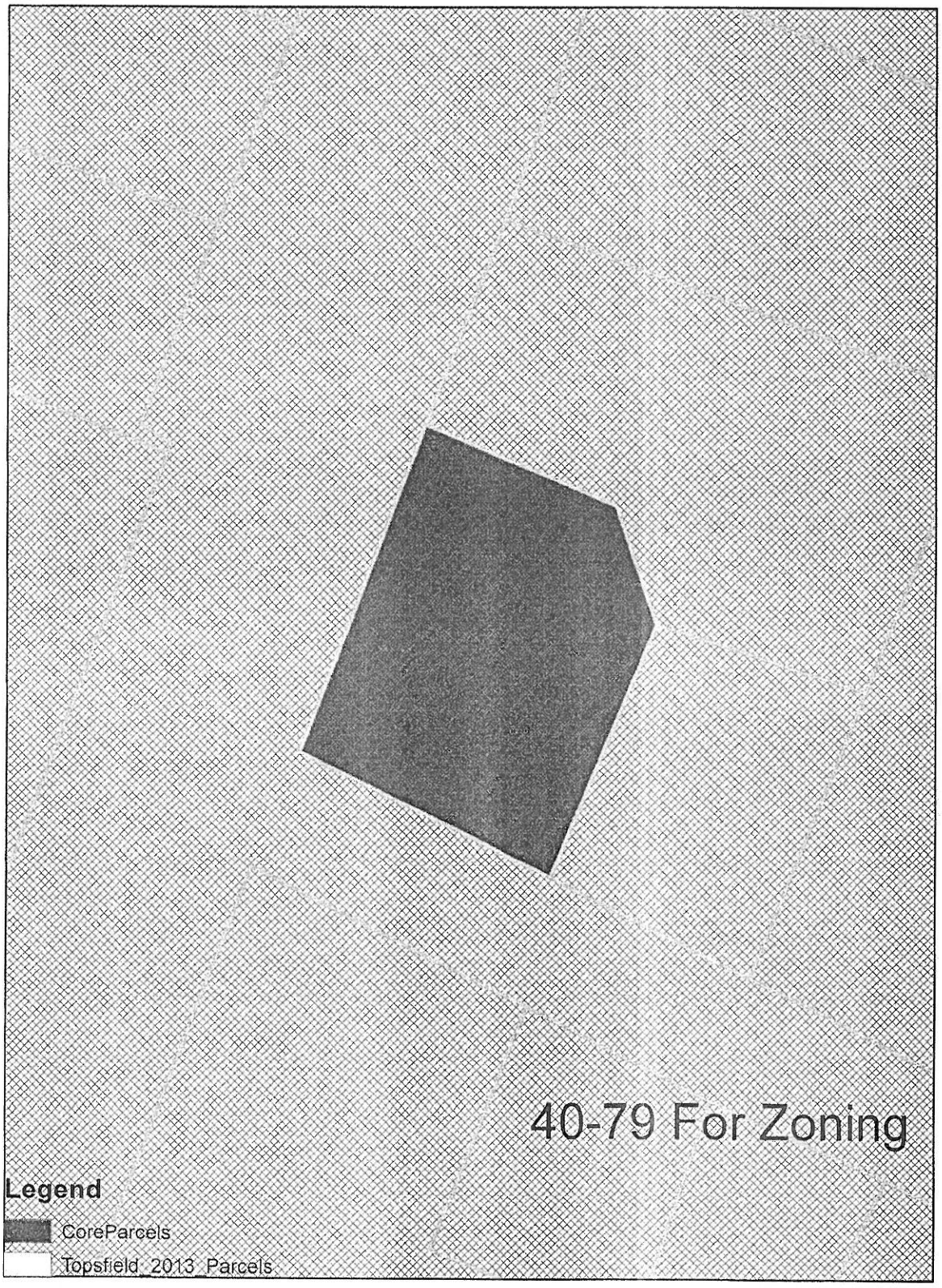
To the Topsfield Planning Board:

