



For Office Use Only:

Application #: _____ Received by Planning Dept: _____

Reference #: _____ Filed with Town Clerk: _____

Fee Paid: \$ _____ (65 days from date filed): _____

Town Clerk: _____

Book: _____ Page: _____ Town Clerk

APPLICANT INFORMATION:

Applicant: _____

Address: _____

Telephone: _____

Fax: _____

Email: _____

ATTORNEY/DESIGNER/CONSULTANT:

Address: _____

Telephone: _____

Fax: _____

Email: _____

IS THIS AN AMENDMENT TO A PREVIOUSLY GRANTED PERMIT?

Yes No

NAME AND BRIEF DESCRIPTION OF PROJECT:

PROPERTY INFORMATION:

Property Address/Description:

PROPERTY OWNER:

(if different from applicant)

Address: _____

Telephone: _____

Email: _____

DEED OF PROPERTY RECORDED IN:

Hampshire Cty. Reg. of Deeds Mass. Land Court

Book: _____ Page: _____

Map/Parcel: _____

Zoning District: _____

Signature of applicant(s)

Signature of property owner(s)

SITE PLAN REVIEW APPLICATION

This Page for Town Hall Office Use Only:

Town Reviews (date completed):

Town Engineer		DPW Superintendent	
Fire Chief		Health Department	
Building Commissioner		Conservation Director	
Other:		Other:	

Abutters Notified: _____ (date)

Legal Ad Published in Gazette: _____ (dates)

Public Hearing Date(s): _____

Members Sitting: _____

Decision: _____

Decision Sent to Applicant: _____ (date)

Town Clerk/Building Commissioner/Town Engineer notified of Planning Board action: _____ (date)

PLEASE NOTE: The Town of Amherst - Planning Board Rules and Regulations, Zoning Bylaw Section 11.2 Site Plan Review, and Landscaping Guidelines (available at the Planning Department office) should be used for reference in completing applications.

THE FOLLOWING ITEMS ARE REQUIRED WITH THE SITE PLAN REVIEW APPLICATION

Please check that each item is attached or completed:

- This completed Site Plan Review **Application form**.
- A **request for a certified list of abutters** must accompany all site plan applications. The **Planning Department will submit the application** for an Abutters List to the Assessor’s Office and send out the abutters notices. It may take up to 10 business days for your certified list to be produced.
- If the property for which the permit is being sought has any tenants or lessees, they must be notified of the application. Please ask for the Planning Department’s **“Tenant/Lessee Notification”** instruction sheet.

Filing fees

Site Plan Review Fee Calculation:

I. Standard Calculation

Minor For Profit Use	\$150 for less than 2,500 sq. ft. of new/alterd lot coverage; \$200 for more than 2,500 or less than 5,000 sq. ft. of new/alterd lot coverage
Non-profit Use	\$100/5,000 sq. ft. new/alterd lot coverage + \$200/5,000 sq. ft. of new GFA; min. \$300
Major For-Profit Use	\$150/\$5,000 sq. ft. new/alterd lot coverage + \$300/5,000 sq. ft. of new GFA; min. \$500

2. Legal Ads \$300

Coverage fee \$ _____
 GFA fee + \$ _____
 Legal Ads + \$ _____
 =
 Total fee \$ _____

Request for Waiver(s)

If waiver(s) are requested from any of the application requirements in Article II, Section 3B of the Planning Board Rules and Regulations, please indicate in writing here. **List section numbers to be waived and indicate reason(s) for request.**

Site Information:

Lot size _____ sq. ft. _____ acres Frontage _____ ft.

Existing land use and classification number (Zoning Bylaw section 3.3): _____

Proposed land use and classification number: _____

If residential use is proposed, number of dwelling units _____

Minimum Setback	Front	Required _____	Proposed _____
	Rear	Required _____	Proposed _____
	Side 1	Required _____	Proposed _____
	Side 2	Required _____	Proposed _____

Maximum Lot Coverage Permitted _____% Proposed _____%

Maximum Building Coverage Permitted _____% Proposed _____%

Maximum Building Height Permitted _____ Proposed _____

Number of existing buildings on site _____ Total floor area of each: _____

Number of proposed buildings _____ Total floor area of each: _____

Parking Spaces Required _____ Proposed _____

ONE (1) ORIGINAL AND SIX (6) COPIES of the **site plan** at scale 1" = 20', on 24"x36" sheets. Plans shall be prepared by a Registered Professional Engineer, Land Surveyor or Landscape Architect.

In addition to the site plan, the Board normally requires the following information/plans unless waived:

- | | |
|--|---|
| <input type="checkbox"/> Landscape Plan | <input type="checkbox"/> Sign plan |
| <input type="checkbox"/> Lighting Plan | <input type="checkbox"/> Site management plan (See attached Management Plan Form) |
| <input type="checkbox"/> Soil erosion plan | <input type="checkbox"/> Traffic impact statement (TIS) |

Information to be included in the site plan and all other required plans is detailed in Section 3B of the Planning Board Rules and Regulations.



The Rules and Regulations of both the Planning Board and the Zoning Board of Appeals require that applicants submit a management plan as part of the process for most applications.

