



PETITION FOR VARIANCE

(Please type or print)

ZBA Use Only

File # _____

Each application for Variance submission shall be prepared in accordance with the provisions of Zoning Ordinance Section 34-213. The purpose of this document is to identify the submission requirements in checklist form, so as to help applicants better understand the process and guide them in the preparation of their application. The applicant should refer to the following resources for more in-depth descriptions of the Variance requirements:

Zoning Ordinance- <http://library.municode.com/index.aspx?clientId=14939>

Chelsea Development Guide- www.ci.chelsea.ma.us/Public_Documents/ChelseaMA_Planning/publications

Site Information- Maps available at Assessor's Office and GIS maps are found at:

<http://maps.chelseama.gov/>

Property Address: 111 Springvale Avenue

Assessor's Map: 88 & Lot: 59

Suffolk Registry of Deeds: Book # 640 Page # 086

Certificate Number (if registered) _____

Current Zoning District (Check One) 

- | | |
|---|---|
| <input checked="" type="checkbox"/> Residence 1 | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Residence 2 | <input type="checkbox"/> Waterfront |
| <input type="checkbox"/> Residence 3 | <input type="checkbox"/> Light Industrial |
| <input type="checkbox"/> Retail Business | <input type="checkbox"/> Light Industrial 2 |
| <input type="checkbox"/> Retail Business 2 | <input type="checkbox"/> Naval Hospital Commercial |
| <input type="checkbox"/> Shopping Center | <input type="checkbox"/> Naval Hospital Residential |
| <input type="checkbox"/> Business | |
| <input type="checkbox"/> Highway Business | |

Overlay Districts (If Applicable): _____

2. General Information

Petitioner Name: Joseph Fern Jr

Petitioner Address: 10 Hood St. Saugus, MA 01906

Tel. #: Days (617) 899 - 8941

Evenings: (617) 899 - 8941

Fax: () _____ - _____

Email: Joey.Fern27@gmail.com

Petitioner is: ☒ Owner ☐ Prospective Purchaser ☐ Tenant

☐ Licensee ☐ Other (Describe) _____

Owner Name (if different): _____

Owner address: _____

Tel. #: Days () _____ - _____

Evenings: () _____ - _____

Fax: () _____ - _____

Email: _____

Designee Name (if different from Petitioner): _____

Designee address: _____

Tel. #: Days () _____ - _____

Evenings: () _____ - _____

Fax: () _____ - _____

Email: _____

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CHelsea, MA

3. **Written Project Summary-** Describe the proposed work, existing & planned uses, existing and proposed dimensional requirements, building(s) and structure(s) size and locations, units/number of bedrooms, and/or other relief necessary: (Use additional sheets as needed):

See Attached

4. **Variance Criteria – A variance may only be granted when all of the four criteria are met:**

A). Describe the circumstances relating to *the soil conditions, shape or topography which especially affect the land or structure* (s) in question, but which do not affect generally the Zoning District in which the land or structure is located that would substantiate the granting of a variance.

See Attached

B). Describe how the literal enforcement of the provisions of the zoning ordinance relating to the circumstances especially affecting the land or structure in question would involve *substantial hardship, financial or otherwise*, to the petitioner.

C). Describe how desirable relief may be granted *without substantial detriment to the public good*.

D). Describe how desirable relief may be granted *without nullifying or substantially derogating from the intent or purpose of the zoning ordinance* of the City of Chelsea.

5. **Fee Schedule** (Fees may be paid by personal check, treasurer's check or money order)

Variance Application Fee:

See attached Fee Schedule (effective January 1, 2017)

\$80.00 payable to the Chelsea Record

I/We hereby certify under the pains and penalties of perjury that the foregoing information contained in this petition are true and complete.

Joseph R. Fennell
SIGNATURE OF PETITIONER

3/12/20
DATE

Joseph R. Fennell
SIGNATURE OF PROPERTY OWNER

3/12/20
DATE

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED AND WILL BE RETURNED TO APPLICANT

Zoning Board of Appeals
City Hall, Room 101, 500 Broadway
Chelsea, Massachusetts 02150
Telephone (617) 466-4180
Fax (617) 466-4195

2020 MAR 13 A 8:32
CITY CLERK'S OFFICE
CHELSEA, MA

Petition for Variance

3. Written Project Summary: Describe the proposed work, existing & planned uses, existing and proposed dimensional requirements, building(s) and structure(s) size and locations, units/number of bedrooms, and/or other relief necessary: (Use additional sheets as needed):

Proposed Work: The proposed work is to legalize a finished basement that includes one bedroom, $\frac{3}{4}$ bathroom, and a living room, into a legal one bedroom apartment with a kitchen. The proposed work includes separating utilities as needed while adding kitchen. No exterior construction is needed to complete the proposed work except during the utility separation where a gas meter and electric meter will be added to the side of the house.

