



Town of Northborough

Building Department

63 Main Street

Northborough, MA 01532-1994

Office (508) 393-5010

Fax (508) 393-3130

ZONING INTERPRETATION REQUEST FORM

Property

Address: _____

Map & Parcel Number: _____

Does the Property Have: Public Water: Yes No Public Sewer: Yes No

Proposed Use (Please be as specific as possible):

Name: _____ Phone Number: _____ Email: _____

For Official Use Only

Property Zoning District: _____ Bylaw Citation for Proposed Use: _____

Is the proposed use allowed in the Zoning District: Yes No By PB By BA No

Comments: _____

Groundwater Protection Overlay District Determination: Area 1 Area 2 Area 3 N/A

Does the use require a GPOD Special Permit: Yes No N/A

Is the property located in another overlay district: Yes No If yes, which: _____

Is a special permit required: Yes No N/A

Determination Made By: _____

Signature: _____ Date: _____