

 SPECIAL PERMIT SITE PLAN REVIEW APPLICATION

Applicant:

Date:

Applicant is:

 Owner Tenant Licensee Prospective Purchaser Other _____

Applicant Address:

Email address:

Phone Number:

Location of Property:

Deed Reference:

Book

Page

Zoning District

Map / Parcel

Narrative Description Required – See Page 2

1. Please provide the [Chapter / Section](#) (click to open Zoning Bylaw) of the Oxford Zoning Bylaw that pertains to your proposed use:

2. Signature of Applicant: _____

3. Signature of Owner: _____

INSTRUCTIONS: Complete two (2) copies of this application and tax verification form. Deliver the forms, the filing fee, a completed site plan review checklist, certified abutter's list if applicable, any supporting documentation, traffic report and stormwater report, and eleven (11) copies of the site plan to the Planning Department on the Wednesday prior to a regularly scheduled meeting. A digital copy of all application materials is also required.

All applications requiring a public hearing, submission of an abutters list and stamped envelopes addressed to each abutter are required. A \$5 per abutter fee will be assessed if stamped envelopes are not submitted.

The Special Permit review procedure description is included in Chapter XIV Section 5.0; the site plan review procedure description is included in Chapter XV of the Oxford Zoning Bylaw, as adopted 10/11/2023. Please be sure to indicate on the following pages compliance with Chapters XIV and XV. You may obtain a copy of the Oxford Zoning Bylaw through the Town Clerk or download from the Town's website: www.oxfordma.us.

FILING FEE: Special Permit: \$650 [includes \$150 legal notice fee]. Site Plan Review: \$150 if no public hearing is required; \$300 [includes \$150 legal notice fee] if the Board requires a public hearing. Special Permit and Site Plan Review: \$900 [includes \$200 legal notice fee]. Applicant agrees to pay any peer review fees and any additional costs incurred above the initial fee.

NOTICE: Oxford Planning Board meets on the second and fourth Monday of each month. To ensure that your submission is placed on the agenda, you must submit a complete application package to the Planning Board before noon on the Wednesday prior to the meeting.

FOR OFFICIAL USE ONLY

THIS PORTION TO BE COMPLETED BY THE PLANNING BOARD STAFF

Received by Planning Board: (Signature) _____

Date: _____ Time: _____

Received by Town Clerk: (Signature) _____

Date: _____ Time: _____

4. Narrative

Using this page or a similar format, please provide a brief description of the proposed use. Include provisions for parking, lighting, signage, staffing, traffic, septic, and any other items specific to the application. Please include any waivers requested.

Keeping in mind that projects come in a variety of sizes and scope, please address each section of the Review Considerations completely. A complex project should include where we may find details of each section in the plans or other documents. A simple project may require just a brief description. The Planning Board shall consider and apply the following factors during its review of site plan applications.

Lighting:

Landscaping and Screening:

Stormwater Management:

Site Development Standards:

Pedestrian and Vehicle Access: Traffic Management:

Aesthetics:

Utilities; Security; Emergency Systems:



TO THE APPLICANT:

Please furnish the following information and return to the appropriate board, office, department, commission or division of the Town of Oxford (pursuant to Chapter 53, Section 1 through 5, General By-Laws, Town of Oxford):

**APPLICANT or
PRINCIPLE OF ORGANIZATION:** _____

Address: _____

**PROPERTY
OWNER:** _____

Address: _____

Board of Assessors:

Property Location: _____

Please list parcel owned by above applicant:

Map: _____ Parcel: _____ Date Purchased: _____

Assessor's Office _____ Date _____

Tax Collector:

Tax Status: _____

Real Estate: _____

Personal Property Tax: _____

Treasurer/Collector's Office _____ Date _____



TOWN OF OXFORD

Board of Assessors

Alexander Sendzik-MAA, Town Assessor
325 Main Street, Oxford, MA 01540
Phone (508) 987-6038 ext. 1051
Fax (508) 987-3706
assessor@oxfordma.us

ABUTTERS LIST REQUEST FORM

DATE: _____

MAP _____

PARCEL _____

PROPERTY ADDRESS: _____

OWNER: _____

NAME OF REQUESTOR: _____

PHONE: _____

EMAIL ADDRESS: _____

TOWN DEPARTMENT REQUIRING LIST:

- Board of Health - 100'
- Board of Selectman – 300'
- Conservation - 100'
- Planning Board (site review) - 300'
- Zoning Board of Appeals – 300'
- Other

PURPOSE: _____

\$10 Fee

Please remit to: Town of Oxford- Assessor 325 Main Street Oxford, MA 01540

Assessor Space Only
____ PAYMENT RECEIVED ____ Check ____ Cash