

# TOWN OF GREENWICH APPLICATION for PLUMBING PERMIT

Office Use Only  
Revised by \_\_\_\_\_  
Date \_\_\_\_\_

Work Address \_\_\_\_\_ Building Permit No. \_\_\_\_\_

Owners Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Contractor** [Permit Holder] \_\_\_\_\_ CT Lic. No. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

**IF Authorized Agent signing for Licensed Holder** [print name] \_\_\_\_\_

**Must attach** Required letter of authorization per Public Act 91-85 attached with application

## IF THIS APPLICATION IS NOT FILED UNDER A BUILDING PERMIT

**Owner Authorization [owner must sign here]** \_\_\_\_\_

## OWNER FILING AS PERMIT HOLDER and AUTHORIZING A CONTRACTOR TO DO THE WORK

**Owner Authorization [owner must sign here]** \_\_\_\_\_

**Contractor Performing the work** \_\_\_\_\_ **CT Lic. No.** \_\_\_\_\_

Residential [1& 2 Family]     Commercial [Incl. Over 2 Family]

Plumbing Code Applied     IPC     IRC

Description of Work: \_\_\_\_\_

Proposed Work    N=New    M= Moved    R=Replaced    Example - 2N 1R

	WC	TUBS	SINKS	SHOWER	CLOTHES WASHER	DISH WASHER	BIDET	URINAL	FLOOR DRAINS	HOSE BIBS
Basement										
1st. Floor										
2nd. Floor										
3rd. Floor										
4th. Floor										

Remarks \_\_\_\_\_

Cost **ONLY** Req'd if application is not filed under bldg permit    If amendment to issued permit

Cost of Work \_\_\_\_\_ Permit Fee \_\_\_\_\_ Amend Cost \_\_\_\_\_ Amend Fee \_\_\_\_\_

Receipt. # \_\_\_\_\_ Receipt. # \_\_\_\_\_

The undersigned applicant in accordance with the CSBC hereby applies for an plumbing permit as listed above and agrees to conform to the CSBC and to promptly give notice to the Division of Building Inspection when the work is ready and accessible for all required inspections.

**Permit Holder Signature [Req'd]** \_\_\_\_\_ **Date** \_\_\_\_\_