



TOWN OF GRANBY

NOTICE OF MEETINGS OF TOWN DEPARTMENT AND ALL TOWN BOARDS AS REQUIRED BY CHAPTER 39, SECTION 23 M.G.L.

NAME OF DEPARTMENT, BOARD OR COMMISSION & GENERAL PURPOSE OF MEETING

Granby Board of Health

* Date changed 10/30/15
To: Weds. Nov. 4 2015

DATE OF MEETING:

Nov 3 2015

TIME: 6:30 pm

DATE OF NOTICE:

10/29/15

PLACE: 915B West State St

ROOM: _____

FLOOR: _____

10-29-15A10:34 RCVD

Jeanne C...

CLERK OF BOARD/ OR BOARD MEMBER

Timestamp all copies in Town Clerk's Office-leave three copies to Clerk, (two for posting)
Keep a copy for your Records.

[Signature]

LISTINGS OF TOPICS

Please check if Action will be taken or Information

	<u>Action</u>	<u>Information</u>
1. <u>Bob Sheehan-septic</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. <u>Edmond Miga- 32 East St</u> <u>Septic</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3. <u>117 Maximilian-building</u> <u>Permit sign off</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4. <u>Temp Foot Permits</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5. <u>Title V waiver- 176 East St</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6. <u>Title V inspection Reports</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7. Other Business	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

If more space is needed please fill out an additional Agenda form