

TOWN OF GREENWICH
Town Hall - 101 Field Point Rd.,
Greenwich, CT 06830
Division of Building Inspection, DPW
203-992-8910 Fax 203-622-7848

Permit No. _____
Date Issued _____

Building Permit Application NEW BUILDING OR STRUCTURE

Project Address: _____ Parcel ID: _____

Property Owner: _____ Address: _____

Email: _____ Phone: _____

If LLC - Principal's Name _____ Phone _____

Permit Holder [Contractor]: _____ CT License No. _____

Address : _____

Email: _____ Phone: _____

Lessee [Tenant]: _____ Email: _____

BUILDING / STRUCTURE INFORMATION

Section of Town
 Central Outlying Byram Pemberwick Glenville Cos Cob Riverside Old Greenwich

Proposed Use _____ No. of Living Units _____

No. of Stories _____ No. of Rooms _____ No. of Bathrooms _____

DESCRIPTION OF WORK : _____

BUILDING CODE INFORMATION
<input type="checkbox"/> 2021 IBC [2022 CSBC]
<input type="checkbox"/> 2021 IRC [2022 CSBC]
Use Group _____
Const Type _____
Sprinkler Sys. <input type="checkbox"/> Yes <input type="checkbox"/> No
Threshold Bldg. <input type="checkbox"/> Yes <input type="checkbox"/> No
Flood Zone <input type="checkbox"/> Yes <input type="checkbox"/> No
Elevation _____

Value of Work: _____

Permit Fee: _____

State Fee: _____

Total Fee Due: _____

Check No. _____

Receipt No. _____

Pay Type Check Credit Cash

Reviewed by: _____

Date _____

Permit pick-up requested

Mail permit

Type of Sewer Disposal - Town Septic

Tax Stamp

BUILDING PERMIT APPLICATION
FOR
NEW BUILDING OR STRUCTURE

THE UNDERSIGNED PROPERTY OWNER, BEING DULY SWORN, DEPOSES AND SAYS:

1. That he/she is the current owner of the premises described on this application for a building permit.
2. In accordance with the CT General Statutes, that the below said agent / permit holder is duly authorized on behalf of the owner to execute and complete this application.
3. That the work described in this application is duly authorized by the current owner.
4. That the undersigned agent / permit holder is hereby designated as the owner's representative with whom the Division of Building Inspection, DPW may deal with in respect to the work under this application.
5. That this authorization shall continue unless revoked by the owner by giving written notice of revocation to the Division of Building Inspection, DPW.

PERMIT HOLDER {contractor]

CURRENT OWNER NOTARIZED AUTHORIZATION

CT REG. / LICENSE No. _____

Owner's Name (print) _____

Name (print) _____

Signature _____

Signature _____

Subscribed and sworn to, and before me on this

Phone No. _____

_____ day of _____, 20____

Permit Pick-up Requested Mail Permit

Notary Public signature:

Contact Name (print) _____

Email: _____

AMENDMENTS TO AUTHORIZED AGENT / PERMIT HOLDER

#1 PERMIT HOLDER [contractor]

#2 PERMIT HOLDER [contractor]

CT REG. / LICENSE No. _____

CT REG. / LICENSE No. _____

Name (print) _____

Name (print) _____

Signature _____

Signature _____

Phone No. _____

Phone No. _____

Permit Pick-up Requested Mail Permit

Permit Pick-up Requested Mail Permit

Contact Name (print) _____

Contact Name (print) _____

Email: _____

Email: _____