



Town of Canton Planning Board
 Memorial Town Hall
 801 Washington Street
 Canton, MA 02021
 781-821-5019

Reserved for the Office of the Town Clerk

FORM B
APPLICATION FOR APPROVAL OF A PRELIMINARY SUBDIVISION PLAN

(Pursuant to MGL c. 41, §81-L)

Date: _____

To the Planning Board of the Town of Canton:

The undersigned, being the applicant as defined under Chapter 41, Section 81-L, hereby submits for approval a PRELIMINARY SUBDIVISION PLAN in accordance with the Rules & Regulations of the Canton Planning Board entitled:

Parcel(s) Street Address: _____
 Canton Assessor's Map/Lot Numbers (Map 000, Lot 000): _____
 Number of Proposed Lots: _____ Total Acreage: _____
 Zoning District(s): _____ Is the project Residential or Nonresidential

The undersigned's title to said land is derived from _____
 By deed of Property Recorded in Norfolk County Registry Book number(s): _____ page(s) _____
 Registered in Norfolk County Registry Land Court, Certificate of Title number(s): _____

Owner: _____	Applicant: _____
Company: _____	Company: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

Plans prepared by (Name/ Company): _____
 Plans Dated: _____ Engineer/Surveyor Registration number: _____
 Company Address: _____
 Phone: _____ Email: _____

Signature of Owner _____ Date: _____

Signature of Applicant (or Agent): _____ Date: _____

Office Use Only		1 st Public Hearing Date:	Filing Fee:
	Date Filed with the Planning Board:	Date Filed with the Town Clerk:	Date filed with Board of Health:
	PAC Meeting Date (if applicable):	35-day Comment Deadline:	45-day Decision Deadline: