Application Cover Sheet

Cape Cod Commission
3225 Main Street, PO Box 226
Barnstable, MA 02630
Tel: (508) 362-3828 • Fax: (508) 362-3136

For Commission Use Only

Date Received:
Fee ($):
Check No:
File No:

A Type of Application (check all that apply)

- ☐ Development of Regional Impact (DRI)
- ☐ DRI Scoping
- ☑ DRI Exemption
- ☐ Hardship Exemption
- ☐ Jurisdictional Determination
- ☐ Request for Joint MEPA/DRI Review
- ☐ Decision Extension
- ☐ Decision Modification

B Project Information

Project Name: Straightway and Hyannisport Water Treatment Facilities and Improvements Project

Total Site Acreage: 4.77 acres

Project/Property Location: 228 Straightway, 0 Old School House Rd., and 132 Smith Street, Barnstable, MA

Zoning: Residential B

Brief Project Description:

Include total square footage of proposed and existing development, gross floor area, number of lots existing or to be created, specific uses, description of existing conditions, as applicable (attach additional sheets if necessary).

See attached Project Narative

C Owner(s) of Record

List the following information for all involved parcels. Provide copies of each Deed and Purchase and Sale Agreement and/or evidence of leasehold interest, if applicable, for all involved parcels. Proof of ownership/legal rights for Applicant(s) to proceed with the proposed development must be documented prior to the Commission deeming any application complete. List the local, state, or federal agencies from which permits or other actions have been/will be filed (attach additional sheets if necessary).

Map/Parcel	Owner's Name	Lot & Plan		Land Court Certificate of Title #	Registry of Deeds Book/Page #
267/099	Town of Barnstable	Lot:	Certificate of Title:		Book: 19847, Page: 0223
267/190	Town of Barnstable	Lot:	Certificate of Title:		Book: 19847, Page: 0223
268/099	Town of Barnstable	Lot:	Certificate of Title:		Book: 19847, Page: 0223

There **ARE** / **ARE NOT** (circle one) court claims, pending or completed, involving this property (if yes, please attach relevant information).

Is there an existing CCC Decision for the Property? ☐ yes ☑ no (if so, recording information for decision, please attach relevant information).

D Certification

I hereby certify that all information provided on this application form and in the required attachments is true and accurate to the best of my knowledge. I agree to notify the Cape Cod Commission of any changes on the information provided in this application, in writing, as soon as is practicable. I understand failure to provide the required information and any fees may result in a procedural denial of my project.
NOTE: For wireless communication facilities, a licensed carrier should be either an applicant or a co-applicant.

APPLICANT

Applicant(s) Name: Town of Barnstable, Department of Public Works Tel: 508-790-6400 Fax: 508-790-6406

Address: 382 Falmouth Road

Signature: _____ Date: _____

CO-APPLICANT

Co-Applicant(s) Name: _____ Tel: _____ Fax: _____

Address: _____

Signature: _____ Date: _____

CONTACT

Contact: Kirsten Ryan Tel: 6174984778 Fax: NA

Address: One Beacon St, Boston, MA 02108

Signature: _____ Date: _____

PROPERTY OWNER

Property Owner: Town of Barnstable Tel: 508-862-4738 Fax: 508-862-4770

Address: 382 Falmouth Road

Signature: _____ Date: _____

BILLABLE ENTITY

Name: _____ Tel: _____ Fax: _____

Address: _____