



Department of Inspection Services/Division of Code Enforcement

ZONING INTERPRETATION REQUEST FORM

Property Address:

Property Map & Parcel Number:

Name:

Address:

Phone Number:

Email:

Does the Property Have:

Public Water: ☐ Yes ☐ NoPublic Sewer: ☐ Yes ☐ No*Proposed Use (Please be as specific as possible):*

For Official Use Only

Property Zoning District:

Bylaw Citation for Proposed Use:

Is the proposed use allowed in the Zoning District:

☐ Yes ☐ By Site Plan Approval ☐ By Special Permit ☐ By Variance ☐ No

Aquifer Zone Determination:

☐ Located in the Aquifer Area☐ **Not** Located in the Aquifer Area

Watershed Determination:

☐ *Located in a Regulated Area☐ **Not** Located in a Regulated Areawww.mass.gov/dcr/wspa**Comments:**Please go to the ZBA Downloadable Form site located at: <http://www.westboylston-ma.gov/zbaforms>

Very Respectfully,

Zoning Enforcement Officer

Date:

CC: