



TOWN OF DEDHAM
COMMONWEALTH OF MASSACHUSETTS

TOWN HALL
450 WASHINGTON STREET
DEDHAM, MA 02026-4458

ZONING BOARD OF APPEALS
APPLICATION FOR HEARING

781-751-9241
rosenberger@dedham-ma.gov

**READ THE ENTIRE APPLICATION PACKET, INCLUDING THE INSTRUCTIONS,
PRIOR TO SUBMITTING APPLICATION.**

1. **The Zoning Board of Appeals is governed by the Commonwealth of Massachusetts, not the Town of Dedham. Accordingly, all procedures must follow Massachusetts General Law Chapter 40A.**
2. **Consult with the Building Department prior to submission of this application.**
3. **Submit eight (8) hard copies of application and supporting material, and one (1) digital copy.**
4. **Incomplete applications will not be accepted and will be returned.**

Application Date: _____

Subject Property: _____ Map/Lot _____
Overlay _____

Zoning District: SRA SRB GR CB LB GB HB
LMA LMB PC RDO/AP

Applicant: _____

Applicant Address: _____

Owner Tenant * Attorney * Purchaser * Other *(describe)

- *A letter of authorization must be attached for all applicants who are NOT the property owner.*

Phone: _____ Cell: _____

E-Mail: _____

Property Owner: _____

Owner Address: _____

Phone: _____ Cell: _____

E-Mail: _____

Agent/Attorney: _____

Address: _____

Phone: _____ Cell: _____

E-Mail: _____

PETITION *(check all that apply)*

PLEASE READ THIS SECTION CAREFULLY.

It is strongly recommended that the Building Department be consulted prior to submission of the application to determine (1) what relief is required and (2) the applicable section of the Town of Dedham Zoning Bylaw. It is the Applicant’s responsibility to complete this information prior to submission to the Zoning Board of Appeals. State exactly what relief is required. The Zoning Board of Appeals can only grant what is requested. Measurements must be exact. Omission of information will render the application incomplete, and it will be returned to the Applicant.

Type of Relief Requested:

Variance Special Permit Waiver Extension

Exact Relief Requested: To be allowed (*variance/Special Permit/waiver/extension*) for:

Section(s) of Zoning Bylaw:

Statement of Hardship (*reason for application – required*):

ZONING DATA

If you are requesting a variance, refer to the Town of Dedham Zoning Bylaw, Section 4.1 Table of Dimensional Requirements, found on the Town of Dedham website (www.dedham-ma.gov). Fill in all columns. Numbers must match those on the certified plot plan and supporting material.

	Required	Existing	Proposed
Use (<i>i.e., single family dwelling, two-family dwelling, commercial</i>)			
# Dwelling Units			
Lot Area			
Front Yard Setback (<i>from house to sidewalk</i>)	feet	feet	feet
Rear Yard Setback (<i>from house to property line</i>)	feet	feet	feet
Left Yard Setback (<i>from house to property line</i>)	feet	feet	feet
Right Yard Setback (<i>from house to property line</i>)	feet	feet	feet
Frontage (<i>see Zoning Bylaws Section 10</i>)	feet	feet	feet
Space between buildings <i>(if erected, moved, or added after January 22, 1990)</i>	feet	feet	feet
Floor Area Ratio	%	%	%
Lot Coverage	%	%	%
Other (<i>specify</i>)			

Comments:

APPLICATION FEE SCHEDULE:

Residential \$150.00 Commercial \$300.00

Payment may be by personal check, bank check, or money order. Credit cards are not accepted.

LEGAL ADVERTISEMENT FEE:

Each Zoning Board of Appeals petition requires a public hearing. According to Massachusetts General Law Section 11:

“In all cases where notice of a public hearing is required notice shall be given by publication in a newspaper of general circulation in the city or town once in each of two successive weeks, the first publication to be not less than fourteen days before the day of the hearing...”

In order to comply with this section, the Town of Dedham places legal ads for all public hearings in *The Dedham Times*. The newspaper bills the Applicant separately, and fees are established by the newspaper, not the Town of Dedham. Payment for these ads is the responsibility of the Applicant. For information on billing, please contact *The Dedham Times* at 781-329-5333 or by e-mail at dtimes@rcn.com.

SUBMISSION CHECKLIST

EIGHT (8) COPIES ARE REQUIRED OF THE FOLLOWING:

	PROVIDED
Application	<input type="checkbox"/>
Petition Statement (<i>reason for application</i>)	<input type="checkbox"/>
Certified, signed plot plan (<i>mortgage plans are <u>not</u> acceptable</i>)	<input type="checkbox"/>
Pictures of existing conditions	<input type="checkbox"/>
Renderings of proposed conditions with elevations	<input type="checkbox"/>
Renderings of conceptual floor plans	<input type="checkbox"/>
Letter of authorization from owner (<i>if applicant is a tenant</i>)	<input type="checkbox"/>
Signed petition from neighbors supporting petition* <i>*not required but suggested</i>	<input type="checkbox"/>

ONE (1) COPY IS REQUIRED OF THE FOLLOWING:

	PROVIDED
Completed form for Abutters List	<input type="checkbox"/>
Copy of Deed	<input type="checkbox"/>
Completed billing form for <i>The Dedham Times</i>	<input type="checkbox"/>
Check made payable to the <i>Town of Dedham</i>* <i>*see application fee schedule above</i>	<input type="checkbox"/>

SIGNATURES

I hereby request a hearing before the Town of Dedham Zoning Board of Appeals with reference to the subject property. The information supplied on and with this application is accurate to the best of my knowledge. I hereby certify that the agent/attorney/architect/engineer listed on this application form has been authorized by me to represent me before the Zoning Board of Appeals as it relates to the petition noted on this form.

I am aware that the cost of legal advertising will be billed to me directly by *The Dedham Times* at a later date. I agree to reimburse the Zoning Board of Appeals and the Town of Dedham for any and all costs that may be incurred by the Town or its Boards for all fees, expenses, and costs in connection with the review and evaluation of this application.

I have reviewed the Zoning Board of Appeals instructions and information, and I understand the time requirements.

_____ Date _____ Applicant's Signature

I hereby certify that the Applicant has authorized me to represent the application at the hearing.

_____ Date _____ Agent/Attorney/Architect/Engineer Signature

THE DEDHAM TIMES

395 WASHINGTON STREET
 DEDHAM, MA 02026
 Phone: 781-329-5333
 Fax: 781-329-8291
 E-Mail: dtimes@rcn.com

ONLY ONE COPY OF THIS FORM IS REQUIRED.

Date _____

I hereby acknowledge that the application I am submitting to the Town of Dedham

Zoning Board of Appeals Planning Board

requires a **Legal Notice of Public Hearing**. Legal notices are submitted to **The Dedham Times** for publication on the following dates:

_____ and _____

for property located at:

I hereby acknowledge responsibility for payment of the required **Legal Notice** to **The Dedham Times, 395 Washington Street, Dedham, MA 02026**. I further authorize **The Dedham Times** to bill me directly for the legal notices placed by the Town of Dedham Planning/Zoning Department, the cost of which is determined solely by the newspaper.

 Name Signature *(required)*

Billing Address _____

Billing Phone Number* _____

Daytime Phone Number* _____

E-Mail Address* _____

Date of Hearing _____

Time of Hearing _____

* **Required by the Dedham Times prior to publication.**

TOWN OF DEDHAM
COMMONWEALTH OF MASSACHUSETTS

Members

Scott M. Steeves, Chair
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Dedham Town Hall
450 Washington Street
Dedham, MA 02026-4458
Phone 781-751-9242

Jeremy Rosenberger
Planning Director
jrosenberger@dedham-ma.gov

APPLICATION FOR CERTIFIED ABUTTERS LIST

ONLY ONE COPY OF THIS FORM IS NEEDED

THIS APPLICATION WILL BE PROCESSED BY ASSESSORS' OFFICE
WITHIN TEN (10) DAYS OF RECEIPT.

Applicant _____

Property Owner _____

Property Address _____

Map _____ Lot _____

Legal Representative

Purpose for List Zoning Board of Appeals Hearing

Planning Board Hearing

All contiguous parcels under the same common ownership will be considered as one parcel for the purpose of determining abutters.

_____ *Date*

_____ *Signature*

SCHEDULED DATE OF MEETING _____

SIGNATURES IN SUPPORT OF PETITION

**This form is provided as a courtesy to applicants.
It is not a requirement, but it is advisable.**

Name	Address	Signature

Zoning Board of Appeals Schedule 2023	
MEETING DATE	SUBMISSION DEADLINE
Wednesday, January 18, 2023	Friday, December 9, 2022
Wednesday, February 15, 2023	Friday, January 13, 2023
Wednesday, March 15, 2023	Friday, February 10, 2023
Wednesday, April 19, 2023	Friday, March 10, 2023
Wednesday, May 17, 2023	Friday, April 7, 2023
Wednesday, June 21, 2023	Friday, May 12, 2023
Wednesday, July 19, 2023	Friday, June 9, 2023
Wednesday, August 16, 2023	Friday, July 7, 2022
Wednesday, September 20, 2023	Friday, August 11, 2023
Wednesday, October 18, 2023	Friday, September 8, 2023
Wednesday, November 15, 2023	Friday, October 13, 2023
Wednesday, December 20, 2023	Friday, November 10, 2023
Wednesday, January 17, 2024	Friday, December 8, 2023
Must allow two weeks legal notice in newspaper for all applications.	

The locations for meetings will be posted on the agendas. If a meeting date and submission deadline are changed for any reason, it will be noted on the Zoning Board of Appeals meeting page of the Town website (www.dedham-ma.gov).

NO APPLICATION WILL BE ACCEPTED BEYOND THE SUBMISSION DATE.