CITY OF HOLYOKE CITY COUNCIL
SPECIAL PERMIT APPLICATION AMENDMENT FOR
MARIJUANA MANUFACTURING ESTABLISHMENT

Name of Owner: ____________________________________________

Address: _____________________________________________

Contact Name __________________________________________ Address (if other) ____________________________

Contact Phone: __________________ Fax #: __________________________

Name of Applicant: ____________________________________________ (if different from owner)

Address: _____________________________________________

Phone: __________________ Fax #: __________________________

Name of Engineer/Surveyor/Sign Company: ____________________________ (if applicable)

Address: ___________________________ Phone ______________

Name of Project: ____________________________________________

Deed of Property Recorded in Hampden County Registry of Deeds: Holyoke Assessor Map Reference:

Book: _______ Page: _______ Map_______ Block_______ Parcel_____

Property Address: __________________________________________

Pursuant to Chapter 40A of the General Laws of the Commonwealth of Massachusetts and the Holyoke Zoning
Ordinance, application is hereby made to the Holyoke City Council to do the following: ________________________

____________________________________________________________________________________________

Will any other permits or variances be required? If so, please list and indicate if they have been applied for or obtained.

____________________________________________________________________________________________

____________________________________________________________________________________________

APPLICANT (please print) ___________________________________ OWNER (or LEGAL COUNSEL) ____________

SIGNATURE OF APPLICANT ____________________________ SIGNATURE OF OWNER (or LEGAL COUNSEL)

536 DWIGHT STREET, ROOM 2 • HOLYOKE, MASSACHUSETTS 01040-5086
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Birthplace of Volleyball