

SECOG APPLICATION FOR BUILDING PERMIT, PAGE 1 OF 4

HOUSE/BLDG #: _____ Unit #: _____

STREET: _____

Project name _____

Property Owner's Name: _____

Property Owner's Mailing Address: _____

Property Owner's Phone _____ Email _____



Contractor _____ LICENSE/REGISTRATION # _____

TYPE _____ Business Name: _____

Contractor's Address _____

Contractor's Phone _____ Email _____

Design Professional _____ LICENSE/REGISTRATION: Archt. _____

PE _____ Int. Des. _____

Address _____

Designer's Phone _____

The undersigned owner or authorized agent of the owner applies for a building permit in accordance with the laws and ordinances of the municipality the Connecticut General Statutes, the CT State Building Code, and the CT State Fire Safety Code as they may apply, and intends to comply with same. Permits are issued to the owner in fee, and compliance with all regulations is the responsibility of the owner in fee of the subject parcel.

Check one:

A.) I hereby swear that : I am the Owner In Fee of the subject parcel _____; or,

B.) this application is authorized by the Owner In Fee and that said applicant is authorized by the Owner In Fee to make said application: _____ .

Applicant Signature: _____ (notary not required if Owner is signing)

Personally Appeared (print applicant name) _____

Authorized agent for: (Print property owner's name) _____ Owner, who
made oath that the statements herein were true and correct before me this day of _____ 20____

Notary Public _____ My Commission Expires: _____

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Description of building:

Occupancy Class: 1 or 2 fam: _____ Multi-Fam: _____ Business: _____ Mercantile: _____ Assembly: _____

Institutional: _____ Educational: _____ Utility: _____

Description of use: _____

Construction class of building: Type IA _____ IB _____ IIA _____ IIB _____ IIIA _____ IIIB _____ IV _____ VA _____ VB _____

Description _____

Number of Stories _____ Square footage entire structure: _____

Square footage of proposed project or const. area _____

Lot Size: _____ Describe Fire Alarm: _____

Describe sprinklers or other fire protection: _____

Occupancy load: _____ Structural live load, floor: _____

Risk category (1604.5) _____

Describe foundation type: _____

Describe any existing structures and their current use: _____

Proposed project (check all that apply):

New Construction: _____ Addition: _____ Alteration: _____ Repair: _____ Removal: _____ Change of use: _____

Tenant fit-up: _____ Base building: _____

Estimated cost of project: \$ _____

Permit fee \$ _____ (Building Official shall set construction value)

Describe project:

List of attached drawing numbers and their dates:

Document check list:

____ Architectural and Engineering plans and specifications
or equivalent)

____ Plot plan or survey

____ Manufacturer's specification sheets
chapter 17)

____ Energy code compliance documents (Res-Check, Com-Check,

____ Contractor registration or license (as applicable)

____ Schedule of Special Inspections (where required, see IBC

____ Letter of permission from licensed /registered contractor to use license/registration for this project (*required where applicant is not the named licensee/registrant*)

____ Proof of Contractor's workers compensation coverage, or appropriate DOL alternate document (7a, 7b, or 7c form)

Please also make application simultaneously to the municipal Fire Marshal and the Health District.

Uncas Health District <https://www.uncashd.org>

doh@uncashd.org

Phone: [860-823-1189](tel:860-823-1189)

Bozrah Fire Marshal: <https://townofbozrah.org/278/firemarshal> Thomas Main, Jr. temainjr@comcast.net

Phone: [860-889-2689](tel:860-889-2689)

Franklin Fire Marshal: <https://www.franklinct.gov/fire-marshal> Sean Shoemaker firemarshal@franklinct.gov

Phone [860-209-6271](tel:860-209-6271)

Preston Fire Marshal: <https://www.preston-ct.org/192/fire-dept> Keith Wucik firechief@preston-ct.org

Phone [860-887-5151](tel:860-887-5151)

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Agency Approvals (attaching emailed approval is acceptable)

Fire Marshal, Name: _____
Signature: _____ Date: _____

Health District, Name: _____
Signature: _____ Date: _____

Municipal Sewer Department, Name: _____
Signature: _____ Date: _____

Zoning Enforcement Officer : Name: _____
Signature: _____ Date: _____

Zoning approval notes and restrictions:

Municipal Public Works Dept, Name: _____
Signature: _____ Date: _____

Municipal Engineer, Name: _____ Signature: _____
Date: _____

State Traffic Commission: (attach letter, or have CT DOT official sign here)
Signature: _____ Date: _____

FOR OFFICE USE ONLY:

DESCRIPTION OF APPROVED WORK:

Building Official Approval, Name: _____
Signature: _____ Date: _____

Estimated value of work: \$ _____ Fee: \$ _____

Final Cert of Approval/CO: \$ _____ Total \$ _____ App. Date: _____

This application for a building permit is governed by the current applicable CT State Statutes, CT State Building and Fire Codes, as amended, and applicable ordinances enacted by the municipality.

MUNICIPAL ORDINANCE Taxes Due

No Permit shall be approved by the Building Department if it is determined by the Building Official that there are delinquent taxes, or sewer use charges against the property for which an application is made, unless the property owner has entered into a payment program approved by the municipal Tax Collector to pay-off the delinquent taxes, liens, or sewer use charges, which may be due.

CT State Building Code:

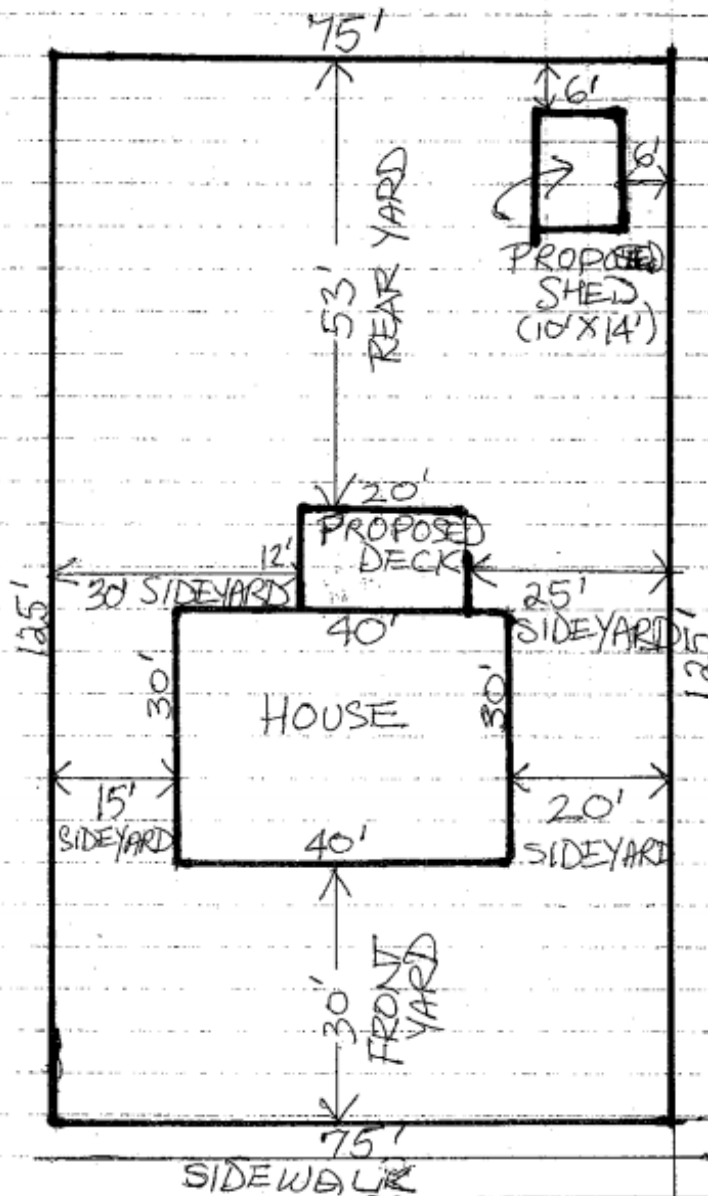
States in part and material relevance:

Section 105.3.1 ACTION ON APPLICATION reads in part: "The Building Official shall examine or cause to be examined application for permits and amendments thereto within 30 days after filing and either issue or deny a permit within such 30 day period. If the application or construction documents do not conform to the requirements of this code and pertinent laws, the Building Official shall reject such application in writing stating the reasons therefore."

Section 105.3.1.1 ZONING APPROVAL reads in part: "No Building Permit shall be issued in whole or in part for a building use or structure subject to the zoning regulations of the municipality without certification in writing by the official charged with enforcement of such regulations that such building, use or structure is in conformity with such regulations or is a valid non-conforming use under such regulations."

Section 105.3.1.2 FIRE MARSHAL APPROVAL reads in part: "No Building permit for a building structure or use subject to the requirements of the CT State Fire Code, [as amended], shall be issued in whole or in part without certification in writing from the local Fire Marshal that the construction documents for such building, structure, or use are in substantial compliance with the requirements of the CT State Fire Code [as amended]."

SAMPLE PLOT PLAN



OWNER NAME: JOSEPH P.
HOMEOWNER

LOCATION (ADDRESS):
12 BUTTERNUT LANE

ZONE: R-2

PLAN MUST BE
DRAWN TO SCALE
(NO EXCEPTIONS.)

SCALE: 1" = 20'

INFORMATION SUPPLIED
BY:

JOSEPH HOMEOWNER
(SIGNATURE)

DATE: 01/20/2020

PLOT PLAN MUST
INCLUDE:

- OVERALL PARCEL BOUNDARIES
- EXISTING STRUCTURES
- PROPOSED STRUCTURES
- ALL DRAWN TO SCALE WITH DIMENSIONS FOR:
 - FRONT YARD
 - SIDE YARDS
 - REAR YARD

BUTTERNUT LANE STREET

IF THIS IS A CORNER LOT,
WHAT IS THE NAME OF OTHER
STREET?