



TOWN OF PORTLAND

P.O. Box 71, 33 East Main Street, Portland, CT 06480

Phone: 860-342-6727 Fax: 860-342-6787

BUILDING PERMIT APPLICATION

WORK NOT TO COMMENCE UNTIL PERMIT IS OBTAINED.

Permit number _____

Project Location Information:

Property Address _____ Parcel ID _____ Map ____ Lot ____

Property Owner's Name _____ Phone _____ Cell _____

Property Owner's Mailing Address _____ Email Address _____

Applicant /Contractor Information:

CRS# (if applicable) _____

Name/Business Name _____ Phone _____ Cell _____

Applicant/Contractor's Mailing Address _____ Email Address _____

CT DCP License # _____ Proof of Worker's Compensation Coverage (Form 7-A, 7-B, 7-C)

Certification I hereby certify that I am: the property owner or the authorized agent of the owner of record for the referenced property for the proposed work as described on this application and accompanying documents. I agree to conform and abide by all applicable laws, codes, ordinances, and regulations adopted by the Town of Portland. All information contained within is true and accurate to the best of my knowledge and belief.

Signature _____ Date _____

Permit Type Commercial Residential Building Electrical Plumbing Mechanical

Description of work _____

Check applicable Septic system Well water Town sewer Town water

Proposed use _____ Occ. Load _____ Estimated Cost \$ _____

Number of rooms _____ Bedrooms _____ Bathrooms _____ 3 or more family Yes No
If yes, route to F.M.

Attach plans for floor plan changes or equipment location.

B _____	TE _____
Z _____	CO _____
S _____	
Permit Fee Total \$ _____	
Date Paid: _____	
Cash Check# _____	

**Fees calculated at \$25 for the first thousand, \$15 for each thousand thereafter Effective 4/1/2020*

Other department approval CHD _____ Zoning _____ FM _____ DPW _____ IW _____
(Circle applicable, initial when approved)

Application Approved Denied _____
Building Official _____ Date _____

Date received stamp

Tax stamp



TOWN OF PORTLAND

P.O. Box 71, 33 East Main Street, Portland, CT 06480

Phone: 860-342-6727 Fax: 860-342-6787

BUILDING PERMIT APPLICATION

You, the owner, agent, or applicant, are responsible to call the building department at 860-342-6727 or 860-342-6728 for all required inspections, including final inspection, prior to occupancy.

MINIMUM REQUIRED INSPECTIONS:

Soil/footings: Forms in place prior to placing concrete

Foundations: Rebar inspection

Backfill: Forms stripped, water-proofing applied, and drains installed

Underslab: Rough electrical, mechanical, and plumbing with appropriate tests
Vapor barrier in place prior to concrete placement

Electrical, plumbing, and mechanical: Rough-in, tests, and fire-stopping

Framing: Have truss specification sheets on site, also includes fire/draft blocking and stopping systems

Insulation: Prior to drywall

Acoustical ceiling: Grid installed, fixtures supported, all trades utilizing space completed, prior to installation of tiles.

Final inspection: All trade work completed and final testing of systems has been witnessed and approved by the Authority Having Jurisdiction.

Other comments: _____

CERTIFICATION OF COMPLIANCE/USE This is to certify that the work on this structure as described in this permit is complete and in substantial compliance with the Connecticut State Building Code as amended in 2018.

Property Address _____ Permit Number _____

Building Official

Date of Occupancy or Use