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 Kathleen Jackson

Date of Verification 12/4/15

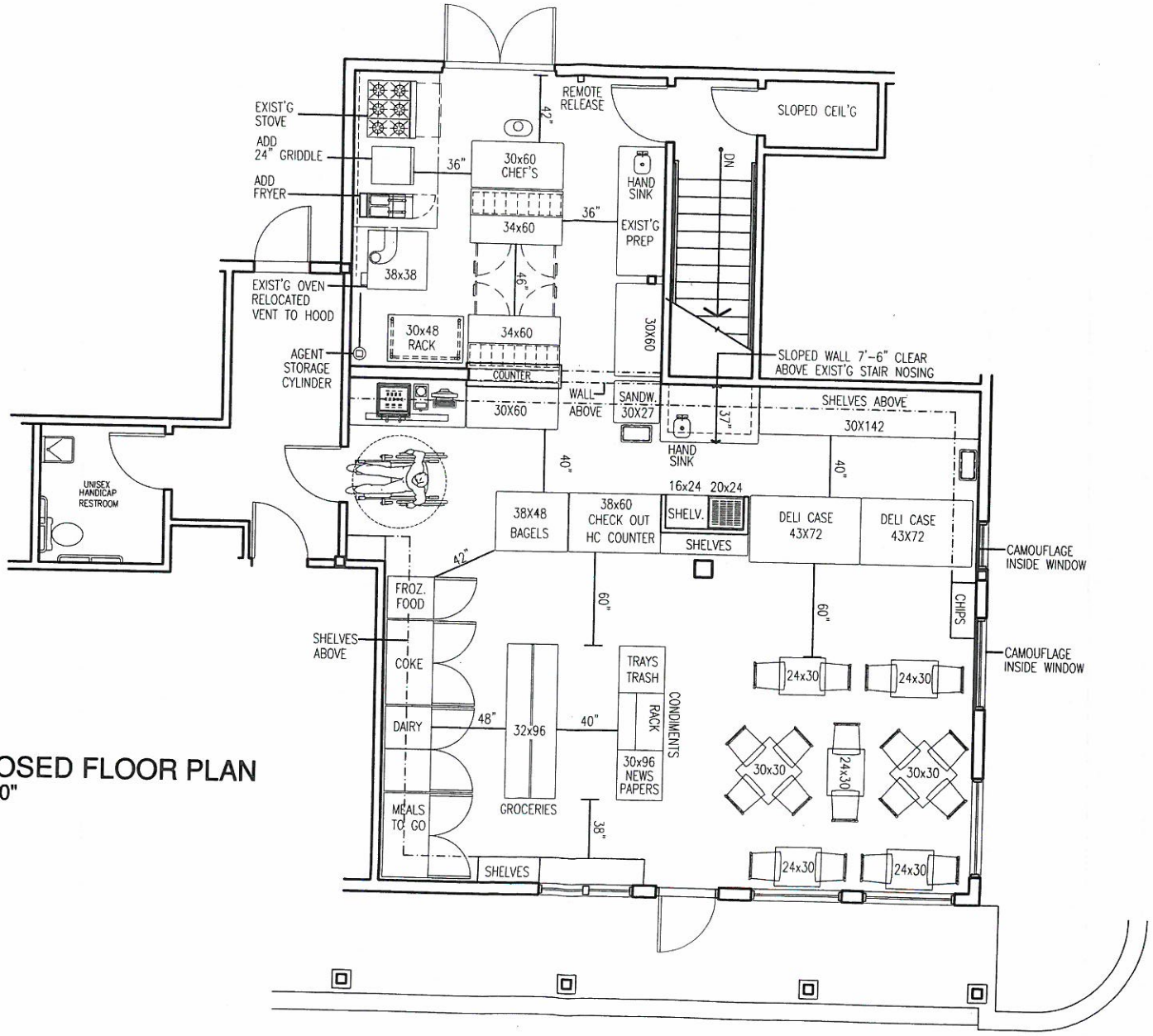
17 Main St


40-79 For Zoning
Legend
CoreParcels
Topsfield_2013_Parcels

Town of Topsfield
GIS - Abutters by ParcelID

Parcel ID - Map/Block/Lot	Location	Owner/Mailing Address
40-72	2 MAIN ST	CARGILL WILLIAM R JR TR / TWO MAIN STREET TR 2 MAIN ST TOPSFIELD MA 01983
40-73	16 MAIN ST	HAVERHILL SAVINGS BANK / C/O TD BANK 380 WELLINGTON ST, TOWER B / 12TH FLOOR LONDON ON N6A4S4
40-74	30 MAIN ST	TOPSFIELD VILLAGE SHOPPING / CENTRE INC 50 BROAD ST SALEM MA 01970
40-75	24 MAIN ST	CUMBERLAND FARMS INC 100 CROSSING BLVD VOO93 FRAMINGHAM MA 01702
40-76	32 MAIN ST	THEODOROU LEONIDAS / THEODOROU LAMBRO 24 KINSMAN LN TOPSFIELD MA 01983
40-78	38 MAIN ST	FOUNDERS CIRCLE PARTNERS LLC 7 GROVE ST TOPSFIELD MA 01983
40-79	17 MAIN ST	RIVERSKY REALTY PARTNERS LLC PO BOX 394 TOPSFIELD MA 01983
40-80	5 CENTRAL ST	KNOWLES STEPHEN E TR / FIVE CENTRAL STREET I 21 LONG HILL RD BOXFORD MA 01921
40-81	15 MAIN ST	INSTITUTION OF SAVINGS / IN NEWBURYPORT P O BOX 32 IPSWICH MA 01938
41-133	35 R MAIN ST	JAMES S PRICE INC / C/O FRANK IOVANELLA 23 AARON DR TOPSFIELD MA 01983
41-21	15 CENTRAL ST	NEW ENGLAND TELEPHONE CO / C/O VERIZON NEW PO BOX 152206 IRVING TX 75015
41-22	7 CENTRAL ST	KNOWLES STEPHEN E TR / SEVEN CENTRAL REALT 21 LONG HILL RD BOXFORD MA 01921
41-31	15 SCHOOL AV	ESSEX COUNTY GREENBELT / ASSOCIATION INC 82 EASTERN AVE ESSEX MA 01929
41-33-0	37 MAIN ST	UNKNOWN 37 MAIN STREET TOPSFIELD MA 01983
