

CITY CLERKS OFFICE
NEW BEDFORD, MA



PLANNING BOARD

2017 NOV 14 P 1:21

CITY OF NEW BEDFORD
SUBMIT TO:
Planning Department
133 William Street
Room 303
New Bedford, MA 0274

CITY OF NEW BEDFORD
JONATHAN F. MITCHELL, MAYOR

SITE PLAN REVIEW APPLICATION

The undersigned, being the Applicant, seeks Site Plan Approval for property depicted on a plan entitled: Modified Aerial View of Site by: Google Earth dated: October 2017

1. Application Information

Street Address: 269-271 Union Street
Assessor's Map(s): 52 Lot(s) 273
Registry of Deeds Book: 12174 Page: 111
Zoning District: MUB

Applicant's Name (printed): SouthCoast Federal Credit Union
Mailing Address: POP Box 40429, 101 Page St New Bedford MA 02744
(Street) (City) (State) (Zip)
Contact Information: 508-525-4310 or 508-965-3726 contact: Duarte D Silva (President/CEO)
Telephone Number Email Address dsilva@southcoastcu.org
Applicant's Relationship to Property: Owner Contract Vendee Other

List all submitted materials (include document titles & volume numbers where applicable) below:

Certified Site Plan
Certified Abutters List

By signing below, I/we acknowledge that all information presented herein is true to the best of my/our knowledge. I/we further understand that any false information intentionally provided or omitted is grounds for the revocation of the approval (s). I/we also give Planning Department staff and Planning Board Members the right to access the premises (both interior and exterior) at reasonable times and upon reasonable notice for the purpose of taking photographs and conducting other visual inspections.

November 13, 2017
Date

Duarte D Silva, PRESIDENT / CEO
Signature of Applicant

2. Review Applicability (Check All That Apply to Your Proposal)

Category	Construction	Scale
<input type="checkbox"/> Residential	<input type="checkbox"/> New Construction	<input type="checkbox"/> < 2,000 gross sq feet
<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Expansion of Existing	<input type="checkbox"/> > 2,000 gross sq feet
<input type="checkbox"/> Industrial	<input type="checkbox"/> Conversion	<input type="checkbox"/> 3 or more new residential units
<input type="checkbox"/> Mixed (Check all categories that apply)	<input checked="" type="checkbox"/> Rehabilitation	<input type="checkbox"/> 1 or more new units in existing res. multi-unit
		<input checked="" type="checkbox"/> Drive Thru Proposed
		<input type="checkbox"/> Ground Sign Proposed
		<input type="checkbox"/> Residential Driveway With > 1 curbcut

3. Zoning Classifications

Present Use of Premises: Financial institution - Credit Union

Proposed Use of Premises: Financial institution - Credit Union

Zoning Relief Previously Granted (Variances, Special Permits, with Dates Granted):

4. Briefly Describe the Proposed Project:

Re-purpose of existing bank branch building

bank branch building - no change of use (to be main office of credit union)

5. Please complete the following:

	Existing	Allowed/Required	Proposed
Lot Area (sq ft)	31,286	8,000	31,286
Lot Width (ft)	202	0	202
Number of Dwelling Units	0	1	0
Total Gross Floor Area (sq ft)	10,644	10,644	10,644
Residential Gross Floor Area (sq ft)	0	0	0
Non-Residential Gross Floor Area (sq ft)	10,644	10,644	10,644
Building Height (ft)	20	0	20
Front Setback (ft)	0	0	0
Side Setback (ft)	70	10	70
Side Setback (ft)	4	10	4

Rear Setback (ft)	70	25	70
Lot Coverage by Buildings (% of Lot Area)	17.52%	40	17.52%
Permeable Open Space (% of Lot Area)	80%	35	80%
Green Space (% of Lot Area)	2.48%	35	2.48%
Off-Street Parking Spaces	43	15	43
Long-Term Bicycle Parking Spaces	0	0	0
Short-Term Bicycle Parking Spaces	0	0	0
Loading Bays	0	0	0

6. Please complete the following:

	Existing *	Proposed
a) Number of customers per day:	<u>10</u>	<u>60</u>
b) Number of employees:	<u>12</u>	<u>24</u>
c) Hours of operation:	<u>40</u>	<u>57/wk</u>
d) Days of operation:	<u>5</u>	<u>6</u>
e) Hours of deliveries:	<u>0</u>	<u>.5</u>
f) Frequency of deliveries: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____		

7. Planning Board Special Permits:

The applicant is also requesting a Special Permit from the Planning Board.
Specify the requested Special Permit(s) below, and set forth within attached Development Impact Statement how the request meets approval criteria listed in §5320 of the zoning code.
Not Applicable

8. ZBA Variances and Special Permits: Not Applicable

NOTICE: Checking below does not constitute application for a special permit or a variance. The applicant must also file the proper application form and fee with the Zoning Board of Appeals.

The applicant is also requesting a special permit from the ZBA: Not Applicable
Specify zoning code section & title

The applicant is also requesting a variance from the ZBA:
Specify zoning code section & title

_____ Not Applicable

* Current Numbers are reflective of 2nd floor business only (Tomilson & O'Neil Insurance). Level 1 is currently vacant with the move out of the building by First Citizens Federal Credit Union.

9. OWNERSHIP VERIFICATION

This section is to be completed & signed by the property owner:

I hereby authorize the following Applicant: SouthCoast Federal Credit Union

at the following address: 101 Page St., New Bedford, MA

to apply for: Site Plan Review

on premises located at: 269-271 Union St., New Bedford, MA

in current ownership since: August 2017

whose address is: 101 Page St., New Bedford, MA

for which the record title stands in the name of: SouthCoast Federal Credit Union

whose address is: 101 Page St., New Bedford, MA

by a deed duly recorded in the:

Registry of Deeds of County: Bristol Book: 12174 Page: 111

OR Registry District of the Land Court, Certificate No.: _____ Book: _____ Page: _____

I/we acknowledge that all information presented herein is true to the best of my/our knowledge. I/we further understand that any false information intentionally provided or omitted is grounds for the revocation of the approval(s). I/we also give Planning Department staff and Planning Board Members the right to access the premises (both interior and exterior) at reasonable times and upon reasonable notice for the purpose of taking photographs and conducting other visual inspections.

November 13, 2017

Richard D. Ains, PRESIDENT/CEO

Date

Signature of Land Owner (If authorized Trustee, Officer or Agent, so identify)

269 – 271 Union Street Project Narrative

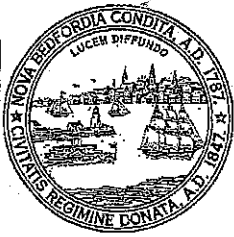
Subject is an existing property formerly occupied and operated by First Citizen's Federal Credit Union and to be occupied and operated as SouthCoast Federal Credit and the existing tenant, Tomlinson & O'Neil Insurance. The Planning Board has previously approved the existing site, most recently in 2008 when ownership of the building was transferred from First Citizen's Federal Credit Union to T & O Realty, Inc.

The building has now undergone a new transfer of ownership from T & O Realty, Inc. to SouthCoast Federal Credit Union. SouthCoast Federal Credit Union has operated in the City of New Bedford for 41 years as the SouthCoast Health's employee credit union. The branches of the credit union have all been located with the associated hospitals and business entities operated by the Hospital group.

There are no proposed changes to the site. All signage, parking availability and green space will be maintained as is. There currently exist four drive-up windows. These windows are to remain in operation as is. All new signage will replace existing signage like for like. No additional signage footage is requested and no new excavation will be required.

This request does not include any other work on the premises. No other changes to the property are requested under this review.

Thank you for your consideration of this request.



City of New Bedford
SITE PLAN REVIEW APPLICATION

CASE #: _____

City Clerk Date Stamp

Planning Division Date Stamp

SUBMITTAL CHECKLIST

Have you included...	<i>Please remove the Site Plan Check list when submitting your sixteen (16) completed application packet copies.</i>	Received by Planning Staff...
Yes No		Yes No
<u>Case Submittal Documents – An Overview</u>		
<input checked="" type="checkbox"/> <input type="checkbox"/>	1. <u>Building Permit Rejection Packet</u>	<input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> <input type="checkbox"/>	2. A <u>Completed and Signed</u> application	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	3. <u>Concurrent Application</u> , if applicable	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	4. <u>Plan Set</u>	<input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> <input type="checkbox"/>	5. <u>Project Narrative</u>	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	6. <u>Cost estimate and construction schedule</u>	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	7. <u>Certified Abutters List</u>	<input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> <input type="checkbox"/>	8. <u>Deed</u> of Ownership, for all involved parcels	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	9. Letter of Authorization, from owner <u>if</u> applicant is not the owner	<input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> <input type="checkbox"/>	10. Waiver Request(s), <u>if</u> petitioned	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	11. <u>Development Impact Statement</u> , completed as per Sec. 5350 and 5455	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	12. <u>Drainage Calculations</u> by a <u>registered professional engineer</u> , with applicable wetland delineations and, if applicable, area showing contiguous uplands	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	13. Traffic Impact & Access Study, <u>if</u> required by the Planning Board	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	14. <u>Stormwater Management Report</u>	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	15. Certification that the proposal is in compliance with the Americans with Disabilities Act and the MA Architectural Access Board	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	16. Electronic PDF and AutoCAD Files	<input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> <input type="checkbox"/>	17. <u>Photos</u> Depicting Existing Conditions	<input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> <input type="checkbox"/>	18. <u>Filing Fee</u> in check form made payable to the City of New Bedford	<input type="checkbox"/> <input type="checkbox"/>

Official Use Only:

Review of submittal compliance performed by _____ of the city's Division of Planning.

Staff review found the application packet to be complete incomplete on this date: _____.