APPLICANT INFORMATION:

Applicant: _____

Address: _____

Telephone: _____

Email: _____

Owner: _____

(if different from applicant)

Address: _____

Telephone: _____

Email: _____

PROJECT INFORMATION:

Project Address and Description:

Amendment to previously approved management plan?

yes

no

INFORMATION REQUIRED FOR ALL PROJECTS:

(Attach additional sheets as necessary)

Trash and recycling, including storage location, enclosure or screening, with frequency of pickup and name of hauling company, and responsible party to contact in case of complaint:

Parking, including size and number of spaces, location, screening, provision for handicapped spaces:

Lighting, including hours of illumination by location, types and wattage of fixtures:

Signage, including location, size, materials, and any illumination:

Landscape Maintenance, including annual schedule of watering, fertilizing, mowing, pruning, leaf pick-up, and so forth, and maintenance and replacement schedule of site furnishings:

Snow Removal, including name of contractor:

(Please see Article IV of the Town Bylaw for regulations regarding the removal of snow and ice from sidewalks)

ADDITIONAL INFORMATION FOR SPECIFIC PROJECT TYPES (ATTACH ADDITIONAL SHEETS):

ADDITIONAL INFORMATION REQUIRED FOR RESTAURANTS:

- Type of menu
- Number of seats (indoor and outdoor)
- Is any outdoor dining on public or private land?
- Number of employees
- Hours of operation
- Alcohol
- Plans for delivery and/or take-out service
- Live or prerecorded entertainment
- Noise management of patrons, music, fans and HVAC
- Management of patrons gathering outdoors on property
- Odor mitigation measures
- Waste kitchen oil management
- Litter control
- Deliveries to or from the site

ADDITIONAL INFORMATION REQUIRED FOR PERMIT

RENEWALS:

- Special permit #
- Date of issuance
- Any changes to the proposal
- Any changes to the neighborhood

ADDITIONAL INFORMATION REQUIRED FOR APARTMENTS:

- Number of units, existing and proposed
- Number of bedrooms, existing and proposed
- Number of tenants
- Owner-occupied?
- On-site manager?
- Copy of standard lease
- Noise management of tenants, parties, music, and any outdoor HVAC equipment
- Material, equipment, and large household goods storage
- On-site recreational facilities

ADDITIONAL INFORMATION REQUIRED FOR HOME

OCCUPATIONS:

- Type of business
- Number of Employees
- Hours of operation
- Deliveries to the site
- Equipment used/ Noise generated
- Material and equipment storage

**AMHERST BOARD OF ASSESSORS
REQUEST FOR CERTIFIED LIST OF ABUTTERS**

Note: THE ASSESSORS OFFICE REQUIRES 10 BUSINESS DAYS TO PREPARE AN ABUTTERS LIST. WE THEREFORE ADVISE YOU NOT TO SCHEDULE A HEARING UNTIL YOU HAVE THIS LIST.

*****WHEN THE LIST IS READY WE WILL CALL YOU TO PICK IT UP CENTRAL SERVICES. FOR ANY OTHER METHOD OF DELIVERY CONTACT THE BOARD REQUESTING THE LIST.*****

Please Print

STREET ADDRESS	MAP	PARCEL
OWNER'S NAME	APPLICANT'S NAME	
STREET	STREET	
CITY ST	CITY	STATE ZIP
CONTACT PERSON & PHONE #		

*****Please note that if requesting abutters lists for two different departments for the same parcel, you must fill out separate abutters request forms.*****

Please circle type of permit or variance requested:

- A: Liquor License – Immediate abutters, also 500’ from all borders for churches/hospitals/public & private schools.**
- B: Planning Board – Subdivision or Special Permit - 300’**
- C: Zoning: - Special Permit or Variance Appeals - 300’**
- D: Conservation: -Wetland Hearing - 300’**
- E: Planning - Site Plan Review 300’**
- F: Town Council - 300’**
- G: Health – Livestock, Poultry, Wells**

NOTE: THE ABUTTERS LIST IS ONLY OFFICIAL FOR A PERIOD OF 30 DAYS FROM THE DATE OF CERTIFICATION BY THE ASSESSOR. AFTER 30 DAYS, YOU WOULD NEED TO REAPPLY FOR A NEW LIST.



ATTENTION!



HOMEOWNERS, BUILDERS, CONTRACTORS, LANDSCAPERS & ARCHITECTS

Do NOT cut down, remove, or alter any existing TREE, SHRUB, or STONE WALL near a street until you have confirmed that they are *entirely* on private property!

Under the Shade Tree Act (MGL Ch. 87) and the Scenic Roads Act (MGL Ch. 40, Sec 15C) existing TREES, SHRUBS & STONE WALLS in Amherst are protected in the following areas:

- ☞ On private property if the tree trunk, shrub, or stone wall touches or extends into the public way (the public property that includes the street, sidewalks, and utility corridors); or

- ☞ In the public way, including in front of any private property being prepared/cleared for driveways, construction, connection to utilities, etc.

Violations of these laws can involve FINES up to **\$500**, PLUS the cost of replacing all trees, shrubs, and walls. Don't take the chance! Ask first.

FOR PROPERTY LINE INFO:

Jason Skeels, Town Engineer
Public Works Dept.
586 South Pleasant Street
Amherst, MA 01002
(413) 259-3050
skeelsj@amherstma.gov

FOR PUBLIC SHADE TREE INFO:

Alan Snow, Tree Warden
Public Works Dept.
586 South Pleasant Street
Amherst, MA 01002
(413) 259-3211
treewarden@amherstma.gov

FOR SCENIC ROADS INFO:

Amherst Planning Dept.
Town Hall, 4 Boltwood Ave.
Amherst, MA 01002
(413) 259-3040
planning@amherstma.gov

