



TOWN OF OLD SAYBROOK
Building Department

302 Main Street • Old Saybrook, Connecticut 06475
Telephone (860) 395-3130 • FAX (860) 395-3125

APPLICATION for PLAN EXAMINATION and BUILDING PERMIT

FOR OFFICE USE: MAP: ___ LOT: ___ Date Received: ___/___/___ Permit # ___

Permit Fee Paid: \$ ___ Cash or Check #: ___ FM# ___ ZC# ___ Flood Zone Y or N
(Includes \$.26 per \$1000 - educational training fee)

PROPERTY ADDRESS: _____ Old Saybrook, CT 06475

Proposed Use: Residence ___ Commercial ___ Store ___ Name of Business: _____

Description of work to be done: _____

Please note: Work must begin within 180 calendar days. Site plan must be included for all new construction.

Construction Costs

Improvement: \$ ___
Electrical: \$ ___ CRS #: ___
Plumbing: \$ ___
Heating/A.C.: \$ ___
Total Valuation: \$ ___

Roofing

of Squares: ___
RIP: Yes ___ No ___

Property Owner/Lessee: _____

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Email Address: _____ Phone #: _____

Contractor Name & Company: _____

Address: _____

City: _____ State: _____ Zip code: _____

Email Address: _____ Phone #: _____

License Number: _____

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 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 120 days of the date of application shall be considered void and any fees associated with that application will be forfeited.

Applicant: _____

Signature Print Date

Address: _____

City: _____ State: _____ Zip code: _____

Email Address: _____ Phone #: _____

Approved by: _____

Building Official Date

TYPE: _____ USE GROUP: _____