

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 11/21/2022

Property Address 7 Prince Ave, Winchester, MA Zoning District RDB

Applicant(s)

1. Name Ben McCoy

Address 7 Prince, Ave, Winchester, MA

Email address benmccoy1888@gmail.com

Telephone (508) 479-4509

Relationship to the property owner

2. Name Erin McCoy

Address 7 Prince Ave, Winchester, MA

Email address eemccoy14@gmail.com

Telephone (508) 479-4509

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 72698 Page 109

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

Date of Recording or Registration 5/31/2019

Summary of the subject matter of this application:

**We are requesting a special permit to allow the construction of a 3rd story and also to allow the upper floor addition (still within the existing building footprint) to be closer to the left side lot line than would be allowed in an as-of-right permitting process.**

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 Keith Hinzman  
Address 47 Kenberma Street, Hull, MA 02045  
Email address keith@kwhdesign.net  
Telephone (617) 913-4714
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 11/21/22

Printed name Ben McCoy

2. Signature  Date 11/21/22

Printed name Erin McCoy

3. Signature  Date 11/21/2022

Printed name Keith Hinzman