

TOWN OF WOODBURY, CONNECTICUT 203-263-5717

BUILDING PERMIT APPLICATION FOR ALTERATIONS, ADDITIONS and NEW, ONE AND TWO FAMILY DWELLING

LOCATION OF JOB (NO. & STREET)	MAP	LOT	ZONE	USE GROUP	CONSTRUCTION TYPE
PROPERTY OWNER:	ADDRESS:				CONTACT PHONE #
APPLICANT	ADDRESS:				CONTACT PHONE #
LICENSE NUMBER:	LICENSE TYPE:		LICENSE EXPIRATION DATE:		

\_\_\_\_\_ NEW DWELLING      \_\_\_\_\_ ADDITION TO DWELLING      \_\_\_\_\_ ALTERATION OR REMODEL OF DWELLING

**CHECK/ANSWER ANY AND ALL THAT APPLY FOR NEW DWELLING OR ADDITION TO DWELLING**

#Bedrooms \_\_\_\_\_, #Bathrooms \_\_\_\_\_, Open Deck(s)- YES NO If yes dimensions \_\_\_\_\_,  
 Finished Attic - YES NO Finished basement – YES NO if yes dimensions \_\_\_\_\_,  
 Finished bonus Room – YES NO if yes dimensions \_\_\_\_\_, # Covered Porch(s) – YES NO If yes dimensions \_\_\_\_\_,  
 Masonry Fireplace-how many \_\_\_\_\_, Factory Fireplaces- how many \_\_\_\_\_ Type \_\_\_\_\_,  
 Garage(s)-attached \_\_\_\_\_ detached \_\_\_\_\_ how many car(s) \_\_\_\_\_ how many stories \_\_\_\_\_ size of finished area above \_\_\_\_\_,  
 OTHER \_\_\_\_\_.

**THIS INFORMATION AND PLAN REVIEW WILL BE USED FOR PERMITTING PURPOSES.**

**FOR REMODELING AND ALTERATIONS PLEASE BRIEFLY DESCRIBE ALL WORK INVOLVED**

**APPLICANTS ESTIMATED VALUE OF WORK (time and material per R108.3) \_\_\_\_\_**

All work covered by this application has been authorized by the owner or agent of this property and will be done according to State regulations. This permit shall lapse if work does not commence within 180 days. **OWNER/AGENT SIGNATURE**

**DO NOT WRITE BELOW THIS LINE**

Taxes for the above owner are currant as of the date of this application:  
 Tax Collector \_\_\_\_\_ Date \_\_\_\_\_

DEPARTMENT	PERMIT NUMBER	APPROVAL DATE	SIGNATURE
PLANNING/ZONING			
INLAND WETLANDS			
SANITARIAN/HEALTH DEPARTMENT			
PUBLIC WORKS DRIVEWAY PERMIT			
HISTORIC DISTRICT			

**BUILDING OFFICIALS ESTIMATED VALUE OF WORK (time and material per R108.3) \_\_\_\_\_**

VALUE OF WORK-FEE COMPUTATION

Building Permit Fees: Up to \$1000.....\$20.00	Permit Fee \$ _____
\$7.00 per each additional \$1000 or fraction thereof	C.O. Fee \$ _____
Occupancy Permit Fees/New Homes and Additions Over 100 square Foot.10 cents per square foot	State Fee \$ _____
New Home and Additions: Others.....\$10.00	Other Fee \$ _____
Re-inspection Fee After Two Visits for same issue.....\$25.00	
Demolition Fee.....\$25.00	
	<b>TOTAL PERMIT FEES \$ _____</b>

BUILDING OFFICIAL APPROVAL:  _____ DATE: _____	PERMIT NUMBER
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