

7. Other Business

## **TOWN OF GRANBY**

NOTICE OF MEETINGS OF TOWN DEPARTMENT AND ALL TOWN BOARDS AS REQUIRED BY CHAPTER 30A, SECTION 18-25 M.G.L.

NAME OF DEPARTMENT, BOARD OR COMMISSION & G	<u>ENERAL PURPOS</u>	E OF MEETING	
Granby Board of Health			
<b>)</b>	DATE OF N	MEETING:	
	October	1,20A	
PLACE: 215B West State St	TIME: C	TIME: 6'45	
ROOM:FLOOR:	DATE OF N	OTICE:	
FLOOR:	9/21	19_	
Drawno Closer SEP 202	.019 am10:00_		
CLERK OF BOARD/ OR BOARD MEMBER Timestamp all copies in Town Clerk's Office-leave three copies	i/d	Okting)	
Keep a copy for your Records.	o cioni, (needly)		
LISTINGS OF TOPIC	<u> </u>		
Please check if Action will be taken o	r Information		
	Action	<b>Information</b>	
1. Blob Sheeman -septic		$\checkmark$	
2. Well permit - 34 South.			
3. Coc for 235 taylor S	+ _	~	
4. Title Vinspections	_	¥	
5. Meeting minutes	1		
6. Review Correspondence	2_/	1	

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