

Approved By:

Date: ___/___/__

TOWN OF OLD SAYBROOK

Building Department

www.oldsaybrookct.gov
302 Main Street
Old Saybrook, CT 06475
(860) 395-3130

Residence Commercial Property Name of Business: Description of Proposed Work:		FOR OFFICE USE		
LIC: Yes No EXP:	Date Received://		Permit #:	
Prince Permit Fee Paid: S	Map: Lot:		Flood Zone:	Y () / N
Permit Face Paid: 5	LIC: Yes No EXP://	CLI: Ye	s No EXP:	_/
Property Address: Old Saybrook, CT 0647	FM#:			ZC#:
Property Address: Construction Custs:	Permit Fee Paid: \$	Payment Type: Check Cash Card Card	Reference #:	
Property Address: Construction Custs:				
Property Address: Old Saybrook, CT 0647 This property has: Residence	Where will the work take place?	BEGIN APPLICATION BELOW		
Residence Commercial Property Name of Business: Description of Proposed Work:	Property Address:		<u>Ol</u>	d Saybrook, CT 06475
Description of Proposed Work: Please Now: The's near regen - when 1.05 colonidar days, Selephan must be unbains for all near construction Costs: Improvement: \$ Roofing: # of Squares:	This property is a:			
Please Note: Wird, we a bagin wishs. IPs cannote lays. Size jiten was be decided for all new controls to the mash will this jeb out, including parts and labor?	Residence Commercial Property	Name of Business:		
How much will this jub used, including parry and labor? Construction Costs:	Description of Proposed Work:			
How much will this jub used, including parry and labor? Construction Costs:				
Improvement: \$	How much will this job cost, including parts and labor?	Please Note: Work must begin with	hin 180 calendar days. Site plan must	be included for all new construction
Electrical: \$\frac{1}{2} \rightarrow CRS \(\frac{1}{2}\); RIP? Yes \rightarrow No \rightarrow \rightar	Construction Costs:			
Property Owner/Lessee: Mailing Address: Email Address: Phone #: Contractor Name & Company: Mailing Address: Phone #: Certification Thereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as her/his authorized again and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce provisions of the code(s) applicable to such permit. Any application for which a permit has not been issued within 180 days of the date of application shall be considered void and any fees associated with that application will be forfeited. Applicant: Name Part Name Date	Improvement: \$	Roof	ing:	
Heating/AC; \$ Total Valuation: \$	Electrical: \$ → CR	S #: # of S	Squares:	
Property Owner/Lessee: Mailing Address: Email Address: Phone #: Cay Sinie Zap Contractor Name & Company: Mailing Address: Email Address: Phone #: Cay Sinie Zap Contractor Name & Company: Contractor Name & Company: Email Address: Email Address: Phone #: CERTIFICATION I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as her/his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce provisions of the code(s) applicable to such permit. Any application for which a permit has not been issued within 180 days of the date of application shall be considered void and any fees associated with that application will be forfeited. Applicant: Nigrature Print Name Date Mailing Address:		RIP?	Yes No	
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Mailing Address: City State Zip	Applicant: Signature	Print Name		Date
	Mailing Address:			
	Email Address:		State	Zip

Use Group:

Type: