

Town of Montville
"NEW BUSINESS" APPROVAL

Property Address

New Business Description

REQUIRED APPROVAL	DEPARTMENT	APPROVAL
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Planning & Zoning _____
Signature/Date

Comments: _____

Town Clerk _____
Signature/Date

Comments: _____

Assessor _____
Signature/Date

Comments: _____

WPCA _____
(Required for properties on sewer) Signature/Date

Comments: _____

Building Department _____
Signature/Date

Comments: _____

Health Department _____
Signature/Date

Comments: _____

Fire Marshal _____
(Required for all properties EXCEPT one and two family) Signature/Date

Comments: _____

Planning Department Final Approval _____
Signature/Date