



**Town of Westport**  
**Planning Board**  
**856 Main Road**  
**Westport, MA 02790**

www.westport-ma.gov  
planning@westport-ma.gov

Tel: (508) 636-1037  
Fax: (508) 636-1031

**SPECIAL PERMIT FOR INCLUSIONARY HOUSING APPLICATION**

Application No. \_\_\_\_\_

Date \_\_\_\_\_

**Article 13 of the Westport Zoning By-Laws**

This application must be legibly completed (*please type*), signed, and submitted with the required fees by the Applicant or his representative in accordance with the Planning Board Rules and Regulations as adopted under its jurisdiction as a Special Permit Granting Authority and the procedures as set forth in said rules and Regulations.

Type of Special Permit Required: \_\_\_\_\_

**Site Information:**

Street Address/Location of property: \_\_\_\_\_

Assessor's Map: \_\_\_\_\_ Assessor's Lot: \_\_\_\_\_ Lot Area (Acres): \_\_\_\_\_

Total Number of Units Proposed (T): \_\_\_\_\_

Total Number of Affordable Units Required & Proposed ( $\geq T \times 10\%$ ): \_\_\_\_\_ (round up).

Type of Unit (Apt., Townhouse, Detached, etc. and no. of bedrooms)	Number of Units	Ownership/Rental	Market Rate or Affordable
<b>Totals</b>			

Will any of the affordable units be provided off-site? \_\_\_\_\_.

If off-site:

Assessor's Map & Lot of that property: \_\_\_\_\_.

Street address/description: \_\_\_\_\_.

Units per Acre: \_\_\_\_\_ Present Zoning: \_\_\_\_\_

Present Use: \_\_\_\_\_

Is the site in an overlay district, such as the aquifer protection or flood plain district?

(Circle one) Y N If so, what district(s)? \_\_\_\_\_

Are there wetlands on site? (Circle one) Y N If so, has the delineation been approved by the Westport Conservation Commission? (Circle one) Y N

Are perc tests, water tables and soil test pit data available for the area proposed for affordable units? (Circle one) Y N

Describe provisions for water and sewer. All such provisions are at the expense of the applicant:

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Briefly describe where the affordable units will be sited relative to the market rate units:

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Briefly describe how the affordable units will be integrated in design, appearance, construction, and quality of materials with the rest of the development:

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➤ A Marketing plan for affordable units is required, and should be attached to this application.

➤ A proposed construction schedule for affordable and market rate units, that complies with section 13.6 of the by-law is required and should be attached to this application.

What is the proposed duration of the affordability provisions to be contained in deed restrictions?

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**Project description and justification of request for a Special Permit:**

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Application No. \_\_\_\_\_

01/17

Name of Applicant(s): \_\_\_\_\_  
CIRCLE ONE: Agent/Attorney/Purchaser

Address: \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Telephone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Name of Property Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Telephone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

I hereby request a hearing before the Planning Board with reference to the above application and grant permission for the Planning Board and its agents to enter onto the property during normal working hours.

Signature of Applicant \_\_\_\_\_  
(or representative, letter of authorization required)

Address if not Applicant \_\_\_\_\_

Tel / Fax / Email: \_\_\_\_\_

**Owner's Permission (Signature) if Other Than Applicant** \_\_\_\_\_

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\_\_\_\_\_  
*Received by Town Clerk:*

Application reviews and fees received in the amount of:

- ☐ \$\_\_\_\_\_ Application fee
- ☐ \$\_\_\_\_\_ Abutter Notification
- ☐ \$\_\_\_\_\_ Consultant Review Fee
- ☐ \$\_\_\_\_\_ Town Counsel Review Fee
- ☐ Concurrent applications:

\_\_\_\_\_  
\_\_\_\_\_

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**Special Permit**

**Certified List of Parties in Interest**

*(must be submitted with Special Permit Application)*

To the Planning Board of the Town of Westport:

The undersigned, being an applicant for approval of the special permit for the land shown on Assessor's Map \_\_\_\_\_ and Lot(s) \_\_\_\_\_ *submits the attached sketch of the land listing the names of the adjoining owners in their relative positions and indicating the address of each party in interest in a separate list.* Parties in interest include owners of land in question, owners of land, which lies within 300 feet of a boundary or part thereof of the land in question, owners of land directly opposite any public or private street or way – all as they appear in the most recent applicable tax list, notwithstanding that the land of any such owner is located in another town; and the Planning Board's of Fall River, Dartmouth and Little Compton, RI, as prescribed in MGL Chapter 40A, Section 2.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

To the Planning Board of the Town of Westport:

This is to certify that at the time of the last assessment for taxation made by the town of Westport, the names and addresses of the parties in interest to the parcel of land shown above were as above written, except as follows:

Certified by: \_\_\_\_\_  
Assessor's Office, Town of Westport

Application No. \_\_\_\_\_