

CANTON CODE ENFORCEMENT OFFICE ZONING CHECKLIST

PROJECT : _____ DATE : _____

ADDRESS : _____

ZONE : _____ LOT IDENTIFICATION # : _____

TOWN _____

PERMITTED USE : YES NO

TYPE OF CONSTRUCTION : NEW OTHER _____

WITHIN FIRE LIMITS : YES NO

PRESERVATION DISTRICT : YES NO

	REQUIRED	ACTUAL
MINIMUM LOT SIZE	_____	_____ <input type="checkbox"/>
MINIMUM LOT WIDTH	_____	_____ <input type="checkbox"/>
MAXIMUM LOT COVERAGE	_____	_____ <input type="checkbox"/>
MAXIMUM HEIGHT	_____	_____ <input type="checkbox"/>
SETBACKS :		
FRONT :	_____	_____ <input type="checkbox"/>
SIDE :	_____	_____ <input type="checkbox"/>
REAR :	_____	_____ <input type="checkbox"/>

WILL VARIANCE BE NEEDED : YES NO

IF YES WHAT TYPE : AREA USE

REASON :