Existing Use:

Single family home. 3 bedrooms and 1 full bathroom upstairs.

Finished basement: Includes a $\frac{3}{4}$ bathroom (toilet, sink, and shower), a bedroom area with a door that leads to the outside, a living room area, and a hallway that contains the utilities and a second door leading to the outside. Two methods of entry can be used to gain access into the basement from the outside without entering from the upstairs.

Planned Use: The planned use is to convert the basement into its own Unit so the home becomes a multi-family dwelling consisting of two unit's total.

Unit 1: 3 bedroom, 1 bathroom

Unit 2 Proposed: 1 bedroom, $\frac{3}{4}$ bathroom (shower, sink, toilet)

Existing and Proposed dimensional requirements: See Attached Floor Plans

Lot Area Relief: The existing Lot Area for this home is 4003. Sq. Ft.

Parking Relief: **2 Spaces Needed.** Currently has 2 off-street spots with 1 car garage. See Photo.

4. Variance Criteria

A.) Describe the circumstances relating to the soil conditions, shape or topography which especially affect the land or structure(s) in question, but which do not affect generally the Zoning District in which the land or structure is located that would substantiate the granting of a variance.

This lot is unique to this property because the rear yard has a retaining wall that abuts a higher sitting lot located at 111 Cook Avenue. Here, a stone outcrop fortifies the retaining wall in the rear yard. (Photo Attached) These peculiar conditions affect the structure of the home (but not the Zoning District) as it prevents the expansion of the Lot Area needed for this home to be converted to a multi-family dwelling.

2018 MAY 13 10:32 AM
CIVIL ENGINEERING
OFFICE



**PETITION FOR SPECIAL PERMIT AND/
OR MAJOR SITE PLAN REVIEW**

(Please type or print)

ZBA Use Only

File # _____

Each application for Special Permit and Major Site Plan submission shall be prepared in accordance with the provisions of Zoning Ordinance Section 34-214 and 34-215. The purpose of this document is to identify the submission requirements in checklist form, so as to help applicants better understand the process and guide them in the preparation of their application. The applicant should refer to the following resources for more in-depth descriptions of the Special Permit and Major Site Plan requirements:

Zoning Ordinance- <http://library.municode.com/index.aspx?clientId=14939>

Chelsea Development Guide - www.ci.chelsea.ma.us/Public_Documents/ChelseaMA_Planning/publications

Site Information -Maps available at Assessor's Office
and GIS maps are found at:
<http://maps.chelseama.gov/>

Property Address: 111 Springvale Avenue

Assessor's Map: 88 & Lot: 59

Suffolk Registry of Deeds: Book #640 Page #086

Certificate Number (if registered) _____

Current Zoning District (Check One) 

- | | |
|---|---|
| <input checked="" type="checkbox"/> Residence 1 | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Residence 2 | <input type="checkbox"/> Waterfront |
| <input type="checkbox"/> Residence 3 | <input type="checkbox"/> Light Industrial |
| <input type="checkbox"/> Retail Business | <input type="checkbox"/> Light Industrial 2 |
| <input type="checkbox"/> Retail Business 2 | <input type="checkbox"/> Naval Hospital Commercial |
| <input type="checkbox"/> Shopping Center | <input type="checkbox"/> Naval Hospital Residential |
| <input type="checkbox"/> Business | |
| <input type="checkbox"/> Highway Business | |

Overlay Districts (If Applicable): _____

2. General Information

Petitioner Name: Joseph Fern Jr

Petitioner Address: 10 Hood St. Squa. MA 01906

Tel. #: Days (617) 894 - 8441

Evenings: (617) 894 - 8441

Fax: () _____

Email: _____

Petitioner is: ☒ Owner ☐ Prospective Purchaser ☐ Tenant

☐ Licensee ☐ Other (Describe) _____

Owner Name (if different): _____

Owner address: _____

Tel. #: Days () _____ - _____

Evenings: () _____ - _____

Fax: () _____ - _____

Email: _____

Designee Name (if different from Petitioner): _____

Designee address: _____

Tel. #: Days () _____ - _____

Evenings: () _____ - _____

Fax: () _____ - _____

Email: _____

3. Type of Application (Check all that apply):

- ☒ Special Permit ☐ Site Plan Approval ☐ Planned Development
☐ Amend an Existing Board Order (provide previous Case Number and explain) _____

4. Written Project Summary- Describe the project and proposed work, existing and planned uses, structure(s) locations, square footage of building(s), units/number of bedrooms (if applicable), parking, setbacks, project schedule, hours of operation/number of employees (if applicable) and zoning relief necessary: (Use additional sheets as needed):

See Attached

5. Type of Request (Check all that apply):

- ☐ Use Request by Special Permit ☒ Reconstruction/Extension/Alteration of Nonconforming Structure
☐ Change/Extension of Nonconforming Use ☒ Off-Street Parking Relief/Off-Street Loading Relief

6. Fee Schedule (Fees may be paid by personal check, treasurer's check or money order)

Special Permit Application Fee: See attached Fee Schedule (effective January 1, 2017)
\$80.00 payable to the Chelsea Record

Site Plan Application Fee: \$80.00 payable to the Chelsea Record

I/We hereby certify under the pains and penalties of perjury that the foregoing information contained in this petition are true and complete.

Joseph R. Ferraro Jr.
SIGNATURE OF PETITIONER

03/12/20
DATE

Joseph R. Ferraro Jr.
SIGNATURE OF PROPERTY OWNER

03/12/20
DATE

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED AND WILL BE RETURNED TO APPLICANT

Zoning Board of Appeals
City Hall, Room 101, 500 Broadway
Chelsea, Massachusetts 02150
Telephone (617) 466-4180
Fax (617) 466-4195

Petition for Special Permit

3. Written Project Summary: Describe the project and proposed work, existing and planned uses, structure(s) locations, square footage of building(s), units/number of bedrooms (if applicable), parking, setbacks, project schedule, hours of operation/number of employees (if applicable) and zoning relief necessary.(Use additional sheets as needed):

Purpose: Convert an existing residential structure from a one (1) family to a two (2) family.

Proposed Work: Make the current finished basement that includes one bedroom, one $\frac{3}{4}$ bathroom, and a living room, into a legal one bedroom apartment with a kitchen. The proposed work includes separating utilities (electrical, heating) and adding a kitchen. No exterior construction is needed except adding the second gas meter and electrical meter.

Existing Use: A single family home that includes 3 bedrooms and 1 full bathroom upstairs with a finished basement. The basement area includes an additional $\frac{3}{4}$ bathroom (toilet, sink, and shower), a bedroom area ~~with a door that leads to the outside~~, a living room area, and a hallway area that contains the utilities and a second door leading to the outside.

Existing Sq. Ft: Approximately 4003sq ft.

Planned Use: The planned use is to make the basement into a separate living unit from the upstairs to become a legal one (1) bedroom apartment; converting the existing structure from a single family structure to a two family structure.

Unit Totals:

Unit 1: 4 bedroom, 1 $\frac{3}{4}$ bathroom

Proposed Unit Totals:

Unit 1: 3 bedroom, 1 bathroom

Unit 2: 1 bedroom, $\frac{3}{4}$ bathroom (shower, sink, toilet)

Existing and Proposed dimensional requirements: See Attached Floor/Plot Plans

Parking

Current Parking: Supplies a total of 2 off-street parking spaces in the drive way. One is a tandem spot in front of the garage that fits one car. The second off-street parking spot is also in the driveway. **See Attached Photo.** There is the availability of on-street parking directly in front of the residence to accommodate one additional car if needed.

