

TOWN OF WINCHESTER  
BOARD OF APPEALS  
71 Mount Vernon Street  
Winchester, Massachusetts 01890  
(781) 721-7115

FORM 2, BOARD OF APPEALS APPLICATION FOR HEARING

*(Use this form for all applications for special permits or site plan approvals, appeals or petitions for variances, and appeals to the Board of Appeals.)*

Date of application \_\_\_5/20/22

Property Address \_\_\_26 Johnson Road\_\_\_ Zoning District \_\_\_RDA\_\_\_

Applicant(s)

1. Name \_\_\_Mrs. Annemarie Colt\_\_\_  
Address \_\_\_26 Johnson Road, Winchester Ma\_\_\_  
Email address \_\_\_annemariemcolt@comcast.net\_\_\_  
Telephone \_\_\_781-507-4401\_\_\_  
Relationship to the property \_\_\_owner\_\_\_
2. Name \_\_\_Mr. Robert Colt\_\_\_  
Address \_\_\_26 Johnson Road, Winchester Ma\_\_\_  
Email address \_\_\_annemariemcolt@comcast.net\_\_\_  
Telephone \_\_\_\_\_  
Relationship to the property \_\_\_owner\_\_\_
3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Email address \_\_\_\_\_  
Telephone \_\_\_\_\_  
Relationship to the property \_\_\_\_\_

If the applicants do not include the record owner of the property, attach a document signed by the record owner authorizing the applicant(s) to pursue this application.

Title Reference:

(Unregistered land) Middlesex County Registry of Deeds, Book 37101 Page 328

(Registered land) Land Court Certificate of Title No. \_\_\_\_\_ Book \_\_\_\_\_ Page \_\_\_\_\_

Date of Recording or Registration \_\_\_\_\_

Summary of the subject matter of this application: The applicant requests a Special Permit under Section 3.5.5, 4.11, 9.3.3 and 9.4 of the Winchester Zoning By-Law in order to extend a non-conforming single family residence.

Other party(ies) in interest.

If the record owner of the property is not the sole real party in interest, identify all other real parties in interest:

1. Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Telephone \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Telephone \_\_\_\_\_

Include the appropriate Supporting Form (2A through 2J) and all required attachments.

Attorney, agent, or other representative(s) acting for the applicant:

1. Name Fulton L. Harley, flh Architects

Address 15 High Street, Winchester, MA

Email address flharley@flharchitects.com

Telephone 617-803-4919

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Telephone \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Telephone \_\_\_\_\_

The Board may request written evidence of a representative's authority.

The signatures below apply to this Form 2, to Supporting Forms (2A through 2J), and to attachments, all of which are statements of fact to which the signatures apply under the pains and penalties of perjury.

1. Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name Mrs. Annemarie Colt

2. Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name Mr. Robert Colt

3. Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_