

TOWN OF WESTON

BUILDING DEPARTMENT PERMIT APPLICATION

(203) 222-2658

ELECTRIC

GAS TANK

OIL TANK

PLUMBING

GAS LINE

HVAC

I, the Undersigned, hereby make application for a permit to perform Work (in accordance with the Building Code) in a building as hereinafter described. I certify that I am familiar with the State of Connecticut Building Code as it applies to the work under my control and will give notice when work is ready for rough and final inspection. I am the owner of this property, or I have been authorized by the owner of this property to make this application.

Job Address _____

Building Permit No. (if applicable) _____

Name of Building Owner _____

Address of Owner (if different from job address) _____

Description of work _____

CRS Number for service (if applicable) _____ 2021 IRC _____

2020 NEC _____

Company Name _____

Your Name _____ Phone _____

Email Address _____

Type of License _____ License No. _____ Expiration Date _____

Signature _____ Date _____

Estimated Cost of Work \$ _____ Permit Fee \$ _____

Building Official _____ **Date** _____