



City of Newton, Massachusetts
Department of Planning and Development
1000 Commonwealth Avenue Newton, Massachusetts 02459

Telephone (617) 796-1120
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www.newtonma.gov

Ruthanne Fuller
Mayor

Barney Heath
Director

GENERAL PERMIT APPLICATION

PROJECT #: _____ ZONING DISTRICT: _____ DATE RECEIVED: _____

PROJECT DESCRIPTION:

Request for a Special Permit for an additional parking space w/in front setback on Allen Terrace. Per DRT recommendation, will set back 5' from street line.

PROPERTY LOCATION INFORMATION

STREET ADDRESS: 1090 Walnut Street CITY/ZIP: Newton Highlands 02461

LEGAL DESCRIPTION (SECTION, BLOCK, LOT): Map 104 SE, Section 52, Block 20, Lot 7

PROPERTY OWNER INFORMATION

NAME: SHI 2017 House Associates PHONE: 617.921.8194 ALT. PHONE: _____

MAILING ADDRESS: 1090 Walnut St, Newton Highl. 02461 E-MAIL ADDRESS: mwang@formandplace.com

PROPERTY OWNER CONSENT

I am (we are) the owner(s) of the property subject to this application and I (we) consent as follows:

- 1. This application for a land use permit or administrative approval for development on my (our) property is made with my permission.
2. I (we) grant permission for officials and employees of the City of Newton to access my property for the purposes of this application.

X [Signature] 02/06/22
(Property Owner Signature) (Date)
X _____
(Property Owner Signature) (Date)

NOTICE: The City of Newton staff may need access to the subject property during regular business hours and will attempt to contact the applicant/agent prior to any visit. Further, members of a regulatory authority of the city may visit the property as well.

APPLICANT / AGENT INFORMATION

NAME: Michael A Wang PHONE: 617.921.8194 ALT. PHONE: _____

MAILING ADDRESS: 91 Parker St, Newton, 02459 E-MAIL ADDRESS: mwang@formandplace.com

X [Signature] 02/06/22
(Applicant/Agent Signature) (Date)

NOTICE: The applicant/agent is the primary contact and may be any individual representing the establishment or property owner. The applicant/agent must also be legally authorized to make decisions on behalf of the Property Owner(s) in regards to the application.

OFFICE USE ONLY BELOW THIS LINE

CHECK APPROPRIATE PERMIT OR REVIEW PROCESS (CHECK ALL BEING SUBMITTED)

Table with 2 columns: Permit/Review Type and Status. Rows include Zoning Review Application, Comprehensive Permit, Administrative Site Plan Review, Variance Application, Sign Permit, Historic Preservation Review, Special Permit/Site Plan Approval, Conservation Commission Review, Fence Appeal, and Other, describe.

Comments: _____

PERMIT INTAKE INITIALS AND DATE STAMP

NOTE: This form MUST accompany all other Department of Planning and Development applications.

To Be Completed By Applicant