

TOWN OF GREENFIELD BUSINESS OCCUPANCY PERMIT APPLICATION

INSTRUCTIONS: Please return the completed application and application fee to the Code Enforcement Officer at:

Town of Greenfield
7 Sawmill Rd.
P.O. Box 256
Greenfield, New Hampshire 03047

Applications must be filled out completely. Incomplete applications will not be accepted.

BUSINESS OWNER

Owner Name (1):	IITIAL
Owner Name (2):	IITIAL
Owner Name (2):	IITIAL
LAST FIRST MIDDLE IN Mailing Address (if different from Business): Fax:	
LAST FIRST MIDDLE IN Mailing Address (if different from Business): Fax:	
Phone:	
Phone:	
Area Code and Number Area Code and Number	
Email Address:	
PROPERTY INFORMATION:	
Zone:	
Physical Location Of Business Address (Include Nearest Cross Streets):	
PROPERTY OWNERS NAME(S):	
Name (1):	
LAST FIRST MIDDLE IN	ITIAL
Name (2):	
LAST FIRST MIDDLE IN	ITIAL
Phone:	
Area Code and Number Area Code and Number	
Email Address:	

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BUSINESS DESCRIPTION(s): (include all businesses at this location)		
Type of Business (1):	Type of Business (2):	
on premises. Use additional sheets if need		
	o double the permit fee will be charged for opening a business to the public	
without obtaining a business occupancy	permit.	
Business Permit Fee:\$25		
Business Owner Signature:	Date:	
Business Owner Name (Printed):		
	: Greenfield Planning Board and Code Enforcement Officer	
Planning Board Approval of Proposed Bus	siness Site Plan: Mon/Date/Year	
Planning Board Chair Signature:		
Planning Board Chair Name (Printed):		
ADDITIONAL NOTES:		

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