



Town of Saugus

TOWN HALL
SAUGUS, MASSACHUSETTS 01906

BOARD OF SELECTMEN
(781) 231-4124
FAX (781) 231-4109

Dear Applicant,

Enclosed please find information concerning your request for a Special Permit. Before a Public Hearing can be scheduled, the following documents are required:

- * Completed Special Permit application signed by the PROPERTY OWNER;
- * Completed CORI form for the background check;
- * Completed abutters list request form;
- * A letter explaining the proposed business, your experience, if any, hours of operation and number of employees;
- * A drawing / layout of the proposed business 8 ½" X 11"
- * A certified parking plan 8 ½" X 11"
- * \$100. application fee made payable to the Town of Saugus

Please check with the Zoning Officer that your location is zoned properly for your proposed business and any parking requirements that may be needed.

Once all the above information has been received, I will advertise your public hearing in the local newspaper. They will bill you directly. All abutters will be notified by this office.

If you have any questions, you may contact this office at the number listed above.

Wendy L. Reed, Clerk



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BOARD OF SELECTMEN

APPLICATION FOR SPECIAL PERMIT

I, (we) being owner (s) of land at _____
known as Plan No. _____, on file in the Assessor's Office,
respectfully request the Board of Selectmen to hear and decide on
the request for a Special Permit under Chapter 40A, Section 9; and
under Section _____ of the Saugus Zoning By-Laws, as follows:

Name

Address

Telephone

\$100. filing fee required

Payment received _____



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CORI REQUEST FORM

Saugus Board of Selectmen has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant/employee for _____, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Applicant/Employee Signature

LAST NAME

FIRST NAME

MIDDLE NAME

MAIDEN NAME OR ALIAS (IF APPLICABLE)

PLACE OF BIRTH

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER: _____ - _____ - _____
(Requested but not required)

MOTHER'S MAIDEN NAME: _____

CURRENT AND FORMER ADDRESSES: _____

SEX: _____ HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____

STATE DRIVER'S LICENSE NUMBER: _____

*THE INFORMATION WAS VERIFIED WITH THE FOLLOWING FORM OF
GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

COMMUNITY NEWSPAPER COMPANY
SAUGUS ADVERTISER
254 SECOND AVENUE
NEEDHAM, MA 02494

TO: SAUGUS ADVERTISER
LEGAL ADVERTISING DEPARTMENT

I hereby authorize Community Newspaper Company to bill me directly for the legal notice published on _____ in the SAUGUS ADVERTISER newspaper

(date/dates)

for a Selectmen notice.

Printed Name: _____

Signed: _____

Address: _____

Billing Phone Number: _____ () _____

Daytime No. _____ () _____

Date of Hearing: _____

Time of Hearing: _____

Advertising Representative: **Bianka Nebel**
Phone: 781-453-6438 Fax: 781-453-6650