

Town of Franklin

355 East Central Street Franklin, Massachusetts 02038-1352



Phone: (508) 520-4907 www.franklinma.gov

DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT

MEMORANDUM

DATE: October 30, 2023

TO: Franklin Planning Board

FROM: Department of Planning and Community Development

RE: 81-P ANR – Beaver St

General

1. The applicant has resubmitted a Form A application for 81-P Plan Review to accompany the plan of land for Beaver Street Transfer Station dated August 24, 2023 and submitted to DPCD on October 19, 2023.

2. The Town of Franklin is proposing to combine Parcel A with it's existing Land.

ANR Summary

• Applicants meets all requirements for an 81-P Approval not required.

PLANNING BOARD FRANKLIN, MASSACHUSETTS

FORM A

TOWN OF FRANKLIN

APPLICATION FOR ENDORSEMENT OF PLAN BELIEVED NOT TO REQUIRE APPROVAL (81-p)

10 Mis	X 27	
	P 2: 54	, 20
To the Plannin	ng Found f the Town of Franklin, Mass	achusetts:
within the mea	aning of the Subdivision Control Law, for	on of land in the Town of Franklin does not constitute a subdivision or the reason outlined below, herewith submits said plan for a pproval under the Subdivision Control Law is not required.
1. Name Addr Phon	e of Applicant: Town of Faress of Applicant: 355 EAST Come No.: Email:	ANKLIN LENTRAL ST
2. Name Addr Phon	e of Owner (if not the Applicant): Conress of Owner: Boston, MASS ne No.: Email:	MM. OF MASSACHUSETTS, DEPT OF RECREATION & CONSERVATION
3. Name	e of Engineer: GUERNIERE & HA	LNON, INC
4. Dee	ed of Property recorded in 1935	with Norfolk Registry, Book 2°80Page 439
5. Loca	ation and Description of Property: <u> </u>	FAVER ST TRANSFER STATION
6. Asse	essor's Map & Lot: <u>MAP 288</u> Lo	T 008
	sons approval is not required (check as a Every lot shown has the area and fr Subdivision Regulations	ontage required by the Zoning By-Law on a way as defined by the
ŀ	b) a public way or way which the Town namely	n Clerk certifies is maintained and used as a public way,, or
C		pproved and endorsed in accordance with the subdivision control law,, and subject to the; or
	following conditions	; or
Ċ	effective in the Town of Franklin ha	12, 1954, the date when the subdivision control law became ving, in the opinion of the Planning Board, sufficient width, suitable
	e) Other:	
Signature of	Applicant	Signature Owner
TOWN OF	FRANKUN COM	TOWNERUTH OF MASSACHUSETTS
		Print Name of Owner

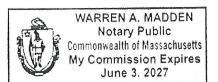
COMMONWEALTH OF MASSACHUSETTS acting by and through the Commissioner of its Division of Capital Asset Management and Maintenance

By: Paul M. Crowley, Deputy Commissioner

THE COMMONWEALTH OF MASSACHUSETTS

Suffolk, ss.

On this _______ day of _________, 2023 , before me, the undersigned notary public, personally appeared Paul M. Crowley, proved to me through satisfactory evidence of identification, who was personally known to me, to be the person whose name is signed on the preceding document, and acknowledged to me that she signed it voluntarily, in her capacity as Commissioner of the Division of Capital Asset Management and Maintenance, for its stated purpose.



Notary Public Warren A. Madden

My Commission Expires Some 3, 2027

CERTIFICATE OF OWNERSHIP

I the undersigned Applicant, do hereby certify to the Town of Franklin, through its Planning

Board, that all parties of interest to the below-listed plan are identified in Section B: below,			
SECTION A:			
Type of Plan (circle one) (ANR 81-P;) Preliminary Subdivision			
Definitive Subdivision.; Site Plan; Special Permit			
Title of Plan: PLANOF LAND BEAVER ST TRANSFER STATION			
Date of Plan: 8/24/2023 Assessor's Information: M 288 L 008			
Prepared by: GUERRIERE & HALNON INC.			
Applicant Name & Address: Town OF Frankin			
SECTION B:			
Name of Record Owner(s): COMMON WEALTH OF MASSACHUSETTS			
Address of Record Owner(s): BOSTON, MA			
**Attach Property Deed matching the owner name's listed above.			
*If in the name of a Trust, Corporation or Partnership, list the names and addresses of all Trustee(s), Corporate Officer(s) or Partner(s):			
*If in the name of a Trust or Corporation, list the Beneficiary(ies) of the Trust or the Shareholder(s) of the Corporation:			
*If in the name of a Trust or Corporation, list the date, county, book and page of recording of the Trust Instrument, or the date and State of incorporation:			

Executed as a sealed instrument this Signature of Applicant Signature of Owner	day of October 20 23 Town of Frankling Print name of Applicant Commonwealth of Massachusetts Print name of Owner			
COMMONWEALTH OF MASSACHUSETTS				
norfolk ss.	20 <u>23</u>			
On this 19 day of October 2023, before me, the undersigned notary public, personally appeared Lenge Hellen (name of owner), proved to me through satisfactory evidence of identification, which were rescuely known be the person whose name is signed on the preceding document in my presence.				
DYAN FITZGERALD NOTARY PUBLIC Commonwealth of Massachusetts My Commission Expires April 10, 2026	(Official signature and seal of notary) Notary Public: My Commission Expires (2)			

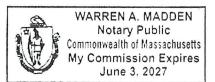
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