

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 – 565 Washington Avenue North Haven CT 06473 Suite # 2
(Address and location of property)

PRESENT USE: Office
& NAME OF BUSINESS: Vacant

ZONE _____

PROPOSED USE: Barbershop
& NAME OF BUSINESS _____

REGULATION: _____
(That permits the use)

PLEASE COMPLETE THE FOLLOWING:

1400 Present Use – gross square footage
1400 Proposed use – gross square footage
86 Present use - parking calculations
86 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)

J Palmieri
Leasee's signature

Will Shwartz
Owner's signature

Jessica Palmieri
Print Leasee's name

W&W Properties, LLC
Print owner's name

17 Pogmore drive Wallingford
Leasee's address
CT 06492

565 Washington Ave.
Owner's address

203 410 5150
Leasee's phone number

203-269-9730
Owner's phone number

ZONING ENFORCEMENT OFFICER

DATE