

PHONE (860) 658-3234
FAX (860) 658-3217

TOWN OF SIMSBURY
PERMIT APPLICATION

933 HOPMEADOW STREET
SIMSBURY CT 06070

PROPERTY ADDRESS _____

EST. COST OF JOB _____ COST OF PERMIT _____ CHECK# _____

TYPE OF PERMIT: BUILDING () Blanket Fee () Non-Blanket Fee () Commercial ()
HEATING () PLUMBING () ELECTRICAL () OTHER ()



DESCRIPTION OF WORK: _____

BUILDING OFFICIAL
COMMENTS: _____

OWNER(S)	CONTRACTOR
ADDRESS	ADDRESS
TOWN ST ZIP	TOWN ST ZIP
HOME PHONE # WORK PHONE #	LICENSE # WORK PHONE #

AFFIDAVIT AND AGREEMENT

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY WHICH IS THE SUBJECT OF THIS APPLICATION OR THE AUTHORIZED AGENT OF THE PROPERTY OWNER; I AGREE TO CALL AT LEAST 24 HRS. IN ADVANCE FOR EACH INSPECTION INDICATED ON THE PERMIT; I AGREE TO UNCOVER AND EXPOSE ANY WORK WHICH IS COVERED OR CONCEALED WITHOUT INSPECTOR'S APPROVAL; I UNDERSTAND THAT WHEN A PERMIT IS ISSUED, IT IS A PERMIT TO PROCEED AND GRANTS NO RIGHT TO VIOLATE ANY CODE, ORDINANCE OR STATUTE, REGARDLESS OF WHAT MAY BE SHOWN OR OMITTED ON THE SUBMITTED PLANS AND SPECIFICATIONS REGARDLESS OF ANY AGREEMENT WITH ANY OFFICIAL.

I HAVE READ AND AGREE TO ALL THE ABOVE

SIGNATURE: _____ DATE: _____

TOWN OF SIMSBURY BUILDING PERMIT

DATE ISSUED _____ BUILDING PERMIT # _____

DATE CLOSED _____

BUILDING OFFICIAL SIGNATURE

REQUIRED INSPECTIONS

- | | |
|---|---|
| <input type="checkbox"/> FOOTING (FORMS IN PLACE BEFORE CONCRETE) | <input type="checkbox"/> ROUGH FRAME/MECHANICALS |
| <input type="checkbox"/> DAMPPROOF/WATERPROOF/DRAINS | <input type="checkbox"/> INSULATION |
| <input type="checkbox"/> INGROUND MECHANICALS | <input type="checkbox"/> FINAL INSPECTION |
| <input type="checkbox"/> FIREPLACE/THROAT | <input type="checkbox"/> CERTIFICATE OF OCCUPANCY |

**** OTHER APPROVALS OR PERMITS REQUIRED ****

FIRE MARSHAL _____ FVHD _____ DRIVEWAY _____ SEWER _____
ZBA _____ ZONING _____ WETLANDS _____ HDC _____

**** THIS PERMIT IS NOT VALID UNLESS PERTINENT INFORMATION IS ATTACHED ****