



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 D**  
**NOTICE OF SUBMISSION OF PRELIMINARY OR DEFINITIVE PLAN**

(Pursuant to MGL c. 41, §81-L)

Date: \_\_\_\_\_

To the Town Clerk of the Town of Canton:

This is to notify you that the undersigned has this date submitted a plan of property located in the Town of Canton for approval as a subdivision under the requirement of the Subdivision Control Law and the Canton Land Subdivision Rules and Regulations, 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 Applicant (or Agent): \_\_\_\_\_

Date: \_\_\_\_\_

<b>Office Use Only</b>		1 <sup>st</sup> 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: