



CITY OF CAMBRIDGE, MASSACHUSETTS

# PLANNING BOARD

CITY HALL ANNEX, 344 BROADWAY, CAMBRIDGE, MA 02139

## SPECIAL PERMIT APPLICATION • COVER SHEET

In accordance with the requirements of the City of Cambridge Zoning Ordinance, the undersigned hereby petitions the Planning Board for one or more Special Permits for the premises indicated below.

Location of Premises: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Telephone #	Email Address	Fax #
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List all requested special permit(s) (with reference to zoning section numbers) below. *Note that the Applicant is responsible for seeking all necessary special permits for the project. A special permit cannot be granted if it is not specifically requested in the Application.*

List all submitted materials (include document titles and volume numbers where applicable) below.

**Signature of Applicant:** \_\_\_\_\_

For the Planning Board, this application has been received by the Community Development Department (CDD) on the date specified below:

\_\_\_\_\_  
Date Signature of CDD Staff

**OWNERSHIP CERTIFICATE**

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**Project Address:**

**Application Date:**

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This form is to be completed by the property owner, signed, and submitted with the Special Permit Application:

I hereby authorize the following Applicant:

at the following address:

to apply for a special permit for:

on premises located at:

for which the record title stands in the name of:

whose address is:

by a deed duly recorded in the:

Registry of Deeds of County:

Book:

Page:

**OR** Registry District of the Land Court,  
Certificate No.:

Book:

Page:

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Signature of Land Owner (If authorized Trustee, Officer or Agent, so identify)

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To be completed by Notary Public:

Commonwealth of Massachusetts, County of \_\_\_\_\_

The above named \_\_\_\_\_ personally appeared before me,

on the month, day and year \_\_\_\_\_ and made oath that the above statement is true.

Notary: \_\_\_\_\_

My Commission expires: \_\_\_\_\_

**FEE SCHEDULE**

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**Project Address:**

**Application Date:**

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The Applicant must provide the full fee (by check or money order) with the Special Permit Application. Depending on the nature of the proposed project and the types of Special Permit being sought, the required fee is the larger of the following amounts:

- If the proposed project includes the creation of new or substantially rehabilitated floor area, or a change of use subject to Section 19.20, the fee is ten cents (\$0.10) per square foot of total proposed Gross Floor Area.
- If a Flood Plain Special Permit is being sought as part of the Application, the fee is one thousand dollars (\$1,000.00), unless the amount determined above is greater.
- In any case, the minimum fee is one hundred fifty dollars (\$150.00).

**Fee Calculation**

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New or Substantially Rehabilitated Gross Floor Area (SF): × \$0.10 =

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Flood Plain Special Permit Enter \$1,000.00 if applicable:

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Other Special Permit Enter \$150.00 if no other fee is applicable:

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**TOTAL SPECIAL PERMIT FEE** **Enter Larger of the Above Amounts:**

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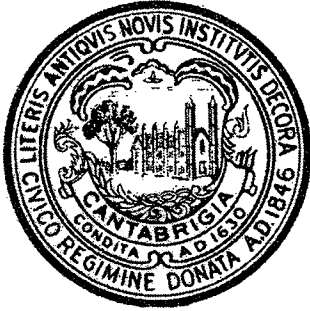
**DIMENSIONAL FORM**

**Project Address:**

**Application Date:**

	<b>Existing</b>	<b>Allowed or Required (max/min)</b>	<b>Proposed</b>	<b>Permitted</b>
Lot Area (sq ft)				
Lot Width (ft)				
Total Gross Floor Area (sq ft)				
Residential Base				
Non-Residential Base				
Inclusionary Housing Bonus				
Total Floor Area Ratio				
Residential Base				
Non-Residential Base				
Inclusionary Housing Bonus				
Total Dwelling Units				
Base Units				
Inclusionary Bonus Units				
Base Lot Area / Unit (sq ft)				
Total Lot Area / Unit (sq ft)				
Building Height(s) (ft)				
Front Yard Setback (ft)				
Side Yard Setback (ft)				
Side Yard Setback (ft)				
Rear Yard Setback (ft)				
Open Space (% of Lot Area)				
Private Open Space				
Permeable Open Space				
Other Open Space (Specify)				
Off-Street Parking Spaces				
Long-Term Bicycle Parking				
Short-Term Bicycle Parking				
Loading Bays				

*Use space below and/or attached pages for additional notes:*



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CITY HALL ANNEX, 344 BROADWAY, CAMBRIDGE, MA 02139

## CERTIFICATION OF RECEIPT OF PLANS BY CITY OF CAMBRIDGE TRAFFIC, PARKING & TRANSPORTATION

City Department/Office:

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Project Address:

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Applicant Name:

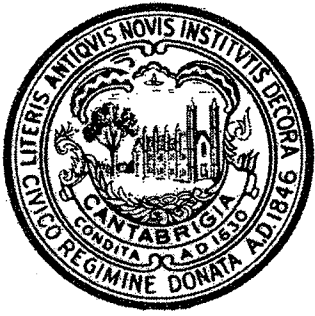
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For the purpose of fulfilling the requirements of Section 19.20 and/or 6.35.1 and/or 5.28.2 of the Cambridge Zoning Ordinance, this is to certify that this Department is in receipt of the application documents submitted to the Planning Board for approval of a Project Review Special Permit for the above referenced development project: (a) an application narrative, (b) small format application plans at 11" x 17" or the equivalent and (c) Certified Traffic Study. The Department understands that the receipt of these documents does not obligate it to take any action related thereto.

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Signature of City Department/Office Representative

Date



CITY OF CAMBRIDGE, MASSACHUSETTS

# PLANNING BOARD

CITY HALL ANNEX, 344 BROADWAY, CAMBRIDGE, MA 02139

## CERTIFICATION OF RECEIPT OF PLANS BY CITY OF CAMBRIDGE DEPARTMENT OF PUBLIC WORKS

City Department/Office:

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Project Address:

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Applicant Name:

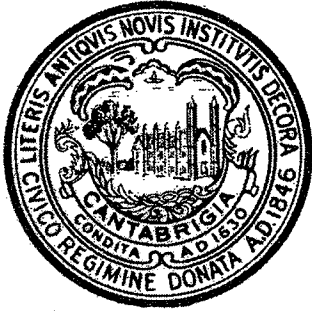
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For the purpose of fulfilling the requirements of Section 19.20 of the Cambridge Zoning Ordinance, this is to certify that this Department is in receipt of the application documents submitted to the Planning Board for approval of a Project Review Special Permit for the above referenced development project: (a) an application narrative and (b) small format application plans at 11" x 17" or the equivalent. The Department understands that the receipt of these documents does not obligate it to take any action related thereto.

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Signature of City Department/Office Representative

Date



CITY OF CAMBRIDGE, MASSACHUSETTS

# PLANNING BOARD

CITY HALL ANNEX, 344 BROADWAY, CAMBRIDGE, MA 02139

## CERTIFICATION OF RECEIPT OF PLANS BY CITY OF CAMBRIDGE TREE ARBORIST

City Department/Office:

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Project Address:

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Applicant Name:

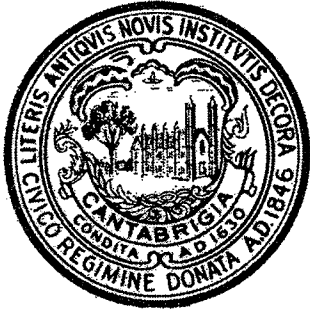
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For the purpose of fulfilling the requirements of Section 4.26, 19.20 or 11.10 of the Cambridge Zoning Ordinance, this is to certify that this Department is in receipt of the application documents submitted to the Planning Board for approval of a MultiFamily, Project Review or Townhouse Special Permit for the above referenced development project: a Tree Study which shall include (a) Tree Survey, (b) Tree Protection Plan and if applicable, (c) Mitigation Plan, twenty one days before the Special Permit application to Community Development.

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Signature of City Department/Office Representative

Date



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CITY HALL ANNEX, 344 BROADWAY, CAMBRIDGE, MA 02139

## CERTIFICATION OF RECEIPT OF PLANS BY CITY OF CAMBRIDGE WATER DEPARTMENT

City Department/Office:

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Project Address:

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Applicant Name:

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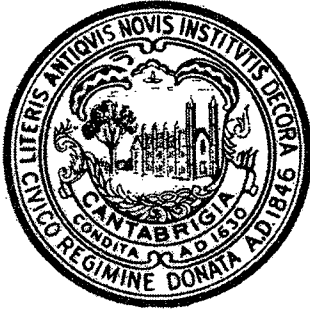
For the purpose of fulfilling the requirements of Section 19.20 of the Cambridge Zoning Ordinance, this is to certify that this Department is in receipt of the application documents submitted to the Planning Board for approval of a Project Review Special Permit for the above referenced development project: (a) an application narrative and (b) small format application plans at 11" x 17" or the equivalent. The Department understands that the receipt of these documents does not obligate it to take any action related thereto.

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Signature of City Department/Office Representative

Date





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CITY HALL ANNEX, 344 BROADWAY, CAMBRIDGE, MA 02139

## CERTIFICATION OF RECEIPT OF PLANS BY CITY OF CAMBRIDGE LEED SPECIALIST

City Department/Office:

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Project Address:

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Applicant Name:

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For the purpose of fulfilling the requirements of Section 22.20 of the Cambridge Zoning Ordinance, this is to certify that this Department is in receipt of the application documents submitted to the Planning Board for approval of a Special Permit for the above referenced development project: (a) an application narrative, (b) small format application plans at 11" x 17" or the equivalent and (c) completed LEED Project Checklist for the appropriate LEED building standard, accompanying narrative and affidavit. The Department understands that the receipt of these documents does not obligate it to take any action related thereto.

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Signature of City Department/Office Representative

Date