



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

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 (617) 796-1120  
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 www.newtonma.gov

Ruthanne Fuller, Mayor

Barney Heath, Director

**GENERAL PERMIT APPLICATION**

**PROJECT #:** \_\_\_\_\_ **ZONING DISTRICT:** BU-1

**DATE RECEIVED:** \_\_\_\_\_

**PROJECT DESCRIPTION:** Applicant is seeking a special permit to operate a for-profit school.

**PROPERTY LOCATION INFORMATION**

**STREET ADDRESS:** 1631 ~~and 1633~~ Beacon Street (2-12 Windsor Road) **CITY/ZIP:** Newton 02468

**LEGAL DESCRIPTION (SECTION, BLOCK, LOT):** 53 29 2A

**PROPERTY OWNER INFORMATION**

**NAME:** The DTS Trust, Gael T. Daly, Trustee **PHONE:** N/A **ALT. PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** c/o Tim Daly, Suite 12, 251 Harvard Street, Brookline, MA 02446

**E-MAIL ADDRESS:** N/A

**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.

*Preferred Realty Corporation, authorized agent for D.T.S. Trust*  
 X By: Tim Daly Tim Daly Date: August 12, 2021  
 Tim Daly, ~~owner~~ duly authorized

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**

**APPLICANT:** KidLink Therapy P.C., d/b/a Artistry Martial Arts **PHONE:** N/A **ALT. PHONE:** N/A

**MAILING ADDRESS:** 4 Militia Dr., Suite 18, Lexington, MA 02421 **E-MAIL ADDRESS:** N/A

**AGENT:** Stephen J. Buchbinder, Esquire **PHONE:** 617-965-3500 **ALT. PHONE:** 617-538-7392 (c)

**MAILING ADDRESS:** Schlesinger and Buchbinder, LLP, 1200 Walnut Street, Newton, MA 02461-1267

**E-MAIL ADDRESS:** sjbuchbinder@sab-law.com

X Stephen J. Buchbinder Stephen J. Buchbinder August 11, 2021  
 Stephen J. Buchbinder, its attorney duly authorized (Date)  
 (Application/Agent Signature)

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 regard to the application.

-----OFFICE USE ONLY BELOW THIS LINE-----

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

<input type="checkbox"/>	Zoning Review Application	<input type="checkbox"/>	Comprehensive Permit
<input type="checkbox"/>	Administrative Site Plan Review	<input type="checkbox"/>	Variance Application
<input type="checkbox"/>	Sign Permit	<input type="checkbox"/>	Historic Preservation Review
<input type="checkbox"/>	Special Permit/Site Plan Approval	<input type="checkbox"/>	Conservation Commission Review
<input type="checkbox"/>	Fence Appeal	<input type="checkbox"/>	Other, describe

Comments: \_\_\_\_\_

PERMIT INTAKE INITIALS  
AND DATE STAMP