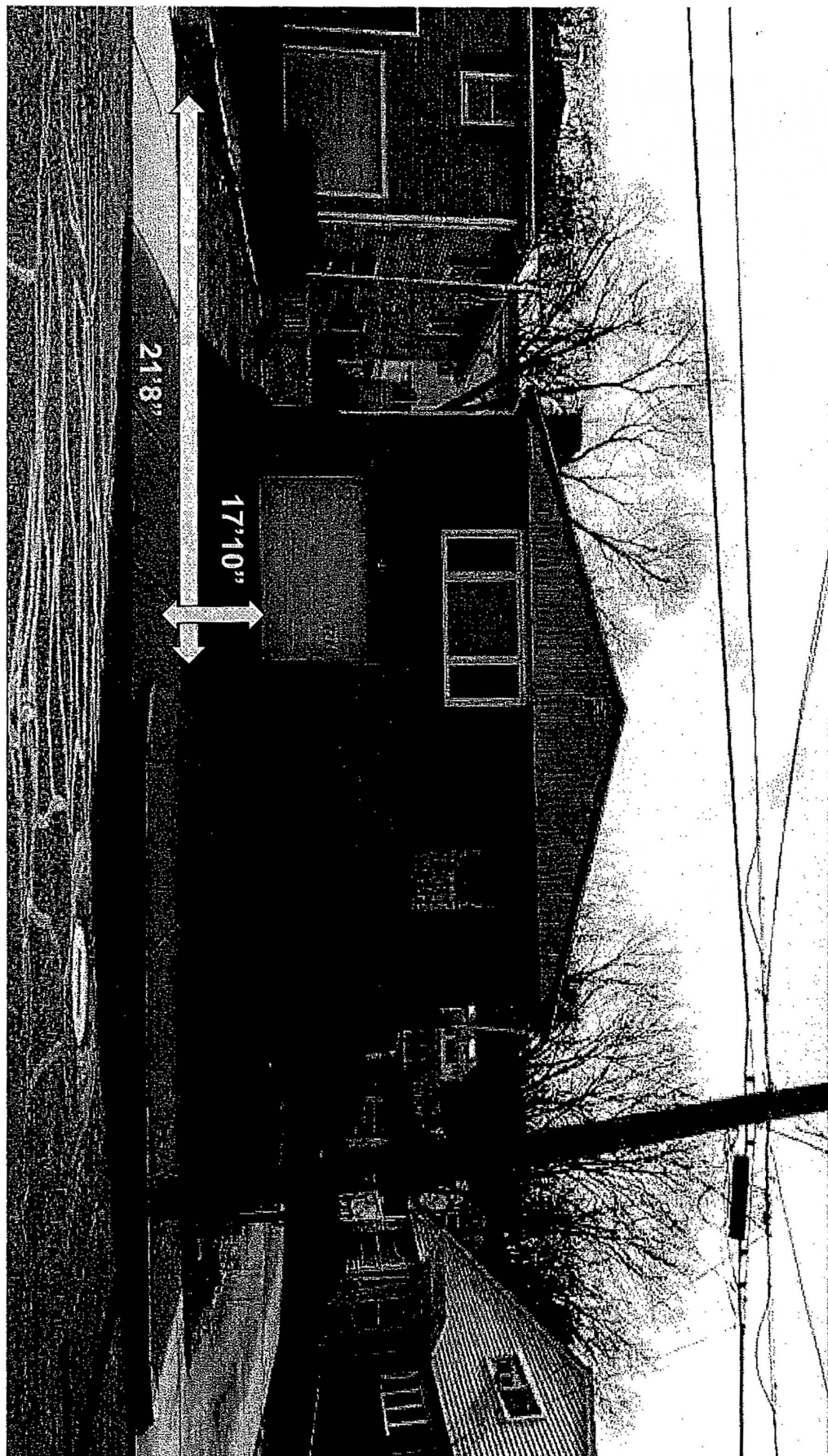
Zoning Relief Necessary

Parking Relief: To meet current zoning requirements, parking relief is needed for 2 spots.

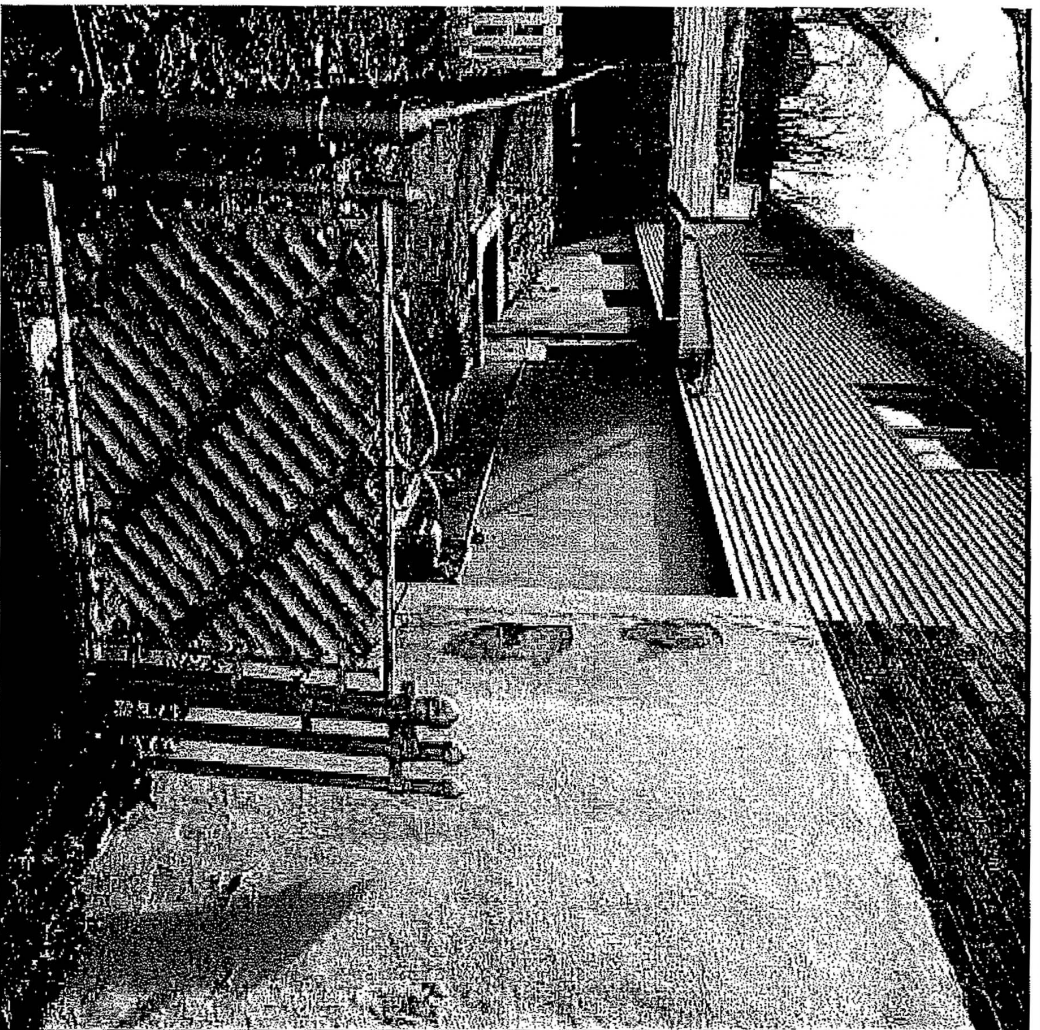
Lot Area: To meet current zoning requirements, relief is needed for total Lot Area.

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- Walkway leading to egress into Proposed Unit 2 and backyard.



