

Change of use approved
 Change of use referred to P & Z

Date of receipt
(Per State Statute)

TOWN OF NORTH HAVEN
PLANNING AND ZONING COMMISSION
CHANGE OF USE FORM
(Must be submitted by the owner of the property)

ADDRESS - 24 Church Street, North Haven, CT. 06473
(Address and location of property)

PRESENT USE: Retail/Office ZONE LBCD Holdings, LLC
& NAME OF BUSINESS Desired Beauty, LLC (PS)

PROPOSED USE: Private health & Wellness REGULATION: _____
& NAME OF BUSINESS Desired Beauty (That permits the use)

PLEASE COMPLETE THE FOLLOWING:

1100 sq. ft. Present Use - gross square footage
1100 sq. ft. Proposed use - gross square footage
____ Present use - parking calculations
____ Proposed use - parking calculations
NO Will any exterior or site work be done as a result of the change of use?

This form has been sent to: _____ (Date) _____ DATE/I.D # OF APPROVED SITE PLAN _____
The following departments have 10 business days to respond to this application with comments or objections.
 QVHD Police Department
 Engineering Department Public Works
 Fire Department Assessor
DATE: _____ REV. _____

CONDITIONS OF APPROVAL (ADDITIONAL CONDITIONS/RECOMMENDATIONS ARE ATTACHED:

1. Contact Building Department for permits and/or before occupying building.
2. Contact Fire Department to insure all fire codes are set.
3. Sign permits are required for wall and free standing signs (application attached)

[Signature]
Leasee's signature

Desiree Savo
Print leasee's name

23 Palmer Rd. North Haven
Leasee's address CT, 06473

1030-414-1058
Leasee's phone number

LBCD Holdings LLC
[Signature] - member
Owner's signature

LBCD Holdings LLC
Christopher DeFrancesco - member
Print owner's name

23 Marion Ave Hamden CT 06518
Owner's address

203-623-9247
Owner's phone number

ZONING ENFORCEMENT OFFICER
Rev. 3/31/00

DATE

RECEIVED

JAN 28 2021

TOWN OF NORTH HAVEN
LAND USE AND DEVELOPMENT

___ Change of use approved
___ Change of use referred to P & Z

_____ Date of receipt
(Per State Statute)

TOWN OF NORTH HAVEN
PLANNING AND ZONING COMMISSION
CHANGE OF USE FORM

(Must be submitted by the owner of the property)

ADDRESS – 67 DEFCO PARK ROAD (BUILDING 2)

(Address and location of property)

PRESENT USE: WAREHOUSE / STORAGE **ZONE** IL80
& NAME OF BUSINESS ULBRICH STAINLESS STEELS & SPECIAL METALS, INC.

PROPOSED USE: MANUFACTURING **REGULATION:** 5.1.1.46
& NAME OF BUSINESS SAME (That permits the use)

PLEASE COMPLETE THE FOLLOWING:

17,500 Present Use – gross square footage
8,000 Proposed use – gross square footage
26 Present use - parking calculations
____ Proposed use – parking calculations
NO Will any exterior or site work be done as a result of the change of use?

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(Date)

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Leasee's signature


Owner's signature

SAME
Print leasee's name

CHRIS ULBRICH
Print owner's name

Leasee's address

153 WASHINGTON AVENUE
Owner's address

Leasee's phone number

203-234-3457
Owner's phone number

_____ ZONING ENFORCEMENT OFFICER	_____ DATE
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