

ISD Authorized Signature Required: TAM DCH

Department of Inspectional Services

25 Meade Street P | 508-799-1198 F | 508-799-8544 Inspections@WorcesterMA.gov

Zoning Determination FormTo obtain a building permit, you are required to file the following Board application(s):

Property Address(es): Zoning District(s):				Submitted Plan Date: Overlay District(s):				
Planning Board: (indicate all that apply)				Zoning Board of Appeals: (indicate all that apply)				
Site Plan			Variance(s)					
Preliminary	Definitive	Definitive		Dimension		Requirement	Provided	Relief Requested
<u>Trigger(s):</u> 15% Slope	5+ Units	Airport		Gross Area (SF)				•
Cluster	GFA	Lodging House		Fron	Frontage (ft.)			
National Registe		Subdivision	use		Front			
National Negiste	21	Subdivision			Side			
Special Permit(s)				Setback	Exterior Side			
ADU ARO		CCOD	CCRC	(ft.)	Rear			
Cluster WR	POD IZ				Accessory			
Other				Llai	Structure			
Subdivision				Height (ft.) Floor to Area Ratio				
Preliminary Definitive Frontage (Definitive)			Parking (spaces)					
Parking Plan				Other				
ANR	•			Specia	ıl Permit(s)		
More than O	ne Building o	n a Lot (resi	dential)	Use A	llowed by Sp	ecial Permit#	:	
81G Street Opening or Ch. 12 Sec. 12 Review				Expansion/Change of privileged nonconforming				
Other Filings: (either Board)				Structure Use To a Use of a Similar Nature				
(0				Mod. Dimensional Requirements for Residential Conversion				
Amendment to:				·				
Extension of Time for				Modify Parking/Loading/Layout/Landscaping				
Other:				Other:				
For Official Use Only:				Administrative Appeal (ZBA)				

Date