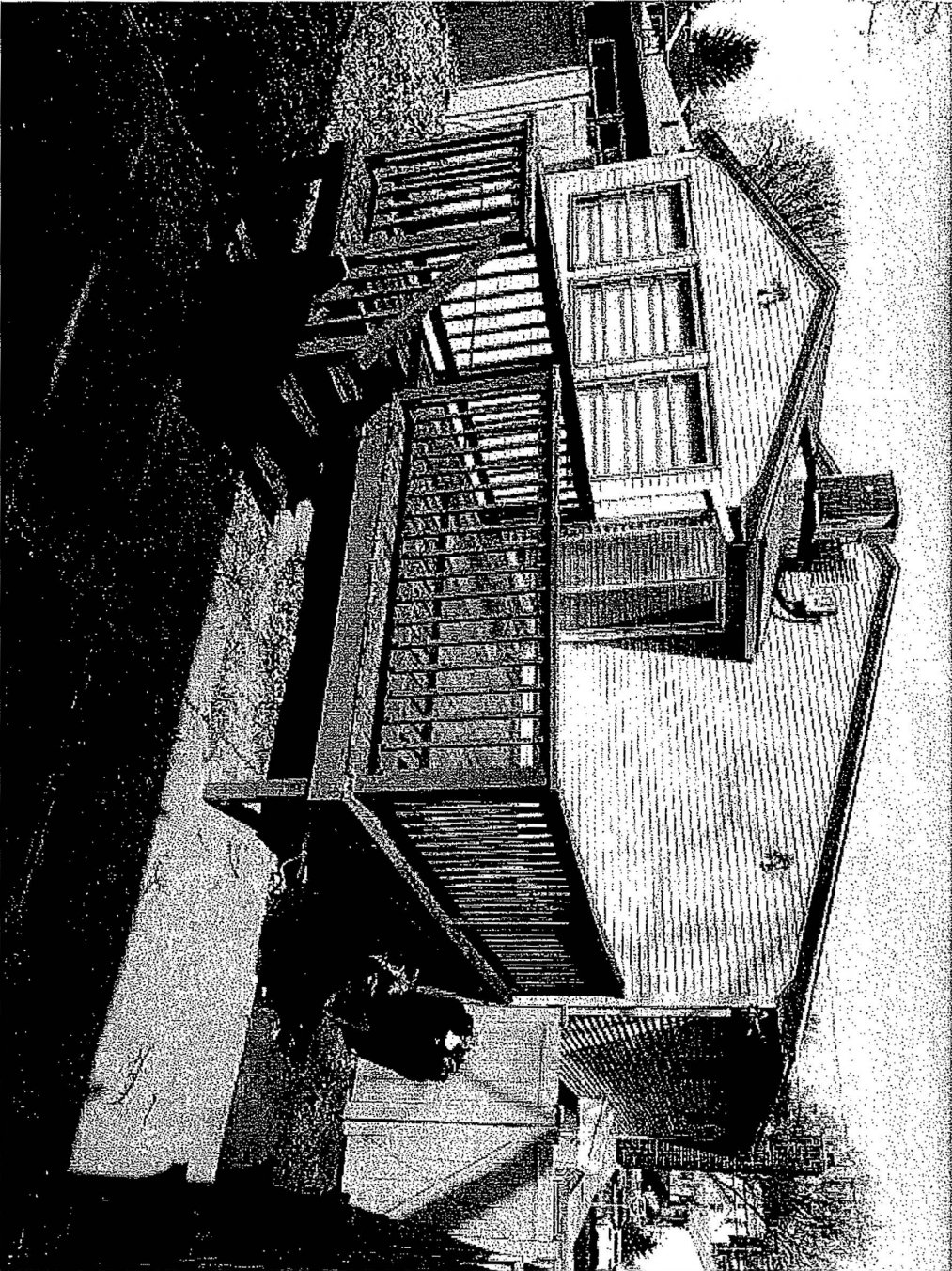
House View: Left Side

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CHESAPEOTE, VA

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- Rear Entrance to Unit 1 from deck.

House View:
Back



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- Second egress
into Proposed Unit 2.

House View: Right Side



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House
View:
Backyard

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City of Chelsea

DEPARTMENT OF INSPECTIONAL SERVICES

City Hall, 500 Broadway
Chelsea, Massachusetts 02150

Michael McAteer
Director

Telephone (617) 466-4130
Fax (617) 466-4145

March 4, 2020

Joseph Fern Jr.
10 Hood Street
Saugus, MA 01906

Re: 111 Springvale Avenue, Chelsea, MA 02150 R-1 Zoning District

Dear Applicant:

This office has completed its review of your Application for an Occupancy Permit seeking approval for the conversion of an existing residential structure from one (1) family to a two (2) family structure and we find as follows:

Records available to this office indicate that your one family (1) structure has been classified as a lawful non-conforming structure within the R-1 Residential District, in which the referenced premise is located.

Pursuant to Article 7 entitled "SPECIAL RESIDENTIAL REGULATIONS" and section 34-154 entitled "Conversion of dwelling" of The City of Chelsea Zoning Ordinance, no new dwelling unit created by conversion of an existing dwelling into a greater number of units shall be permitted unless the requirements of minimum lot area for each dwelling unit, maximum ratio of floor area to lot area, usable open space and off-street parking are satisfied for all dwelling units in existence and proposed.

Your proposed construction fails to meet said standards as follows:

- | | |
|--|----------------------------|
| a) Required lot area 7,500 square feet | proposed 4,000 square feet |
| b) Parking spaces required 4 | proposed 2 spaces |

Therefore, your application has been denied and your proposed reconstruction may not be lawfully constructed unless the Zoning Board of Appeals grants the required Special Permit and Variance. Petition forms, for that purpose, are enclosed for your convenience.

