TOWN OF HOLLISTON
ZONING BOARD OF APPEALS
TOWN HALL
HOLLISTON, MASSACHUSETTS 01746

APPLICATION FOR GRANT OF A SPECIAL PERMIT

Date Filed: June 23, 2021

Applicant's Name: JD Automotive Service LLC, dba Boudreau's Automotive

Applicant's Address: 441R Washington St., Holliston, MA 01746

Applicant's Phone Number: (508) 429-5656

Owner's Name: Steve Sardinha

Owner's Address: _____

The Owner hereby appoints Daniel or Cynthia Gonzalez to act as his/her/its agent for the purposes of submitting and processing this application for a special permit.

The Owner's title to the land that is the subject matter of this application is derived

under deed from , dated 8/23/2016

And recorded in Registry of Deeds, Book 67865, Page 226

Or Land Court Certificate of Title No. _____, registered in

District Book _____, Page _____

The land is shown in the Assessor's records as Lot 28 on Map 116, Block 2

And has an address of or is located at _____

in the Com zoning district.

Under the provisions of Section VI-D (2) to vary the terms of Section I-B and the following, the Applicant hereby petitions the Board of Appeals:

Nature and subject matter of Special Permit:
Dealer license to sell cars that customers would sell to us rather than pay for the required repairs.

Section of Zoning Bylaw that permits this use by grant of Special Permit:
III.E.1+4

Previous Zoning Information (To be completed by Inspector of Buildings):
This is currently a regular license with no permitting and would require a SP under section III.E.1+4 for repairs + sales
6/30/21

The Applicant presents the following evidence that supports the grant of the special Permit:

a. The use is in harmony with the general purpose and intent of the bylaw because:

b. The general or specific provisions of a grant of a special permit, as set forth in the zoning bylaw are satisfied because:

Will the proposed use include the storage or process of any hazardous substances?
Yes _____ (Please attach additional information.) No ____

Applicant's Signature: _____

Owner's Signature: _____

441 R WASHINGTON STREET, HOLLISTON, MA 01746
(508) 429-5656 | sales@boudreausauto.com

To Whom It May Concern:

We are an automotive repair facility and mainly do just that. Every so often we have customers who would rather sell us their vehicle than pay for repairs needed. We would like to sell those vehicles in good faith and so we are requesting our dealer's license to be able to do so.
Our standard hours of operation are Monday thru Friday, 7:30 am to 5:00 pm. We currently have five employees. One part-time clerk that mainly works remote and four that work full time. We have 16 parking spots and two will be utilized for our vehicles for sale if and when we have them available.

On average we have four appointment slots in the morning where customers will wait for their vehicle therefore utilizing one bay and the rest of the customers park behind our garage.

I appreciate your time and consideration.

Best,

Daniel and Cynthia Gonzalez

THE COMMONWEALTH OF MASSACHUSETTS

Town OF Holliston

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECOND HAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a ..class 2.. class license, to Buy, Sell, Exchange or Assemble second hand motor vehicles or parts thereof, in accordance with the provisions of Chapter 140 of the General Laws.

1. What is the name of the concern? ...J.D. Automotive Service, LLC.....

.....

Business address of concern. No. ..441 Washington St. (Rear).....St.,

.....Holliston, MA 01746.....City — Town.

2. Is the above concern an individual, co-partnership, an association or a corporation? ...LLC / co-partnership...

.....

3. If an individual, state full name, and residential address.

.....

.....

4. If a co-partnership, state full names and residential addresses of the persons composing it. 118 Prospect st

.....Daniel Gonzalez - ~~344 Hammond Blvd, Westhoro, MA 01581~~ Holliston,

.....Jeremy Mason - ~~10 E Concord St, Boston, MA 02118~~ 01746

.....811 Hammond St. Chestnut Hill, MA 02467.....

.....

.....

5. If an association or a corporation, state full names and residential addresses of the principal officers.

President .....

Secretary .....

Treasurer .....

6. Are you engaged principally in the business of buying, selling or exchanging motor vehicles? ..Yes....

If so, is your principal business the sale of new motor vehicles? ...No.....

Is your principal business the buying and selling of second hand motor vehicles? ..No.....

Is your principal business that of a motor vehicle junk dealer? ..Yes, in addition to repairs & service.....

7. Give a complete description of all the premises to be used for the purpose of carrying on the business.

Established Auto Repair and service shop at
441 Washington St. (Rear), Holliston, MA 01746

8. Are you a recognized agent of a motor vehicle manufacturer? NO (Yes or No)

If so, state name of manufacturer NA

9. Have you a signed contract as required by Section 58, Class 1? NA (Yes or No)

10. Have you ever applied for a license to deal in second hand motor vehicles or parts thereof? NO (Yes or No)

If so, in what city — town NA

Did you receive a license? NA (Yes or No) For what year? NA

11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or parts thereof ever been suspended or revoked? NO (Yes or No)

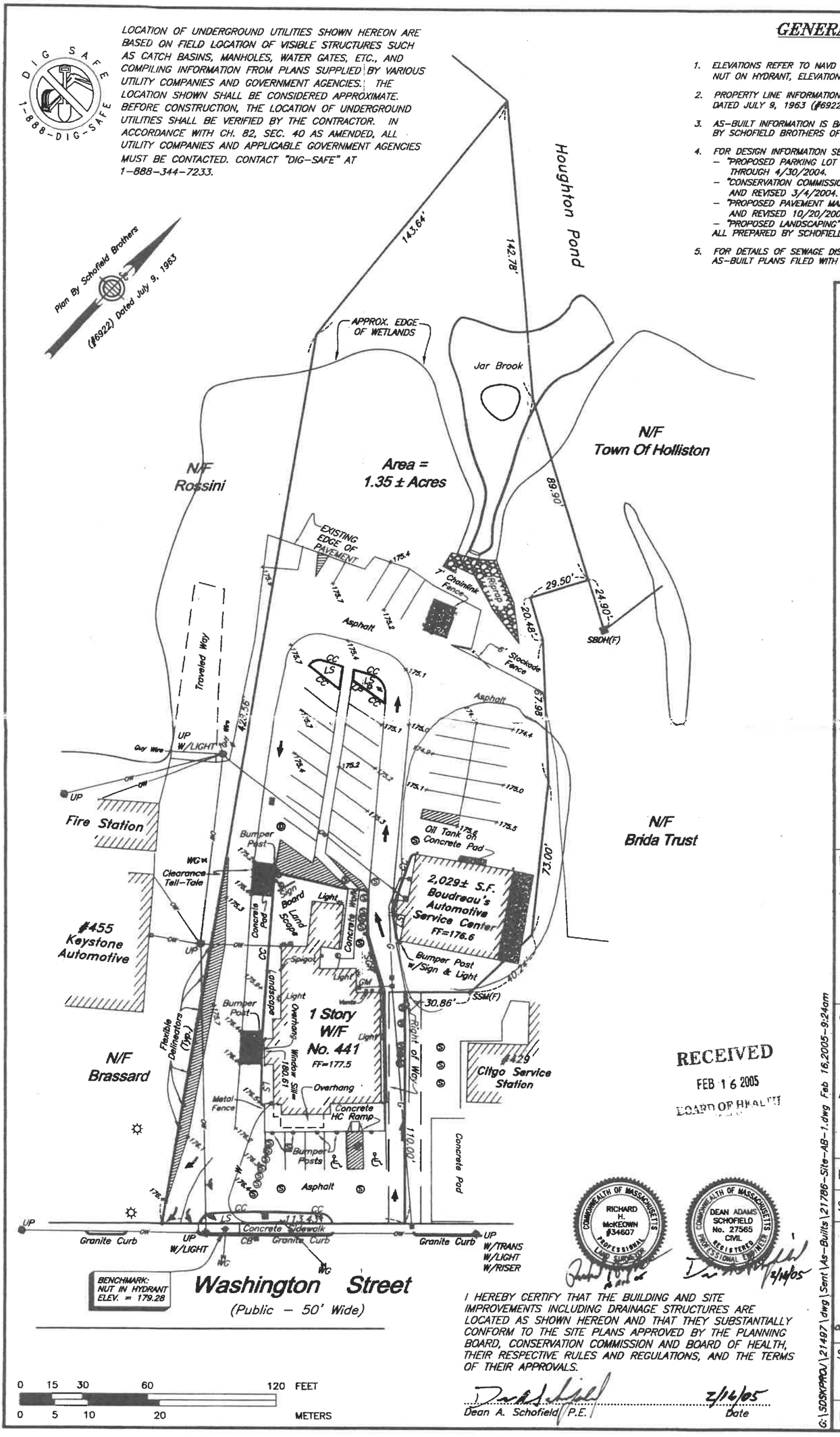
Sign your name in full. [signature]
(Duly authorized to represent the concern herein mentioned)

Residence. Boston, MA

IMPORTANT

EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE STATEMENTS HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSEQUENT REVOCATION OF YOUR LICENSE IF ISSUED.

NOTE: If the applicant has not held a license in the year prior to this application, he must file a duplicate of the application with the registrar. (See Sec. 59)



GENERAL NOTES

1. ELEVATIONS REFER TO NAVD 1988 DATUM. SEE BENCHMARK ON PLAN; NUT ON HYDRANT, ELEVATION = 179.28
2. PROPERTY LINE INFORMATION FROM PLAN BY SCHOFIELD BROTHERS DATED JULY 9, 1963 (#6922).
3. AS-BUILT INFORMATION IS BASED ON A FIELD SURVEY PERFORMED BY SCHOFIELD BROTHERS OF NEW ENGLAND, INC. ON JANUARY 5, 2005.
4. FOR DESIGN INFORMATION SEE PLANS ENTITLED:
   - "PROPOSED PARKING LOT LAYOUT" DATED 2/14/2003 WITH REVISIONS THROUGH 4/30/2004.
   - "CONSERVATION COMMISSION JURISDICTION PLAN" DATED 2/14/2003 AND REVISED 3/4/2004.
   - "PROPOSED PAVEMENT MARKING AND SIGNAGE" DATED 3/10/2004 AND REVISED 10/20/2004
   - "PROPOSED LANDSCAPING" DATED 11/3/2004.

   ALL PREPARED BY SCHOFIELD BROTHERS OF NEW ENGLAND, INC.
5. FOR DETAILS OF SEWAGE DISPOSAL AND STORMWATER TREATMENT SEE AS-BUILT PLANS FILED WITH THE HOLLISTON BOARD OF HEALTH.

LEGEND

SYMBOLS AND ABBREVIATIONS SHOWN ON THIS PLAN.

— G —	UNDERGROUND GAS LINE
— W —	UNDERGROUND WATER LINE
— OW —	OVERHEAD WIRES
UP	UTILITY POLE
CB	CATCH BASIN
DMH	DRAIN MANHOLE
SMH	SEWER MANHOLE
G	GAS GATE
GM	GAS METER
E	ELECTRICAL METER
E	ELECTRIC MANHOLE
WG	WATER GATE
	FIRE HYDRANT
LP	LIGHT POST
	FLOOD LIGHT
W/F	WOOD FRAME
	SIGN
CC	CONCRETE CURB
HC	HANDICAP
SGR	STEEL GUARD RAIL
FF	FINSHED FLOOR
LC	LANDSCAPE
139x7	SPOT GRADE
N/F	NOW OR FORMERLY
SBDH	STONE BOUND DRILL HOLE
SSM	STEEL SURVEY MARKER
(F)	FOUND

RECEIVED
FEB 16 2005
BOARD OF HEALTH

I HEREBY CERTIFY THAT THE BUILDING AND SITE IMPROVEMENTS INCLUDING DRAINAGE STRUCTURES ARE LOCATED AS SHOWN HEREON AND THAT THEY SUBSTANTIALLY CONFORM TO THE SITE PLANS APPROVED BY THE PLANNING BOARD, CONSERVATION COMMISSION AND BOARD OF HEALTH, THEIR RESPECTIVE RULES AND REGULATIONS, AND THE TERMS OF THEIR APPROVALS.

Dean A. Schofield, P.E. — 2/16/05 Date

APPLICANT:

HOLLISTON DONUTS, INC.
P.O. BOX 143
MENDON, MA 01756
(508) 473-7600

PLAN TITLE:

AS BUILT SITE PLAN
441 WASHINGTON STREET
HOLLISTON, MA

ASSESSOR'S INFO.:
MAP 11G, BLOCK 2, LOT 28

OWNER:

NORMAN BLOOMSTEIN
and
RONDA L. BLOOMSTEIN

ADDRESS:

128 ROLLING MEADOW DRIVE
HOLLISTON, MA 01746

DATE: February 16, 2005

SCALE: 1"=30'

SCHOFIELD BROTHERS OF NEW ENGLAND, INC.
ENGINEERING SURVEYING PLANNING
1071 WORCESTER ROAD
FRAMINGHAM, MA 01701
TELE: (508) 879-0030 FAX: (508)879-1797
E-mail: mail@schofieldbros.com

SHEET: AB-1

PROJ. No.: 21786

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