

MARSHFIELD ZONING BOARD OF APPEALS

CASE #
NAME:
PROPERTY:
PARCEL ID NO:
TELEPHONE:
EMAIL:

FORM 2 - APPLICATION FOR HEARING

1. Nature of action or relief requested:

- ☐ APPEAL by a person aggrieved
- ☐ Application for a **SPECIAL PERMIT**
- ☐ Petition for a **VARIANCE** from the terms of the Marshfield Municipal Code
- ☒ Application for **SITE PLAN APPROVAL**

2. Name and address of each appellant, applicant or petitioner:

Name: Maitlin, LLC c/o Kevin Sealund and Matthew Dacey

Mailing Address: 794 Washington St. Pembroke, MA 02359

Name: _____

Mailing Address: _____

3. The undersigned hereby ☐ appeals, ☒ makes application, or ☐ petitions the

Board of Appeals as follows: *{USE THIS SPACE TO DESCRIBE THE PROJECT USING
DIMENSIONAL INFORMATION}*

Modify the previously approved Comprehensive Permit by constructing a 56-unit multi-family and 1 office development with associated parking, utilities, and landscaping. Previous approval allowed for a maximum excavation of 355,000 cy, this modification reduces the excavation to 150,000 cy.

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4. The undersigned is ☒ the owner of or ☐ holder of a written option to purchase the land or building(s) situated at Bridle Crossing off Ferry Street located 250 feet from the intersection of Waltham Ave (street or streets)

5. The record title to the land which is the subject of this case stands in the name(s) of Peter Armstrong whose address is 44 Allerton St. Marshfield, MA 02050 by a deed duly recorded in the Plymouth County Registry of Deeds in Book 31665, Page 346 or in Plymouth Land Court Certificate # .

6. The land or building(s) which is/are the subject of this case is/are situated in a Zoning District classified under the Marshfield Municipal Code as R-1 zone.

7. State briefly what is on the premises:

The site currently is a gravel pit with wooded and grassed areas

8. The name and mailing address of each attorney, agent or other representative of the undersigned is as follows:

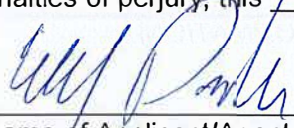
Name: Grady Consulting, LLC

Mailing Address: 71 Evergreen St., Ste 1, Kingston, MA 02364

Name: Sullivan & Comerford, PC

Mailing Address: 80 Washington St. Building B Ste 7, Norwell, MA 02061

Signed as a statement of fact under the pains and penalties of perjury, this 15th day of November, 2023.


Name of Applicant/Agent

I certify that this form and the attached submission are complete in accordance with Article III, Section 4.1 of the Rules of the Board.

Date: _____

Representative of the Board