



**DEVELOPMENT REVIEW COMMITTEE APPLICATION  
 for Review of Zoning Variances and Special Exceptions**

**This is not to be completed online. Please DOWNLOAD this form.**

If you have applied for a Zoning Permit from the Philadelphia Department of Licenses and Inspections and received a Refusal or Referral, you may choose to file an appeal. If you do, you will be referred to the Chestnut Hill Community Association for RCO review. To initiate that process we ask you to fill out this application, and submit it to us, along with a copy of the Refusal or Referral, your Appeal, plans (site, floor, elevation), photographs of the property and surrounding area, and any other documentation you feel would be helpful.)..

Please send this information to [RCO-CHCA@chestnuthill.org](mailto:RCO-CHCA@chestnuthill.org) or deliver it to 8434 Germantown Avenue. 19118  
 If you have questions, please call the Executive Director at Town Hall (215-248-8811) or e-mail [RCO-CHCA@chestnuthill.org](mailto:RCO-CHCA@chestnuthill.org). In order to be included on our meeting agendas, you need to initiate contact with us no less than 8 days in advance of the next DRC meeting, which is held on the third Tuesday of every month.

The CHCA review process provides opportunities for your application to be reviewed by professionals, community members and organizations, over the course of 3-5 regularly-scheduled meetings. The process typically spans 37-44 days. Occasionally, revisions are requested that may lengthen the process. Participation in the review process is the only way your application can receive a letter of support from the CHCA Board.

We appreciate your submitting this information early in your process, even preliminary to having a ZBA hearing date. The sooner we hear from you, the better we are able to help you in this process. We look forward to meeting with you, and helping you make a positive contribution to Chestnut Hill. Thank you.

**Please DOWNLOAD this form; PRINT or TYPE and complete only the applicable sections:**

- 1) **Date of Application:** 4/14/2026
- 2) **Statement of Subject:** Briefly describe the development or project that you are proposing  
A small part-time massage therapy practice
- 3) **Property Address or Specific Location:** 240 E Highland Ave, Philadelphia PA 19118
- 4) **Name of Owner(s) of Property or Location:** Richard Sax and Leslie Gomez
- 5) **Name of Applicant (if different than owner):**  
Madeline Schroeder

6) **Owner/Applicant Business Name** Deep Roots Bodywork and Yoga

7) **Owner/Applicant Postal Address:** 240 E Highland Ave Philadelphia PA 19118

8) **Owner/Applicant Contact Information and Website:**

Daytime phone: 802-488-0616 Cell: \_\_\_\_\_

Email maddym Schroeder@gmail.com

Website \_\_\_\_\_

9) **Professional Representation (if applicable):**

Name: Robert M. Careless, Esq.

Firm: Cozen O'Connor

Postal Address: One Liberty Place, 1650 Market Street, Suite 2800, Philadelphia, PA 19103

Phone: (215) 665-4798

Email rcareless@cozen.com

10) **Refusal or Referral:** If you are seeking a Zoning Variance or Special Exception, you will need to provide the Philadelphia Department of Licenses & Inspections Refusal or Referral by number and date:

ZP-2025-010715 issued on 12/11/25. Applicant applied for a by-right home occupation use;

L+I interpreted the use as personal services.

We ask you to provide a copy of your Refusal or Referral to [RCO-CHCA@chestnuthill.org](mailto:RCO-CHCA@chestnuthill.org) prior to the first meeting. If you do not have it, please call us so we can discuss options to create the meeting schedule. If you have received a date and time for your Zoning Board of Adjustments (ZBA) meeting please provide it here:

**ZBA Meeting Date:** July 8, 2026 **Time:** 9:30am

11) **Plans & Drawings:** Please provide the plans and drawings as you submitted them to the Philadelphia Department of Licenses & Inspections. These plans must be submitted in PDF form with your application. Please bring full size plans or drawings to the DRC meeting and other review committee meetings as requested.

12) **Community Benefits:** If applicable, provide a statement of benefits of the project to Chestnut Hill.

My hopes are that this practice benefits the people of this neighborhood by offering affordable massage therapy. For clients who don't live in the neighborhood I hope it adds more foot traffic to Germantown Ave and the other small business in the area.

- 13) **Notification to Neighbors:** The City of Philadelphia requires applicants for variances and special exceptions to notify neighbors within a specified radius of your property. This notification must state that you will be presenting your plans to the community and include the property address, date, time and location of the meeting. Instructions and a list of specific addresses for notification are provided to applicants by the Philadelphia City Planning Commission. (You will first need to file an Appeal with the Philadelphia Zoning Board of Adjustment in order to obtain these instructions and addresses.)

Directions on how to proceed with notifications can be found at:

<https://www.phila.gov/rnotification/>

IMPORTANT: We ask that you contact us prior to sending out neighbor notices so we can confirm the meeting date with you.

- 14) **Please provide the addresses of neighbors adjoining and across from your proposed development. Before a recommendation can be made by the DRC to the CHCA Board, signed letters or petitions indicating the responses of the adjoining neighbors are requested.**

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238 E Highland Ave Philadelphia PA 19118- Jill and David

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- 15) **Operational Impacts:** Please check the items below that may cause the proposed development to have operational impacts on immediate neighbors, businesses, and the surrounding community.

- change in off-street parking demand
- change in on-street parking demand
- change in pedestrian circulation
- change in vehicular circulation
- hours of operation \_\_\_\_\_
- access and timing of goods delivery
- access and timing of waste removal
- number of customers/day 2
- other impacts (please specify) \_\_\_\_\_
- fencing or landscaping along adjoining properties
- increased noise levels
- increased odors
- blocked views
- increased outdoor lighting
- party walls
- change in utility demand
- number of employees

**Please attach statements or diagrams of how you plan to address each of these items.**

**16) Historic Significance:** Please indicate the historic significance of the property (i.e., date of construction, style of architecture, architect if known, National Historic Register status.) The Chestnut Hill Conservancy has documented nearly every existing structure and can provide you with this information. Contact 215-247-9329, Ext 205

N/A

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**17) Historical Context:** Please describe the proposal relative to the historical context of the property and the surrounding properties. (If not known, consult the Chestnut Hill Conservancy.)

N/A

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**18) Environmental Assessment:** Please describe the proposal relative to the environmental context of the property and the surrounding properties (e.g., removal of tanks, trees, hedges, walls).

N/A

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**19) Wissahickon Watershed:** Chestnut Hill lies entirely within the Wissahickon Watershed. A City of Philadelphia ordinance restricts all development within the Watershed with regard to set backs from water courses, site clearing and construction activity on steep slopes (greater than 15 percent), impervious coverage ratios, and some earth-moving activity. Describe the effect of your proposed project on the Watershed. Contact 215-247-0417 – for the Friends of the Wissahickon for more information

N/A

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**\*\*\*\*\* IF THIS IS A RESIDENTIAL PROPOSAL, STOP HERE AND SIGN FINAL PAGE \*\*\*\*\***

20) **Business Context:** If this is a business, please describe how your proposal will contribute to the business community, e.g., how does it complement or duplicate existing businesses?

This will be a small business. Chestnut Hill is an incredible area for small businesses and I look forward to contributing to the growth of our community. My hope is that my business will attract customers who will also frequent other small businesses in the community.

Are you a member of the Chestnut Hill Business Association?  Yes  No

Please indicate any partner(s) in the proposed development.

21) **Parking:** A Parking Plan is requisite to any business project. Please provide a parking plan if your business will impact or use any parking facilities, lots, residential streets, driveways or public thoroughfares, due to customers, employees or deliveries.

If your parking needs will impact or use any of Chestnut Hill's parking lots you must consult with the Executive Director of the Chestnut Hill Parking Foundation as part of this process. Call 215-247-6696 to reach the Parking Foundation.

