



CITY OF LYNN

INSPECTIONAL SERVICES DEPARTMENT

Room 401, Lynn City Hall, Lynn, MA 01901 Tel: (781) 598-4000 Fax: (781) 477-7031

REQUEST FOR ZONING DETERMINATION

Location Address: Zoning District:

Map: Block: Lot:

Detailed Description of Information Sought:

Applicant Name:

Organization/DBA:

Applicant Address:

Applicant Telephone: Email:

(If applicable)

Petitioner's Agent/Representative:

Agent/Representative's Address:

Agent/Representative's Telephone: Email:

Fee \$50.00 Dollars

Signature of Applicant/Agent/Representative: _____

PLEASE BE ADVISED INQUIRIES WILL BE ANSWERED, IN WRITING, WITHIN 7-10 BUSINESS DAYS