



TOWN OF BOURNE Planning Board



APPLICATION FOR SPECIAL PERMIT UNDER ZONING BYLAW (PLEASE PRINT OR TYPE THIS FORM)

Permit # 05-2023
Fee: Ø (waived)
Date: _____

To: Bourne Planning Board
Buzzards Bay, MA 02532

1. Name of Applicant: Upper Cape Cod Technical School Phone: _____

Mailing Address: 220 Sandwich Rd

2. Owner (if different): _____ Phone: 508-759-7711

3. The premises affected is at (address): 220 Sandwich Rd

ZONING DISTRICT: R-40 MAP: 25 PARCEL: 1 LOT: _____

4. Dimensions of lot: 76+ acres 1010' frontage

5. Application for Special Permit as authorized by Section(s) of the Bourne Zoning Bylaw. Refer to Section(s) by Number(s): 3570 Natural Cover Removal

6. Describe specifically the nature of your request: To add an athletic field to avoid a Federal Title IX non compliance.

7. Generally state or attach information necessary so that compliance with the appropriate section of the Bourne Zoning Bylaw (as listed for #5) may be determined: _____

8. Generally state or attach information necessary so that compliance with Section 1330 of the Bourne Zoning Bylaws may be determined: _____

9. Attachments (8 copies): Plot Plan: ✓ Certified list of Abutters (2 copies) : _____
Ground floor and/or architectural elevations: _____ Other: _____

10. Signature of Applicant or Authorized Representative: [Signature] Date: 10/12/23

RECEIVED
OCT 16 AM 10:55
TOWN CLERK BOURNE