



**TOWN OF WELLESLEY
DESIGN REVIEW BOARD
APPLICATION FOR DESIGN REVIEW
RETAINING WALLS**

WELLESLEY DESIGN REVIEW BOARD

525 Washington Street • Wellesley, MA 02482
781-431-1019 ext. 2232 • Fax 781-237-6495

application submission date: _____

Part A.

1. Address of Project

2. Type of Project: By-Right Special Permit: Height Special Permit: Setback

Part B. I hereby certify that the information on this application is correct and understand that all applications are subject to conformance with the Town of Wellesley Zoning Bylaw and review by the Wellesley Design Review Board.

Name of Property Owner

Signature

Address..... Phone..... Email.....

Name of Engineer

Signature

Address..... Phone..... Email.....

Name of Contractor

Signature

Address..... Phone..... Email.....

Part C. Nine (9) sets of the following materials are required on file to make the application complete and before a review date is set.

1. Written description of the proposed change.
2. Color photographs of the existing site conditions.
3. A survey of the property indicating existing conditions, including existing grade.
4. Site Plan, drawing to legible Engineer’s Scale, which shows:
 - a. Existing and proposed structures;
 - b. Lot lines;
 - c. Setback(s) of retaining wall(s);
 - d. Proposed grading associated with the retaining wall(s);
 - e. Trees to be retained and/or removed;
 - f. Proposed landscape and hardscape elements associated with the retaining wall (including exterior lighting); and
 - g. Dimensions of retaining wall(s) (length and width).
5. Elevation drawings, drawn to a legible Architect’s Scale, which show:
 - a. Details of major architectural elements; and
 - b. Dimensions of retaining wall(s) (length and width).
6. Samples, pictures, and/or brochures of materials to be used.

Required application fee is \$150 for retaining walls *not* requiring a special permit and \$300 for retaining walls requiring a special permit. All checks made payable to “Town of Wellesley.”

Part D. To be completed by Design Review Board staff.

Comments

DRB ____ -- ____ Hearing Date _____