

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

11/2/20 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 - 44 State Street
(Address and location of property)

PRESENT USE: OFFICE for Stumpbuster R. ZONE CB-40
& NAME OF BUSINESS Stumpbuster llc

PROPOSED USE: Esthetics salon (skin care) REGULATION: 4.7.1.11
& NAME OF BUSINESS Cleopatra's Timeless Beauty (That permits the use)

PLEASE COMPLETE THE FOLLOWING:

969 sq. ft. Present Use – gross square footage
969 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? NO

This form has been sent to: _____ DATE/L.D # OF APPROVED SITE PLAN _____
(Date)

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)

Mary Coppo Harding
Leasee's signature

Mary Coppo Harding
Print leasee's name

44 State St. North Haven
Leasee's address

203-606-1253
Leasee's phone number
Email: ccp2mg@aol.com

Woodward Harding
Owner's signature

Woodward Harding
Print owner's name

35 Lucy Street, Hamden, CT
Owner's address

203 288 8733
Owner's phone number

ZONING ENFORCEMENT OFFICER

DATE