

PHONE (860) 844-5318
FAX (860) 844-5325

**TOWN OF GRANBY
PERMIT APPLICATION**

15 NORTH GRANBY ROAD
Granby, CT 06035

PROPERTY ADDRESS _____

EST. COST OF JOB _____ COST OF PERMIT _____ CHECK# _____ RCPT# _____

TYPE OF PERMIT: BLANKET () NON-BLANKET ()

BUILDING () HEATING () PLUMBING () ELECTRICAL () OTHER ()

DESCRIPTION OF WORK: _____

NEW HOME () ADDITION () ROOF () SIDING () POOL () DECK () SHED () OTHER ()

BUILDING OFFICIAL
COMMENTS: _____

OWNER(S)	CONTRACTOR
ADDRESS	ADDRESS
TOWN ST ZIP	TOWN ST ZIP
HOME PHONE # WORK PHONE #	LICENSE # WORK PHONE #

AFFIDAVIT AND AGREEMENT

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY WHICH IS THE SUBJECT OF THIS APPLICATION OR THE AUTHORIZED AGENT OF THE PROPERTY OWNER; I AGREE TO CALL AT LEAST 24 HRS. IN ADVANCE FOR EACH INSPECTION INDICATED ON THE PERMIT; I AGREE TO UNCOVER AND EXPOSE ANY WORK WHICH IS COVERED OR CONCEALED WITHOUT INSPECTOR'S APPROVAL; I UNDERSTAND THAT WHEN A PERMIT IS ISSUED IT GRANTS NO RIGHT TO VIOLATE ANY CODE, ORDINANCE OR STATUTE, REGARDLESS OF WHAT MAY BE SHOWN OR OMITTED ON THE APPROVED PLANS AND SPECIFICATIONS AND REGARDLESS OF ANY AGREEMENT WITH ANY OFFICIAL.

I HAVE READ AND AGREE TO ALL THE ABOVE

SIGNATURE: _____ DATE: _____

TOWN OF GRANBY BUILDING PERMIT

DATE ISSUED _____ BUILDING PERMIT # _____

DATE CLOSED _____

BUILDING OFFICIAL SIGNATURE

**** OTHER APPROVALS OR PERMITS REQUIRED ****

FIRE MARSHAL () FVHD () WETLANDS () DRIVEWAY () P&Z () ZBA () ZONING () TAX ()
WATER () SEWER ()

REQUIRED INSPECTIONS

- | | |
|--|-----------------------------|
| () FOOTING (FORMS IN PLACE BEFORE CONCRETE) | () ROUGH FRAME/MECHANICALS |
| () DAMPPROOF/WATERPROOF/DRAINS | () INSULATION |
| () INGROUND MECHANICALS | () DRIVEWAY |
| () FIREPLACE/THROAT | () FINAL INSPECTION |
| () CERTIFICATE OF OCCUPANCY | |

**** THIS PERMIT IS NOT VALID UNLESS PERTINENT INFORMATION IS ATTACHED ****

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