Yours truly,

Michael McAteer
Director

Cc: John DePriest, Director of Planning and Development

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CITY OF CHELSEA, MA
INSPECTIONAL SERVICES OFFICE

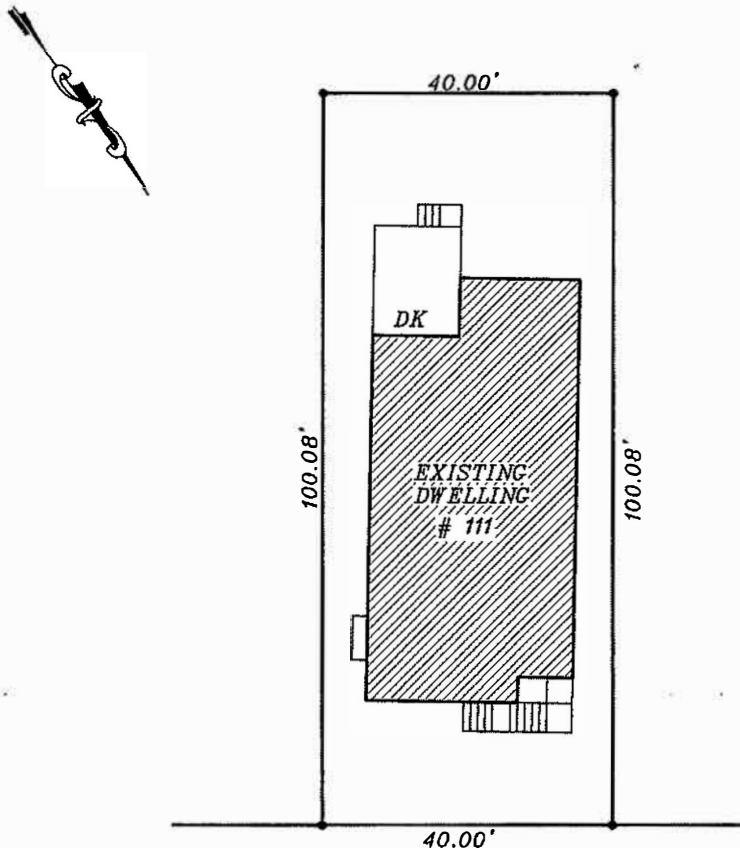
MORTGAGE INSPECTION PLAN

NORTHERN ASSOCIATES, INC.

92 MAPLE AVENUE ANDOVER, MA 01810 TEL:(978) 837-3335 FAX:(978) 837-3336
MASSACHUSETTS

MORTGAGOR: JOSEPH ROBERT FERN, JR.
LOCATION: 111 SPRINGVALE AVE
CITY, STATE: CHELSEA, MA
DATE: 12/09/19

DEED REF. 640/86
PLAN REF. ASSESSORS
SCALE: 1"=20'
JOB #: 2193800



SPRINGVALE AVENUE

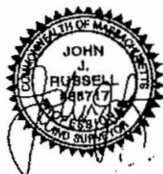
CERTIFIED TO: LEADER BANK, N.A.

Flood hazard zone has been determined by scale and is not necessarily accurate. Until definitive plans are issued by HUD and/or a vertical control survey is performed, precise elevations cannot be determined.

LOT CONFIGURATION IS BASED
ON ASSESSOR'S INFORMATION
AND MAY NOT BE EXACT

INSTRUMENT SURVEY RECOMMENDED

NOTE: This mortgage inspection was prepared specifically for mortgage purposes only and is not to be relied upon as a land or property line survey, used for recording, preparing deed descriptions, or construction. No corners were set. Building location and offsets are approximately located on ground and are shown specifically for zoning determination only and are not to be used to establish property lines. The matters shown hereon are based on client-furnished information and may be subject to further out-sales, takings, easements and rights of way, and other matters of record and prescriptive or other rights. Northern Associates, Inc. assumes no responsibility herein to land owner or occupant, accepts no responsibility for damages resulting from said reliance by anyone other than the said mortgagee and its assigns in connection with its proposed mortgage financing to said mortgagee.



I render this mortgage inspection plan to be issued with the best of my knowledge, information and belief.

I further state that in my professional opinion that the structures shown conform with the local zoning horizontal dimensional setback requirements at the time of construction or are exempt under provisions of M.G.L. CH. 40A Sec. 7.

- ☒ 1. Property/House is not in Flood Hazard.
- ☐ 2. Property/House is in a Flood Hazard Area.
- ☐ 3. Information is insufficient to determine Flood Hazard.

Flood Hazard determined from latest Federal Flood

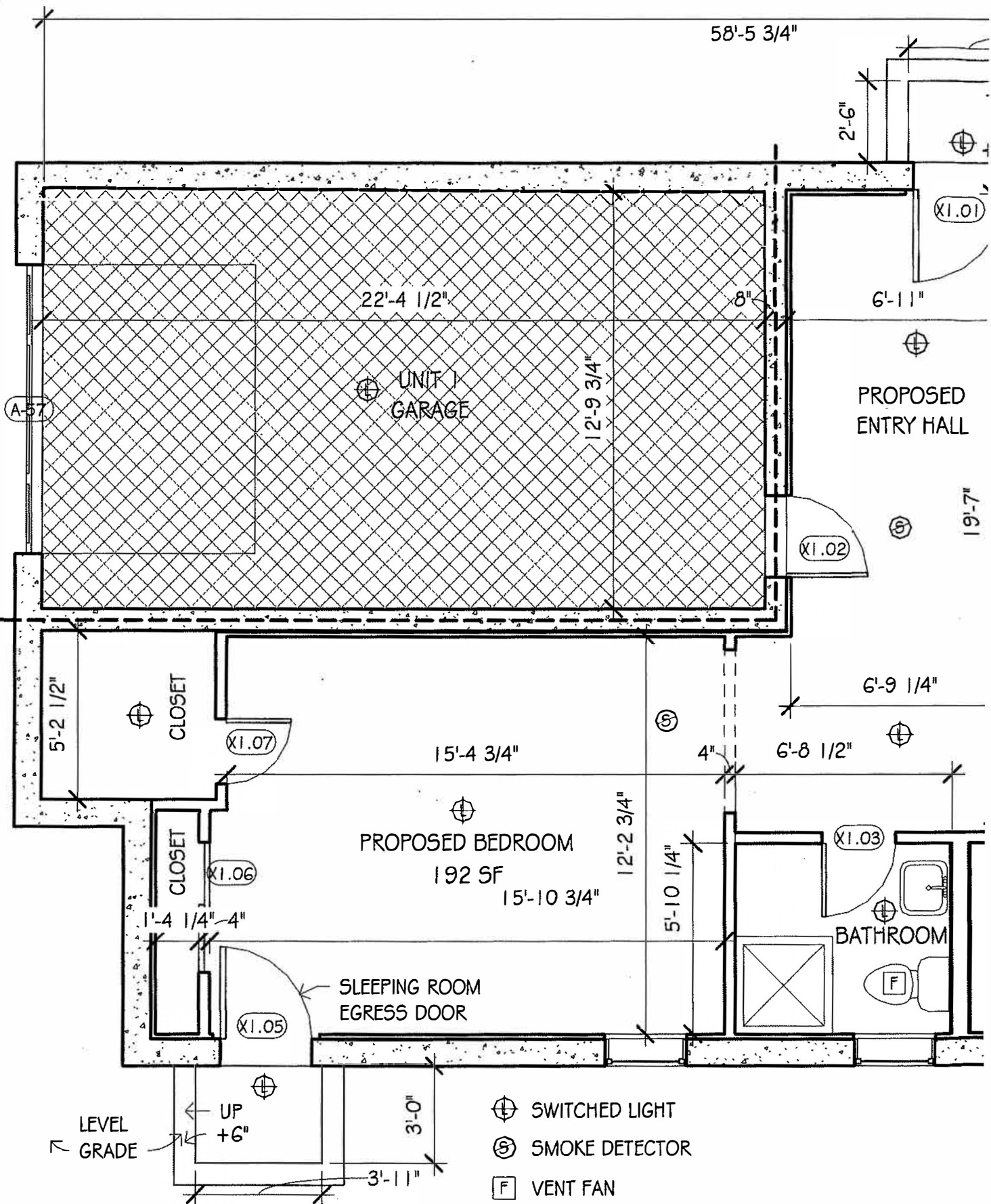
Insurance Rate Map Panel 25017C0411E

Date 06/04/10

Zone X-UNSHADED

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58'-5 3/4"






CITY OF CHELSEA
ZONING BOARD OF APPEALS
City Hall, 500 Broadway, Room 101
Chelsea, Massachusetts 02150

Tel: (617) 466-4180 * Fax: (617) 466-4195

Janice Tatarka, Chair
Arthur Arsenault, Member
Joseph Mahoney, Member
Hugo Perdomo, Member
Marilyn Vega-Torres, Member
Joan Cromwell, Associate

Paulette Velastegui, Secretary

TO: Jeanette Cintron White, City Clerk
FROM: John DePriest 
RE: Special Permit/Variance/Major Site plan Review Petition(s)
DATE: 3-13-20

Petition for:

X Special Permit 111 Springvale Ave

X Variance

 Major Site Plan Review

Submitted By:

Joseph Fern

Includes all submittal items and is complete for submittal purposes. Photos to be submitted prior to posting of the hearing.

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