TOWN OF MIDDLEBURY

1212 Whittemore Road
Middlebury, Connecticut 06762
DEPARTMENT OF BUILDING, HEALTH & LAND USE

APPLICATION FOR ELECTRICAL PERMIT

Date: _____ Permit # _____

For Building Department Use Only

Estimated Cost of Construction: $_____ Permit Fee: $_____
(Labor and Materials)

Tax Collector: _____ Date: _____

Property Address: _____ Map: _____ Lot: _____

Property Owner: _____ Tel.: _____

Mailing Address: _____
No. & Street *City/Town* *State* *Zip*

Name of Electrical Contractor: _____ Tel.: _____

Address: _____
No. & Street *City/Town* *State* *Zip*

License #: _____ Type: _____ Exp. Date: _____

DESCRIPTION OF WORK *[Check items which apply]*

☐ New Construction ☐ Addition ☐ Alteration ☐ Accessory Bldg ☐ Swimming Pool ☐ Security

Electrical design based on ☐ NEC 2014 ☐ IRC 2012 Electrical Chapters

Item	KW	No.
☐ Electric Service	CRS#	
☐ Electric Range		
☐ Electric Cooktop		
☐ Electric Ovens		
☐ Air Conditioning		
☐ Lighting Circuits		
☐ H.V.A.C.		

Item	KW	No.
☐ Water Heater		
☐ Electric Dryer		
☐ Clothes Washer		
☐ Oil Burner		
☐ Dishwasher		
☐ Appliance Circuits		
☐ Other		

NOTE: For non-residential projects, attach itemized schedule of other electrical loads

CERTIFICATION; I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make this application as an authorized agent. All information contained in the foregoing Application for Building Permit is true and accurate to the best of my knowledge and belief.

Printed Name of Applicant _____ *Date* _____

Signature of Applicant _____ *Telephone* _____

For Building Department Use

APPROVED

BO / ABO _____

Date _____

TOWN OF MIDDLEBURY

1212 Whittemore Road
Middlebury, Connecticut 06762
DEPARTMENT OF BUILDING, HEALTH & LAND USE

APPLICATION FOR ELECTRICAL PERMIT

Date: _____ Permit # _____

For Building Department Use Only

Estimated Cost of Construction: $_____ Permit Fee: $_____
(Labor and Materials)

Tax Collector: _____ Date: _____

Property Address: _____ Map: _____ Lot: _____

Property Owner: _____ Tel.: _____

Mailing Address: _____
No. & Street *City/Town* *State* *Zip*

Name of Electrical Contractor: _____ Tel.: _____

Address: _____
No. & Street *City/Town* *State* *Zip*

License #: _____ Type: _____ Exp. Date: _____

DESCRIPTION OF WORK *[Check items which apply]*

☐ New Construction ☐ Addition ☐ Alteration ☐ Accessory Bldg ☐ Swimming Pool ☐ Security

Electrical design based on ☐ NEC 2014 ☐ IRC 2012 Electrical Chapters

Item	KW	No.
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☐ H.V.A.C.		

Item	KW	No.
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☐ Clothes Washer		
☐ Oil Burner		
☐ Dishwasher		
☐ Appliance Circuits		
☐ Other		

NOTE: For non-residential projects, attach itemized schedule of other electrical loads

CERTIFICATION: I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make this application as an authorized agent. All information contained in the foregoing Application for Building Permit is true and accurate to the best of my knowledge and belief.

For Building Department Use

APPROVED

_____ *BO / ABO*

_____ *Date*

_____ *Printed Name of Applicant* _____ *Date*

_____ *Signature of Applicant* _____ *Telephone*

TOWN OF MIDDLEBURY

1212 Whittemore Road
Middlebury, Connecticut 06762
DEPARTMENT OF BUILDING, HEALTH & LAND USE

APPLICATION FOR MECHANICAL PERMIT (TANK REMOVAL) (USING 2012 INTERNATIONAL MECHANICAL CODE)

Date: _____ Permit # _____

For Building Department Use Only

Estimated Cost of Construction: $_____ Permit Fee: $ 100.00
(Labor and Materials)

Tax Collector: _____ Date: _____

Property Address: _____ Map: _____ Lot: _____

Property Owner: _____ Tel.: _____

Mailing Address: _____
No. & Street *City/Town* *State* *Zip*

Name of Heating Contractor: _____ Tel.: _____

Address: _____
No. & Street *City/Town* *State* *Zip*

License #: _____ Class: _____ Exp. Date: _____

DESCRIPTION OF WORK *[Check items which apply]*

☐ New Construction ☐ Addition ☐ Alteration ☐ Accessory Bldg ☐ Swimming Pool

TANK REMOVAL	DATE OF REMOVAL

☐ Gas Fired ☐ Oil Fired ☐ Air Conditioning

☐ Water Heater ☐ Domestic Coil Boiler ☐ Other _____

Chimney Flue Size _____

CERTIFICATION; I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make this application as an authorized agent. All information contained in the foregoing Application for Heating Permit is true and accurate to the best of my knowledge and belief.

