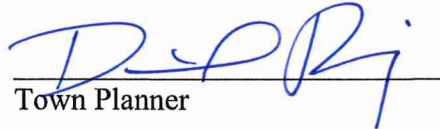


SALISBURY PLANNING BOARD
ACCESSORY APARTMENT SPECIAL PERMIT RECOMMENDATION

Please include the following items to ensure a timely recommendation to the Board of Appeals by the Planning Board:

- ☒ 1. Application must be filled out completely and correctly. (Map and Parcel must be included. Can be found in the Assessor's Office.) **Attachment 1**
- ☒ 2. A copy of the Special Permit Application to the Board of Appeals.
- ☒ 3. A Plan drawn to scale which includes the floor plan of the entire building, any other accessory buildings, the lot lines with lot area specified, and parking. (7 Copies)

IMPROPER OR INCOMPLETE INFORMATION WILL RESULT IN A DELAY IN THE FINAL RECOMMENDATION.


Town Planner

As soon as all information mentioned above is submitted, the Planning Board will place the item on the agenda within 30 Days.



ACC

Attachment 1

TOWN OF SALISBURY
REQUEST FOR PLANNING BOARD RECOMMENDATION – ACCESSORY APARTMENT

Date: 5-24-22

Applicant's Name: Chris Crump
Applicant's Address: 19L Inn Street, Newburyport, MA 01950
Telephone #: 978-397-3233 CHRIS @ CWC-DESIGN.COM

This application is for property located at
15 Learned Lane, Salisbury, Massachusetts.

Tax Map # 22 Lot # 41

1. Owner of Property: John Kimball
Owner's Address: 15 Learned Lane
2. Zoning District: R-2
3. Lot Size: 357,904 s.f.
4. Existing Use: Residential
5. Proposed Floor area of Accessory Apartment: 900 s.f.
6. Total Area of lot covered by all existing and proposed buildings: .8%
7. Number of parking spaces provided: 4+
8. Other Permits Required and Status of Applications: ZBA - special permit - on agenda for 6/14

Chris Crump
Signature of Applicant

[Signature]
Signature of Owner

Received: [Signature]
Planning Board

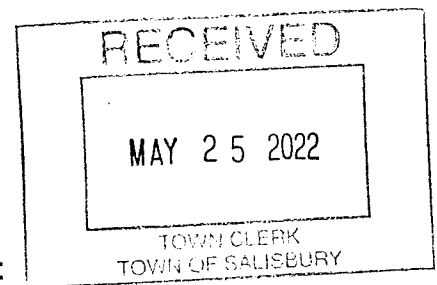




TOWN OF SALISBURY

Zoning Board of Appeals

5 Beach Rd, Salisbury, MA 01952



Petition for Relief / Special Permit

Case #: ZBA22-000014
Address: 15 LEARNED LN
Map: 22 Lot: -41

Application Date: 05/24/2022

Application Information:

Applicant Name: *Chris Crump*
Applicant Contact Type: *Zoning Petition Applicant*
Applicant Address: *19L Inn street, Newburyport, MA 01950*
Applicant Company Name: *CWC Design*
Applicant Company Address: *P.O. Box 164, Newburyport, MA 0190*
Applicant Home Phone:
Applicant Cell Phone: *978-397-3233*
Applicant Work Phone:
Applicant Type: *Representative*
Doing Business As? *CWC Design*

Application Zoning Information:

Have you appeared before any other Town Board or Commission related to this Project? *No*

Applicable Bylaw: *300-35 - Special Permit to allow a Similar Use*

Applicable Section(s) of the Zoning Bylaw: *300-35*

Reason for Relief: *Home owner is looking to add a 2 car garage with a 900s.f. accessory apartment above*

Has a variance, special permit, or finding been requested before for these premises?

[zbapermit::21424::255546]

Describe previous request:

Describe previous request:

Attachments & Documents

Site/Plot Plans: *F-CPP (5-13-22).pdf*

Tax Statement: *15 Learned Ln Tax Statement.pdf*

Deed: *15 Learned Ln Deed.pdf*

Other Petitions:

Other Supplemental Material:

SIGNATURE

I hereby certify that the information on this application and plans submitted herewith are correct, and that the application complies with all applicable provisions of Statutes, Regulations, and Bylaws to the best of my knowledge, and that all testimony to be given by me during the Zoning Board of Appeals public hearing associated with this application are true to the best of my knowledge and belief.

A handwritten signature in black ink, appearing to be 'Chas. G. [unclear]', written over a horizontal line.

Signature