



**City of Everett**  
**Department of Planning and Development**  
484 Broadway, Room 25  
Everett, Massachusetts 02149  
(P) 617-394-2334 (F) 617-394-5002

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## **Application For Inclusionary Zoning**

Pursuant to Section 32 of the Zoning Ordinances

**This application is required for all projects containing ten (10) or more new housing units whether by new construction or by the alteration, expansion, reconstruction, or change of existing residential or nonresidential space**

**For City Clerk, Date Filed:** \_\_\_\_\_

**For Planning Board (include fee), Date Filed:** \_\_\_\_\_

**Must include an Advertisement Fee of \$500.00 (check payable to City of Everett)**

### **Property Information**

**Street Address:** \_\_\_\_\_

**Assessor's: Map #** \_\_\_\_\_ **Block #** \_\_\_\_\_ **Lot #** \_\_\_\_\_

**Middlesex County Registry of Deeds: Book#** \_\_\_\_\_ **Page#** \_\_\_\_\_

### **Applicant Information:**

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Telephone: (Work)** \_\_\_\_\_ **(Home)** \_\_\_\_\_

**E-mail** \_\_\_\_\_

### **Full Name of Owner(s) of Record (if different from Applicant):**

**Property Owner:** \_\_\_\_\_

**Address of Owner:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Project Information:**

Current Zoning of Property (include overlay districts):

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Current Use of Property:

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Existing Land Uses in the Surrounding Areas:

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Detailed Project Description (attach additional sheets if necessary):

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Does the proposed project contain ten (10) or more new housing units? \_\_\_\_\_ Yes \_\_\_\_\_ No

Project Type	Affordability Requirements (check applicable)
<b>10 or more units</b>	<input type="checkbox"/> 15% of total units at 80% AMI <input type="checkbox"/> 10% of total units at 60% AMI
<b>Site requires environmental remediation or is located within a FEMA Flood District (or both)</b>	<input type="checkbox"/> 10% of total units at 80% AMI <input type="checkbox"/> 7% of total units at 60% AMI

Projects containing ten (10) or more new housing units will require the inclusion of affordable housing units under Section 32 of the Everett Zoning Ordinance. It is the applicant's responsibility to ensure affordable housing units are certified by The Executive Office of Housing and Livable Communities (EOHLC). Local Initiative Program (LIP) Guidelines for Local Action Units (LAU) are part of the Comprehensive Permit Guidelines and can be found online at [Executive Office of Housing and Livable Communities | Mass.gov](#).

Please refer to the Everett Inclusionary Zoning Guide and LAU application for additional information.

\* - Planning board may, at its discretion

Does the proposed project seek a density bonus under Section 32(e)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please initial here to acknowledge the applicant has read and is familiar with the design standards established under Section 32(f): (Required): \_\_\_\_\_

**Site Characteristics:**

<u>Project Style</u>	<u>Total # of Units</u>	<u># of Units Proposed for LAU Certification</u>
Detached single-family house	_____	_____
Rowhouse/townhouse	_____	_____
Duplex	_____	_____
Multifamily house (3+ family)	_____	_____
Multifamily rental building	_____	_____
Other (specify)	_____	_____

**Unit Composition:**

Type of Unit:	# of Units	# of BRs	# of Baths	Gross Square Feet	Livable Square Feet	Proposed Sales Prices/Rents	Proposed Condo Fee
Condo Ownership							
Fee Simple Ownership							
Rental							
<b>Affordable Rate:</b>							
On-Site							
Off-Site							
<b>Market Rate:</b>							
<b>Total:</b>							

Signature of Applicant: \_\_\_\_\_

(date)

Signature of Owner: \_\_\_\_\_

(If different from applicant)

(date)

**Applicant's Representative/Agent:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

e-mail \_\_\_\_\_