For Building Department Use

APPROVED

_____ *Printed Name of Applicant* _____ *Date* _____ *BO / ABO*

_____ *Signature of Applicant* _____ *Telephone* _____ *Date*

TOWN OF MIDDLEBURY

1212 Whittemore Road
Middlebury, Connecticut 06762
DEPARTMENT OF BUILDING, HEALTH & LAND USE

APPLICATION FOR MECHANICAL PERMIT
(USING 2012 INTERNATIONAL MECHANICAL CODE)

Date: _____ Permit # _____

For Building Department Use Only

Estimated Cost of Construction: $_____ Permit Fee: $_____
(Labor and Materials)

Tax Collector: _____ Date: _____

Property Address: _____ Map: _____ Lot: _____

Property Owner: _____ Tel.: _____

Mailing Address: _____
No. & Street *City/Town* *State* *Zip*

Name of Heating Contractor: _____ Tel.: _____

Address: _____
No. & Street *City/Town* *State* *Zip*

License #: _____ Class: _____ Exp. Date: _____

DESCRIPTION OF WORK *[Check items which apply]*

☐ New Construction ☐ Addition ☐ Alteration ☐ Accessory Bldg ☐ Swimming Pool

☐ Gas Fired ☐ Oil Fired ☐ Air Conditioning
☐ Water Heater ☐ Domestic Coil Boiler ☐ Other _____

Chimney Flue Size _____

CERTIFICATION; I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make this application as an authorized agent. All information contained in the foregoing Application for Heating Permit is true and accurate to the best of my knowledge and belief.

For Building Department Use

APPROVED

_____ *Printed Name of Applicant* _____ *Date* _____ *BO / ABO*

_____ *Signature of Applicant* _____ *Telephone* _____ *Date*

TOWN OF MIDDLEBURY

1212 Whittemore Road
Middlebury, Connecticut 06762
DEPARTMENT OF BUILDING, HEALTH & LAND USE

APPLICATION FOR ROOFING PERMIT
ONE- AND TWO-FAMILY DWELLING – RESIDENTIAL
(USING 2012 INTERNATIONAL RESIDENTIAL CODE)

Date: _____ Permit # _____

To be completed by Building Department

Estimated Cost of Construction: $_____ Permit Fee: $_____
(Labor and Materials)

Tax Collector: _____ Date: _____

Property Address: _____ Map: _____ Lot: _____

Property Owner: _____ Tel.: _____

Mailing Address: _____
No. & Street *City/Town* *State* *Zip*

Name of Roofing Contractor: _____ Tel.: _____

Address: _____
No. & Street *City/Town* *State* *Zip*

License #: _____ Type: _____ Exp. Date: _____

DESCRIPTION OF WORK *[Check items which apply]*

☐ 1-Family Dwelling ☐ 2-Family Dwelling ☐ Detached Garage ☐ Accessory Bldg

Roof Type ☐ Flat/Low-Slope ☐ Pitched – Slope _____ : 12 Exist. No. Layers _____

Exist. Roof Cover ☐ Shingle ☐ Built-up ☐ M.B.R. ☐ Other _____

Sheathing Type: _____ ☐ Replace all ☐ Re-use all ☐ Patch as required

New Roof Cover ☐ Shingle ☐ Built-up ☐ M.B.R. ☐ Other _____

Gutters ☐ Aluminum ☐ Copper ☐ Wood ☐ Other _____

CERTIFICATION; I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make this application as an authorized agent. All information contained in the foregoing Application for Heating Permit is true and accurate to the best of my knowledge and belief.

For Building Department Use

APPROVED

_____ *Printed Name of Applicant* _____ *Date* _____ *BO / ABO*

_____ *Signature of Applicant* _____ *Telephone* _____ *Date*

TOWN OF MIDDLEBURY

1212 Whittemore Road
Middlebury, Connecticut 06762
DEPARTMENT OF BUILDING, HEALTH & LAND USE

APPLICATION FOR PLUMBING PERMIT
(USING 2012 INTERNATIONAL PLUMBING CODE)

Date: _____ Permit # _____

For Building Department Use Only

Estimated Cost of Construction: $_____ Permit Fee: $_____
(Labor and Materials)

Tax Collector: _____ Date: _____

Property Address: _____ Map: _____ Lot: _____

Property Owner: _____ Tel.: _____

Mailing Address: _____
No. & Street *City/Town* *State* *Zip*

Name of Plumbing Contractor: _____ Tel.: _____

Address: _____
No. & Street *City/Town* *State* *Zip*

License #: _____ Class: _____ Exp. Date: _____

DESCRIPTION OF WORK *[Check items which apply]*

☐ New Construction ☐ Addition ☐ Alteration ☐ Accessory Bldg ☐ Swimming Pool

CERTIFICATION; I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make this application as an authorized agent. All information contained in the foregoing Application for Building Permit is true and accurate to the best of my knowledge and belief.

For Building Department Use

APPROVED

_____ *Printed Name of Applicant* _____ *Date* _____ *BO / ABO*

_____ *Signature of Applicant* _____ *Telephone* _____ *Date*