

## **COMMERCIAL/INDUSTRIAL BUILDING PERMIT APPLICATION**

Additions, alterations, change of use or new construction require permits

- a. 3 copies of plans describing the work to be performed with dimensions
- b. Buildings of 500 sq. ft. or more require a Design Professional
- c. Zoning Permit Application needs to be filled out completely.
- d. A CO fee of \$50 is charged for new construction and if a new tenant is moving in.

NOTE: No license is needed for general contractor of Building Permit. Licenses are needed for the trades (elec. etc).

**APPLICATION FOR BUILDING PERMIT**  
COMMERCIAL \* INDUSTRIAL \* MULTI-FAMILY RESIDENTIAL  
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 \_\_\_\_\_ TEL. NO. \_\_\_\_\_

CONTRACTOR'S ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ STATE REG. NO. \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_ TEL. NO. \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_

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

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

SIZE OF STRUCTURE TO BE BUILT: WIDTH \_\_\_\_\_ DEPTH \_\_\_\_\_ AREA \_\_\_\_\_ (SQ.FT.)

T.P.Z./Z.B.A. APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

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 INSPECTIONS.**

Signed \_\_\_\_\_  
(applicant) (date) (telephone no.)

Please print name \_\_\_\_\_ E-MAIL: \_\_\_\_\_

BUILDING PERMITS PAID FOR: BUILDING \_\_\_\_\_ HEATING & AIR COND. \_\_\_\_\_  
ELECTRICAL \_\_\_\_\_ PLUMBING \_\_\_\_\_

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

OCCUPANCY FEE \$ \_\_\_\_\_

ZONING FEE: \$ \_\_\_\_\_

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

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

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

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

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

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

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

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