22) **Statement of Use and Size:** Please briefly state the intended use and size of the development.

This is a part-time small business which is really a home occupation.

23) **Users / Customers:** Please describe the demographics and geographic origins of the users / customers of the proposed development. What is your target market?

I will mainly be working on people who I meet locally, through the yoga community, and word from family and friends. Clients will most likely all live or work within a 3-6 mile radius. I will be specializing in lymphatic drainage, and chronic pain management so my clientele will reflect people with those needs.

24) **Schedule:** Please provide the proposed schedule. Currently the schedule would be limited

to Tuesday from 1pm-5pm, and Thursday from 9:00-1:30am and 1-4pm, and potentially from 9-12pm. The most that would ever change is adding a 9-11:30am shift on Tues and Wed.

25) **Physical Features:** Please briefly describe the physical features of the proposed project in quantitative and qualitative terms, for example: N//A

Building floor area – total (sq.ft.) \_\_\_\_\_

Ground floor area (sq. ft.) \_\_\_\_\_

Number of stories and height (feet) \_\_\_\_\_

Size of parcel and percent covered by building \_\_\_\_\_

Proposed off-street parking capacity \_\_\_\_\_

Plans for Employee Parking \_\_\_\_\_

Number of units or separate rentable spaces \_\_\_\_\_

Proposed architectural and landscape character, including materials and colors:

\_\_\_\_\_  
\_\_\_\_\_

**Please provide scale plans and elevations of the proposed project and surrounding properties.**

26) **Signage\*:** Number of signs 0 \_\_\_\_\_

Color(s) \_\_\_\_\_ Material(s) \_\_\_\_\_

Total dimensions of signs \_\_\_\_\_

Placement \_\_\_\_\_

Source of lighting \_\_\_\_\_

27) **Exterior Lighting\*:** Number of light fixtures 0 \_\_\_\_\_

Design(s) and size of light fixtures \_\_\_\_\_

Material \_\_\_\_\_

Location \_\_\_\_\_

28) **Exterior Color(s):** Use of historic palette is preferred. Please provide paint chips of color(s)  
The house has remained the same color for over 20 years and there will be no change to the exterior

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

29) **Awnings\***: (see our Streetscape Guidelines for preferred choices.) Please provide samples. N/A

Color(s) \_\_\_\_\_ Dimensions (WxLxH) \_\_\_\_\_

Material (please include sample) \_\_\_\_\_

Will awning(s) cover important façade features (e.g., wood moldings, stained glass, etc.)?

\_\_\_\_\_  
\_\_\_\_\_

Purpose for awning(s) \_\_\_\_\_

Intended graphics/type \_\_\_\_\_

30) **Façade\***: Please describe the proposed alterations to the current façade.

N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

31) **Security Systems\***: Please describe any security systems you plan to install.

I hope to install a security system and am doing the research on the one best suited for this space

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*NOTE: The City of Philadelphia may require separate permits for these items outside of the ZBA process**

32) **Hours of Operation**: Please describe your intended hours, each day of the week, and seasonal any differences. Do you plan to participate in the business community special schedules?

Tuesday: 9-11:30am and 1:30-4pm Wednesday: 9- 11:30am Thursday: 9-11:30am and 1:30-

Friday 9-11am  
\_\_\_\_\_

**Please sign your application:**



Signature of Owner/Applicant

Signature of Owner/Applicant

Madeline Schroeder

Print Name

Print Name

# Refusal Notice

**Notice of:**       **Refusal**       **Referral**

<b>Application Number:</b> ZP-2025-010715	<b>Zoning District(s):</b> RSA3	<b>Date of Refusal:</b> <b>12/11/2025</b>
<b>Address/Location:</b> 240 E HIGHLAND AVE, Philadelphia, PA 19118-2809 Parcel (PWD Record)		Page Number Page 1 of 1
<b>Applicant Name:</b> Robert Careless DBA: Cozen O'Connor, P.C.	<b>Applicant Address:</b> One Liberty Place 1650 Market St Philadelphia, PA 19102 USA	<b>Civic Design Review?</b> N

**Application for:**

For a massage therapy use (Personal Services) in an existing structure with existing single family dwelling use to remain as previously approved.

The permit for the above location cannot be issued because the proposal does not comply with the following provisions of the Philadelphia Zoning Code. (Codes can be accessed at [www.phila.gov](http://www.phila.gov).)

<u>Code Section(s):</u>	<u>Code Section Title(s):</u>	<u>Reason for Refusal:</u>
Section 14-401(4) (a)	Multiple Principal Uses and Buildings.	No more than one principal use is allowed per lot in RSA zoning districts
Table 14-602-1	Uses Allowed in Residential Districts - Refusal	Whereas the proposed use, Personal Services is expressly prohibited in the RSA 3 residential zoning district.

TWO (2) USE REFUSALS

Fee to File Appeal: \$ 300

NOTES TO THE ZBA:

NONE

Parcel Owner:

SAX RICHARD J, GOMEZ LESLIE M

<b>Zoning Overlay District:</b> Open Space and Natural Resources - Steep Slope Protection   /NIS Narcotics Injection Sites Overlay District   /WWO Wissahickon Watershed Overlay District   /EDO Eighth District Overlay District
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Varughese Koithottu  
PLANS EXAMINER

12/11/2025  
DATE SIGNED

**Notice to Applicant:** An appeal from this decision may be made to the Zoning Board of Adjustment, One Parkway Building, 1515 Arch St., 18<sup>th</sup> Fl., Phila., PA 19102 within thirty (30) days of date of Refusal / Referral. Please see appeal instructions for more information.

See Link: [Appeal a zoning decision to the Zoning Board of Adjustment \(ZBA\) | Services | City of Philadelphia](#)

# Sketch Floor Plan

**Subject area - Studio**

15' x 11'

**Mudroom**

15' x 18'

**Living room**

19' x 16.5'

**Dining  
Room/  
Kitchen**

15' x 13'

**Bedroom**

**Bedroom**

11.5' x 12'

**Bathroom**

7' x 9'

**Bedroom**

11.5' x 16'

8' x 11'

**Studio**

# **Initial Letter to Neighbors**

Hello,

My name is Maddy Schroeder. I stopped by earlier to briefly introduce myself and share information about a proposed new small business via a home occupation to our street. I live at 240 E. Highland in a home owned by my in-laws, Richard Sax and Leslie Gomez, and have been part of this neighborhood for about five years.

I am planning to apply for a zoning variance that would allow me to operate a small business from my home. The business would be a private massage therapy practice, with myself as the sole practitioner.

My intention is to keep this a part-time practice, serving no more than approximately 10 clients per week, which would amount to about 15 hours of client sessions. Appointment hours would generally fall between 9:00 a.m. and 5:00 p.m. This schedule is designed to minimize any potential impact on parking, as there would be no more than one client present at a time and street parking is typically available during those hours.

The business would operate entirely within the existing home, with no construction or changes to the layout. Additionally, as a massage therapy practice, noise levels are minimal and should not be noticeable outside of the home.

There are several reasons I am pursuing this path rather than working in a traditional spa setting. Maintaining a lighter client schedule helps prevent burnout, which is common in this field, and allows me to sustain a long-term

practice. It also enables me to work primarily with known clients, referrals, and members of the local community.

In the coming weeks, you may receive a letter regarding the variance application, including an opportunity to express any support or concerns. If you have questions or would like to discuss this further, please feel free to contact me at (802) 488-0616 or [maddyschroeder@gmail.com](mailto:maddyschroeder@gmail.com). I would also be happy to meet in person.

If you are supportive, I may ask you to sign a petition of non-opposition at your convenience.

Thank you very much for taking the time to read this and for being part of this community. Providing massage therapy is very meaningful to me, and I am equally committed to being a respectful and responsible neighbor.

Sincerely,  
Maddy Schroeder

# Photographs



