



**Planning & Economic Development Board - Town of Medway, MA
SPECIAL PERMITS**

Application for Special Permit Approval

INSTRUCTIONS TO APPLICANT/OWNER

This Application is made pursuant to the Medway Zoning Bylaw. Certain special permits are issued by the Planning and Economic Development Board instead of the Zoning Board of Appeals.

The Town's Engineering Consultant may review the Application and associated submittals 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 meeting.

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

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

_____, 20____

APPLICANT INFORMATION

Applicant's Name: Town of Medway

Mailing Address: 155 Village Street

Medway, MA 02053

Name of Primary Contact: Peter Pelletier

Telephone: _____
Office: 508-533-3275 Cell: [REDACTED]

Email address: ppelletier@medwayma.gov

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

PROPERTY INFORMATION

Location Address: 45 Holliston Street

The land shown on the plan is shown on Medway Assessor's Map # 049 as Parcel # 056

Size of Development Parcel(s): 28.86

Development Name: Medway Middle School Green Stormwater Infrastructure

General Description of Property: Medway Middle School consisting of the facility, athletic fields, and parking lots.

Medway Zoning District Classification: AR-II

TYPE OF SPECIAL PERMIT

Check all that apply:

- ☐ Adult day care facility
 - ☐ Auto body shop
 - ☐ Assisted living residence facility
 - ☐ Brew pub
 - ☐ Car wash
 - ☐ Central Business District Development Standards (Section 10)
 - ☐ Construction equipment/machinery sales, leasing or rentals
 - ☐ Drive-thru facility
 - ☐ Electric vehicle charging station with digital advertising (Section 5.4.2)
 - ☐ Hotel
 - ☐ Mixed-Use Development or Mixed-Use Building in the Central Business District (Section 10.3)
 - ☐ Motel
 - ☐ Oak Grove District (Section 8.6)
 - ☐ Outdoor display
 - ☐ Shopping center or multi-tenant development
 - ☐ Reduced parking (Section 7.1.1.J.)
 - ☐ Restaurant with live entertainment
 - ☐ Retail store larger than 20,000 sq. ft.
 - ☐ Small scale ground-mounted solar installation (Section 8.11)
 - ☐ Solar parking canopies (Section 8.11)
 - ☐ Tier 2 battery energy storage system (Section 8.12)
 - ☐ Vehicle fuel station with repair services
 - ☐ Vehicle fuel station with car wash
 - ☐ Vehicle fuel station with convenience store
 - ☐ Vehicle repair
 - ☐ Veterinary Hospital
 - ☒ Other special permit uses, normally reviewed by the Zoning Board of Appeals, such as but not limited to a Groundwater Protection District Special Permit and a Flood Plain Special Permit, but which are reviewed instead by the Planning and Economic Development Board when the project also requires site plan review (Section 3.4 H)
- PLEASE SPECIFY: Groundwater Protection District Special Permit
- ☐ Other
PLEASE SPECIFY: _____

NOTE – There are separate application forms for the following special permits:

- Open Space Residential Development (OSRD) (Section 8.4)
- Adult Retirement Community Planned Unit Development (ARCPUD) (Section 8.5)
- Multi-Family Housing Overlay District (MHOD) (Section 5.6.4)
- Adaptive Use Overlay District (AUOD) (Section 5.6.2)
- Marijuana Facilities and Establishments (medical and adult recreational) (Sections 8.9 and 8.10)
- Affordable Housing (Section 8.6)

Do not use this application form for the above noted types of developments. Please contact the Planning and Economic Development Board office.

PROPERTY OWNER INFORMATION (if not applicant)

Property Owner's Name: Town of Medway
Mailing Address: 155 Village Street
Medway, MA 02053
Primary Contact: Michael E. Boynton
Telephone: Office: 508-533-3200 Cell: _____
Email address: mboynton@medwayma.gov

DESIGNATED REPRESENTATIVE INFORMATION

Name: _____
Address: _____

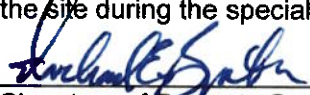
Telephone: _____
Office: _____ Cell: _____
Email address: _____
Relationship to Applicant: _____

SIGNATURES

The undersigned, being the Applicant, herewith submits this application for a special permit(s) to the Medway Planning and Economic Development Board for review and action. 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 under consideration.

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

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



Signature of Property Owner (printed name)

9/14/26

Date

Signature of Property Owner (printed name)

Date 9/10/26

Signature of Applicant (if other than Property Owner) (printed name)

Date

Signature of Agent/Designated Representative (printed name)

Date

