



Case No.: \_\_\_\_\_

**Town of Ashland  
Planning Department**  
101 Main St.  
Ashland, MA 01721  
508.881.0101

ashlandmass.com/316/Zoning-Board-of-Appeals

## Application to Zoning Board of Appeals

Note: Application must be complete, with a certified plot plan and all application fees to be accepted.

### 1. Property Information:

Street Address: 135 High Street  
Zoning District: RA Overlay District: \_\_\_\_\_  
Assessor's Map: 18 Lot: 0 Deed Book: 63069 Page: 0094  
Current Property Owner\*: Philip & Jessica Zachos

### 2. Permit/Approval Sought:

Special Permit (Section 9.3) \_\_\_ Amendment to Special Permit (Section 9.3) \_\_\_ Variance (Section 9.2.2.2)  
\_\_\_ Appeal of Building Inspector Decision (M.G.L. Ch. 40A) \_\_\_ Comprehensive Permit (M.G.L. Ch. 40B)  
Use Type: Residential:  Commercial: \_\_\_ Industrial: \_\_\_

### 3. Applicant Information: Owner: Tenant: \_\_\_ Prospective Purchaser/Tenant: \_\_\_

Name: Philip Zachos  
Address: 135 High Street, Ashland, MA 01721  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Agent's Name: Ivan Hernandez  
Agent's Address: 111 Baker Street, West Foxbury, MA 02132  
Agent's Phone: 617-839-7829 Agent's Email: ivan@ishdesignservices.com

### 4. Additional Information:

Are all real estate taxes and other assessments to the Town current?:   
Is the parcel on a scenic road?: Yes  
Is this an amendment to a previously issued Special Permit? (attach approved permit): NO  
Date structure was built? (Buildings built before 1940 may need review by Historical Commission.): \_\_\_\_\_  
Is the property within 100 ft. of a wetland, within 200 ft. of a stream, or in a floodplain?: NO

**5. Description of the Relief Sought:** (Attach Letter of Denial of Building Permit.)

Relief for construction of an accessory family dwelling unit.

What specific zoning bylaws is this application associated with?: Ashland zoning bylaws, Section 3.1.4, Table - G\* Family dwelling Unit permitted with special permit approval from zoning board.

**6. Justification for why the application should be approved:** \* And Section 7.6  
The homeowner would like to have his elderly mother and stepfather move in with him because they are both starting to encounter health issues. The stepfather suffers from M.S. and it would be very helpful living with family rather than remotely for when emergency assistance is needed.

**7. Existing use and condition of the property and surrounding neighborhood:** (Please list all relevant non-conformities.)

Single family residence. Condition of property is good.


By signing below you assert this application is complete and accurate to the best of your knowledge:

**Signatures:**

Applicant/Agent:  Applicant's Name: Ivan Hernandez

ivanerichdesignservices.com  
Email Address: zachosph@comcast.net Phone Number: 617-839-7829 - Ivan

Agent's Relationship to Applicant: Architectural Services Firm: I. S. Hernandez Design Ser.

Owner:  Owner's Name: Philip Zachos

\*Note: If the applicant is not the owner, the owner **MUST** sign above or submit a letter of permission with the application.