



**CITY OF METHUEN, MASSACHUSETTS
COMMUNITY DEVELOPMENT BOARD**

**APPLICATION FOR SPECIAL PERMIT UNDER THE
REQUIREMENTS OF THE ZONING ORDINANCE**

This form must be typewritten

APPLICANT:

DAHZ FITNESS LLC

ADDRESS:

17 TWELVE ST LOWELL, MA 01850

1. Application is hereby made for a Special Permit under Section(s) _____

Paragraph(s) _____ of the Zoning By-Laws.

2. Assessor Parcel ID of all affected parcels, location and general description of property bounded and described as follows:

100 CHASE STREET, METHUEN, MA

b. Premises affected are in Zoning District

IL

3. Ownership:

a. Name and address of owner (if joint ownership, give all names):

INDIVSPAD, LLC

46 STAFFORD ST LAWRENCE, MA 01841

b. If applicant is not owner, check his/her interest in the premises:

	Prospective Purchaser Name	Address
	Lessee Name <u>DAHZ FITNESS</u>	Address <u>17 TWELVE ST LOWELL MA 01850</u>
	Other Explain:	

4. General description of structure(s) and outline specifications *

Site:	<u>INDUS PAD</u>
Site Amenities:	<u>INDUSTRIAL MANUFACTURING + WAREHOUSING</u>
Exterior Building Construction:	<u>TYPE 28</u>
Interior Building Construction:	

Refer to plans numbered: _____ submitted with this application.

5. Has there been a previous petition, under zoning, on these premises: _____.

If so, when: _____.

6. Deed recorded in Registry of Deeds in: _____ Book: _____, Page: _____ or

Land Court Certificate Number: _____, Book: _____ Page _____.

7. How does the special permit meet the general requirements of Section XI-B (2) of the Zoning Ordinance? (answer all sub-section and paragraphs in a separate report).

<u>SOCIAL, ECONOMIC + COMMUNITY NEEDS ARE IMPROVED BY GRANTING SP</u>
<u>TRAFFIC FLOW + SAFETY, INCLUDING PARKING ARE NOT ADVERSELY AFFECTED.</u>
<u>UTILITIES + PUBLIC SERVICES ARE NOT AFFECTED. NO IMPACT TO</u>
<u>NATURAL ENVIRONMENT OCCURS. NEIGHBOURHOOD CHARACTER + SOCIAL</u>
<u>STRUCTURES ARE NOT IMPACTED. POTENTIAL ECONOMIC IMPACT IS</u>
<u>ENHANCED</u>

* (Have additional sheets if necessary)

8. How does the special permit meet the general requirements of Section XI-D? (answer all paragraphs pertaining to requirements in a separate report).

I agree to pay for advertising in newspaper and incidental expenses:

APPLICANT(S) SIGNATURE:

Novel Belliveau Consolay _____

Marcos Belliard González _____
Print Name Print Name

AUTHORIZATION
(to be signed by the owner of the subject property)

I am the record owner of the property for which this application is being filed with Community Development Board of the City of Methuen, and as such, I have been advised of and I am familiar with the work proposed for my property. My deed of ownership is recorded at the Essex North Registry of Deeds in book 15322

Page 185, and the street address is 46 STAFFORD ST LAWRENCE MA

I hereby authorized and designate MARCOS BELLARD GONZALEZ, of
(name)

17 12TH STREET LOWER, MA 01850
(address)

to file this application on my behalf.

Name of Property Owner (please print) INNOVSPAD, LLC JITENDER MAKKAR

Title: MANAGER

Signature: 

Date: 04/20/2022

Address: 46 STAFFORD STREET LAWRENCE, MA 01841

Telephone: 978-682-4000

Tenant	# of Spaces
3 Decor	5
3 Lion Logistics	3
All Pro Electric	5
Analogic Corporation	10
ChemCo	12
Compass Packaging	10
Expedite	4
Fulfillment America	15
IndusPAD	15
MiBox	0
Private	5
Sterling	3
Valey Freight	5
Xologic	20
	112



