



**Planning & Economic Development Board
Town of Medway, MA**

MARIJUANA SPECIAL PERMIT APPLICATION

INSTRUCTIONS TO APPLICANT/OWNER

This Application is made pursuant to Section 8.9 or 8.10 of the *Medway Zoning Bylaw*.
The provisions of Section 3.5 Site Plan Review may also apply.

The Town's planning and engineering consultants will review the Application and
provide review letters to the Planning and Economic Development Board.

A copy of those review letters will be provided to you in advance of the public hearing.

You and/or your duly authorized Agent/Official Representative are expected to attend the
Board meetings at which your Application will be considered to answer any questions and/or
submit such additional information as the Board may request.

Your absence at hearings may result in a delay in the Board's review of the special permit application.

_____, 20____

APPLICANT INFORMATION

Applicant's Name: _____

Mailing Address: _____

Name of Primary Contact: _____

Telephone: Office: _____ Cell: _____

Email address: _____

____ Please check here if the Applicant is the equitable owner (*purchaser on a purchase and sales agreement.*)

PROJECT INFORMATION

Development Name: _____

Project Address: _____

Plan Title: _____

Plan Date: _____

Plan prepared by:
Name: _____

Firm: _____

Type of Facility:

- _____ Retail Registered Medical Marijuana Facility (*allowed only in the Business Industrial Zoning District*)
- _____ Non-Retail Registered Medical Marijuana Facility (*allowed only in the East and West Industrial Zoning Districts*)
- _____ Recreational (Adult Use) Marijuana Establishment (*allowed only in the East and West Industrial Zoning Districts*)

Type of Project:

- _____ Construction of a New Building(s)
How many buildings? _____
Dimensions of New Building(s) _____
Gross Square Footage of New Building(s) _____
- _____ Renovation of Existing Structure(s)
How many buildings? _____
Building Dimensions _____
Gross Square Footage of Existing Structure(s) _____
- _____ Construction of an addition to an Existing Structure
Addition Dimensions _____
Gross Square Footage of Addition _____
- _____ Demolition of any structures on the site? If yes, please explain. _____

- _____ Use of an existing building without renovation or site changes

How many parking spaces presently exist? _____

How many new parking spaces are proposed? _____

What is the existing amount of impervious surface (buildings and paved area) on the property?

How much additional impervious surface is planned? _____

Please note that a Stormwater Management and Land Disturbance Permit pursuant to Medway General Bylaws Section 26 may also be needed depending on the scope of the proposed project and the amount of planned land disturbance.

PROPERTY INFORMATION

The subject property is shown on the plan as Medway Assessor's Map #_____, Parcel #_____

Total Acreage of Land Area: _____

General Description of Property: _____

Current Use of Property: _____

Medway Zoning District Classification: _____

Length of Existing Frontage: _____ On what street? _____

Setbacks for Existing Structure (if applicable)

Front: _____

Side: _____

Back: _____

Side: _____

Is this property pre-existing, non-conforming to the *Medway Zoning Bylaw*? If yes, how? _____

Is the existing structure on this property pre-existing, non-conforming to the *Medway Zoning Bylaw*? If yes, how? _____

Has this property received any previous variances or special permits? ____ Yes ____ No
If so, please provide a copy of each decision with this application.

Wetlands

Is any portion of the property within a Wetland Resource Area? ____ Yes ____ No

Groundwater Protection

Is any portion of the property within a Groundwater Protection District?
____ Yes ____ No

Flood Plain

Is any portion of the property within a Designated Flood Plain? ____ Yes ____ No

Access to Town Water and Sewer

Is Town water and sewer available in the street on which the proposed project has its frontage? ____ Yes ____ No

PROPERTY OWNER INFORMATION (if not applicant)

Property Owner's Name: _____

Mailing Address: _____

Primary Contact: _____

Telephone:

Office: _____ Cell: _____

Email address: _____

The owner's title to the land that is the subject matter of this application is derived under deed from: _____ to _____ dated _____ and recorded in Norfolk County Registry of Deeds, Book _____ Page _____ or Land Court Certificate of Title Number _____, Land Court Case Number _____, registered in the Norfolk County Land Registry District Volume _____, Page _____.

