

APPLICATION FOR ZONING SIGN PERMIT CHANGE OF USE/CHANGE OF OCCUPANCY TOWN OF EAST GRANBY

9 Center Street East Granby, CT 06026-1858 Ph: (860) 653-3444 Fax: (860) 653-4017

Commercial: Detact	size/same location <u>as approved</u> previ	ously – No fee)
Use/Occupancy: Current	*Proposed:	
Estimated Cost: \$		ee:
Property Location:		
Applicant's Name		Date
Phone #	Email	Fax#
Owner's Name/Address (if dif	ferent)	
background, construction details and plot/site plan showing sign location, of	of the proposed sign detail including all dimension any information regarding illumination. If detact distance to property lines and setbacks. Separate <i>rmit is for multi tenant building, a sign theme for approved.</i>	hed, please submit copy of building permit application
* For new uses, please attach a states equipment used in the operation, num	ment that should include the following information ber of people employed, normal hours of operations on the area specifically with respect to traffic	ion, number of customers (trips)
Applicant's Signature:		
Owner's Signature (if differen	t):	
	FOR OFFICE USE ONLY	
Approval: Granted		Denied
Staff Signature for Zoning App	proval	Date

Cc: Town Clerk, Fire Marshal, Assessor