41-33-1	37 MAIN ST 1	37-1 MAIN ST LLC / C/O GARY TALLAKSEN 179 WASHINGTON ST TOPSFIELD MA 01983
41-33-2	37 MAIN ST 2	RAMSEY RONALD E / RAMSEY JEAN L 37 MAIN ST - # 2 TOPSFIELD MA 01983

Parcel ID - Map/Block/Lot	Location	Owner/Mailing Address
41-33-3	37 MAIN ST 3	MAHONEY PATRICK M 30 HARRISON STREET READING MA 01867
41-33-4	37 MAIN ST 4	AMES MATTHEW H F / AMES JENNIFER P 37 MAIN ST TOPSFIELD MA 01983
41-34	35 MAIN ST	TOPSFIELD MAC REALTY TRUST LLC 35 MAIN ST TOPSFIELD MA 01983
41-35	27 MAIN ST	MARSTON STREET LLC 19 HIGH RIDGE RD TOPSFIELD MA 01983
41-36	23 MAIN ST	MARCIANO GRACE J / MARCIANO YOLANDA R 23 MAIN ST TOPSFIELD MA 01983
41-37	6 CENTRAL ST	LAWTON RAYMOND, TR / 6 CENTRAL STREET REALT 240 BOSTON ST TOPSFIELD MA 01983
41-38	8 CENTRAL ST	PIERCE DAVID W & KATHY F TRS / ADAMS HOUSE F 8 CENTRAL ST / SUITE 103 TOPSFIELD MA 01983
41-39	12 CENTRAL ST	RICHARDSON GREEN INC 2 CENTRAL ST / PO BOX 499 MIDDLETON MA 01949
41-40	14 CENTRAL ST	VERNON LAWRENCE HAUG JR PO BOX 377 TOPSFIELD MA 01983
41-41	18 CENTRAL ST	YOUNG TRACY 18 CENTRAL ST TOPSFIELD MA 01983
41-6	8 SUMMER ST	MASS BAY TRANSPORTATION AUTH / C/O TRANSIT I 77 FRANKLIN ST - 9TH FL BOSTON MA 02110
41-7	6 PARK ST	BUTLER CABIN LLC 6 PARK ST TOPSFIELD MA 01983



PROPOSED FLOOR PLAN
3/16"=1'-0"

FULCRUM, INC.
ARCHITECTS
22 LAFAYETTE RD
SALISBURY, MA 01952
Tel: 978-462-5151
eFax: 978-359-0059
design@fulcrumarchitects.com

PROJECT:

UNIT 1A
17-19 MAIN STREET
TOPSFIELD, MA 01983

REGISTERED ARCHITECT
RONALD N. LAFFEL
NO. 9228
BOSTON
COMMONWEALTH OF MASSACHUSETTS

ISSUED FOR:	
REMODEL	2/19/15
REVISED	11/2/15

FILE NAME:
Z:\KUCHAR\TOPSFIELD-2

SHEET NUMBER:
A-1