

### **APPLICATION FOR PLUMBING PERMIT (GOLDENROD)**

1. Used for any plumbing work being performed in single family homes, commercial and industrial buildings, new office areas, etc.

**APPLICATION FOR PLUMBING PERMIT**

TOWN OF NEWINGTON, 200 GARFIELD STREET, NEWINGTON, CT 06111

TEL: (860) 665-8580 FAX: (860) 665-8577 - BUILDING DEPARTMENT

**APPLICATION MUST BE FILLED OUT COMPLETELY IN INK**

JOB LOCATION: \_\_\_\_\_

CONTRACTOR'S NAME: \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ STATE LIC. NO: \_\_\_\_\_

(HOME) OWNER NAME \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

(HOME) OWNER ADDRESS \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: \_\_\_\_\_

\_\_\_\_\_

TOTAL VALUE OF WORK TO BE PERFORMED: \$ \_\_\_\_\_

TYPE OF BUILDING: RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ OTHER \_\_\_\_\_

TYPE OF JOB: ORIGINAL CONSTRUCTION \_\_\_\_\_ ALTERATION \_\_\_\_\_ OTHER \_\_\_\_\_

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ALL WORK COVERED BY THIS APPLICATION HAS BEEN AUTHORIZED BY THE (OWNER) OR (AGENT) OF THIS PROPERTY AND WILL BE DONE ACCORDING TO STATE CODES AND REGULATIONS. **NO WORK SHALL BE STARTED UNTIL THE BUILDING DEPARTMENT HAS RECEIVED THIS APPLICATION AND HAS ISSUED A BUILDING PERMIT. ALL PERMITS APPROVED SUBJECT TO FIELD INSPECTION.**

SIGNED: \_\_\_\_\_  
(APPLICANT) (DATE) (TELEPHONE NO.)

PLEASE PRINT NAME: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PERMIT FEE \$ \_\_\_\_\_

REC'D BY: \_\_\_\_\_

TOTAL PAID \$ \_\_\_\_\_

DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

PERMIT NO: \_\_\_\_\_

**NOTE: CALL BUILDING DEPARTMENT FOR REQUIRED INSPECTIONS.**

**24 HOUR NOTICE IS REQUIRED (860-665-8580)**