GENERAL SPECIAL PERMIT FORM



Phone: 508-321-4890 | zoning@medwayma.gov https://medwayma.gov/zoning-board-of-appeals/

NOTE: THE APPLICATION WILL NOT BE CONSIDERED "COMPLETE" UNLESS ALL NECESSARY DOCUMENTS, FEES, & WAIVER REQUESTS ARE SUBMITTED. A GENERAL APPLICATION FORM MUST BE COMPLETED FOR ALL APPLICATIONS.

TO BE COMPLETED BY THE APPLICANT

Please provide evidence regarding how the Special Permit Decision Criteria, outlined below, is met. Please write "N/A" if you believe any of the Criteria is Not Applicable. Provide attachments if necessary.

1.	The proposed site is an appropriate location for the proposed use:
2.	Adequate and appropriate facilities will be provided for the operation of the proposed use:
3.	The proposed use as developed will not create a hazard to abutters, vehicles, pedestrians, or the environment:
4.	The proposed use will not cause undue traffic congestion or conflicts in the immediate area:
5.	The proposed use will not be detrimental to the adjoining properties due to lighting, flooding, odors, dust, noise, vibration, refuse materials, or other undesirable visual, site, or operational attributes of the proposed use:
6.	The proposed use as developed will not adversely affect the surrounding neighborhood or significantly alter the character of the zoning district:

		GENERAL SPECIA	AL PERMIT FORM
	7.	The proposed use is in harmony with the general purpose and intent of this Zoning Bylaw:	
	8.	The proposed use is consistent with the goals of the Medway Master Plan:	
	9.	The proposed use will not be detrimental to the public good:	
ignat	ure o	of Applicant/Petitioner or Representative	Date

Page | 2 Received by: _______ Date: _____