



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 & GENERAL PURPOSE OF MEETING

Granby Board of Health

DATE OF MEETING:

July 10, 2018

TIME: 6:30pm

DATE OF NOTICE:

7/6/18

PLACE: 215 B West State St
ROOM:
FLOOR:

Jeanne Cusley
CLERK OF BOARD/ OR BOARD MEMBER

JUL 6 AM 9:27

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

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>meeting minutes</u> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. <u>Title V inspection Reports</u> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. <u>Bills</u> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. <u>Review Correspondence</u> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. <u>511 East State St</u> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. <u>Other Business</u> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

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