CONSULTANT INFORMATION

ENGINEER:

Mailing Address: _____

Primary Contact: _____

Telephone:
Office: _____ Cell: _____

Email address: _____

Registered P.E. License #: _____

SURVEYOR:

Mailing Address: _____

Primary Contact: _____

Telephone:
Office: _____ Cell: _____

Email Address: _____

Registered P.L.S. License #: _____

ARCHITECT:

Mailing Address: _____

Primary Contact: _____

Telephone:
Office: _____ Cell: _____

Email address: _____

Registered Architect License #: _____

LANDSCAPE ARCHITECT/DESIGNER:

Mailing Address: _____

Primary Contact: _____

Telephone:
Office: _____ Cell: _____

Email address: _____

Registered Landscape Architect License #: _____

ATTORNEY:

Mailing Address:

Primary Contact:

Telephone:

Office: _____

Cell: _____

Email address: _____

OFFICIAL REPRESENTATIVE INFORMATION (if applicable)

Name: _____

Address: _____

Telephone:

Office: _____

Cell: _____

Email address: _____

SIGNATURES

The undersigned, being the Applicant for approval of a Marijuana Special Permit submits this application and Plan to the Medway Planning and Economic Development Board for review and approval. I hereby certify, under the pains and penalties of perjury, that the information contained in this application is a true, complete and accurate representation of the facts regarding the property and proposed development under consideration.

(If applicable, I hereby authorize _____ to serve as my Agent/Official Representative to represent my interests before the Medway Planning & Economic Development Board with respect to this application.)

I have reviewed Section 8.9 or 8.10 of the *Medway Zoning Bylaw* and understand and agree to the requirements and responsibilities specified therein.

In submitting this application, I authorize the Board, its consultants and agents, Town staff, and members of the Design Review Committee to access the site during the review process.

I understand that pursuant to M.G.L. 53G, the Medway Planning and Economic Development Board may retain outside professional consultants to review this application and that I am responsible for the costs associated with such reviews.

I understand that the Planning and Economic Development Board, its agents, staff, consultants, and other Town staff and committees may request additional information which I am responsible for providing to assist them in reviewing the proposed development.

Signature of Property Owner_____
Date_____
Signature of Applicant (if other than Property Owner)_____
Date_____
Signature of Agent/Official Representative_____
Date

MARIJUANA SPECIAL PERMIT FEES

Application/Filing Fee - \$500

(Not required if also applying for site plan review)

Advance on Review Fee - \$500

Please submit 2 separate checks each made payable to: Town of Medway

MARIJUANA SPECIAL PERMIT APPLICATION CHECKLIST

To be Completed by Applicant

- _____ Special Permit Application (2 signed originals) – one for Town Clerk and one for Planning and Economic Development Board
- _____ Two (2) copies of a *Project Description* – one for the Town Clerk and one for the Planning and Economic Development Board. This description should provide a complete and thorough explanation of what is proposed and must address how the proposed project meets the requirements of Section 8.9 or 8.10 of the *Medway Zoning Bylaw*.
- _____ Three (2) full size copies of a Site Plan prepared in accordance with Sections 204-4 and 204-5 of the *Medway Site Plan Rules and Regulations* – one for Town Clerk and one for Planning and Economic Development Board
- _____ One (1) ledger size (11" x 17") copy of the Site Plan
- _____ Electronic Version of the Site Plan and all associated application documents. Provide disk or flash drive or email the plan and documents to:
planningboard@medwayma.gov.
- _____ Certified Abutters List and mailing labels from the Medway Assessor's office for all property located within 300 feet of the subject property
- _____ Request(s) for waivers from the *Site Plan Rules and Regulations*. *Check with the Planning and Economic Development office for the proper form.*
- _____ One (1) copy of previous variance or special permit decisions for the subject property.
- _____ Depending on the size and scope of the project, two (2) copies of a *Stormwater Drainage Calculations/Report* prepared in conformance with Section 204 – 3, 3) of the *Site Plan Rules and Regulations* or two (2) copies of a stormwater drainage analysis report. *Check with Planning and Economic Development office.*
- _____ Depending on the size and scope of the project, two (2) copies of a traffic study or analysis. *Check with Planning and Economic Development office.*
- _____ One (1) copy of all relevant approvals received to date from other Town boards/committees/departments
- _____ Proof of present or pending ownership of all land within the development site.
- _____ *Marijuana Special Permit Filing Fee* – Payable to Town of Medway. Not required if also applying for site plan review.
- _____ *Advance of Special Permit Review Fee* – Payable to Town of Medway, Not required if also applying for site plan review.