



E-Mail: PlanningBoard@upton.ma.us
Phone: (508) 529-1008

P.O. Box 463
Upton, Massachusetts 01568

APPLICATION FOR SPECIAL PERMIT

Date:

To the Special Permit Granting Authority.

The undersigned, being the applicant hereby applies for a special permit under M.G.L., Ch. 40A, § 9 as follows:

- 1. Applicant (includes equitable owner or purchaser on a purchase and sales agreement):

Name: _____
Address: _____
Tel. #: _____
Email Address: _____

[] Check here if you are the purchaser on a purchase and sales agreement.

- 2. Owner, if other than applicant:

Name: _____
Address: _____
Tel. #: _____
Email Address: _____

- 3. Property: _____
Street address: _____
Assessor's map: _____
Property is located in zoning district: _____

The undersigned's title to said land is derived from:

By deed dated _____ and recorded in the Worcester County District Registry of Deeds Book _____, Page _____, registered in the Worcester County Registry District of the Land Court, Certificate of Title Number _____; and said land is free of encumbrances except for the following: _____

- 4. Nature of relief requested:

Special permit pursuant to Article/Section _____ of the Zoning By-law which authorizes _____ to permit _____

Detailed explanation of request: _____



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5. Evidence to support grant of special permit:

Because of reasons set forth below, the special permit requested will be in harmony with the intent and purpose of the Zoning Ordinance/By-law:

Because of the reasons set forth below, the special permit requested will meet the additional requirements of the Zoning Ordinance/By-law as follows:

If someone other than owner or equitable owner (purchaser on a purchase and sales agreement) is the Applicant or will represent the Applicant, owner or equitable owner must designate such representative below.

Name of Representative:

Address of Representative:

Tel.#

Email Address:

Relationship of representative to owner or equitable owner:

I hereby authorize _____ to represent my interests before the Special Permit Granting Authority with respect to this Special Permit Application.

(Signed by owner/equitable owner)

I hereby certify under the pains and penalties of perjury that the information contained in the Application is true and complete.

Signature of Applicant:

Date

Signature of Owner, if other than Applicant

Date

Signature of Equitable Owner who is filing
Application to satisfy condition of purchase and sales
agreement
