



City of Danbury

155 Deer Hill Ave
Danbury, CT 06810

For Questions Please Contact the Permit Office at (203) 796-1653

Application # _____

PERMIT APPLICATION SHEDS

Use the following Table for departmental areas of the Application that need to be completed for your specific project.

*****Required Responsible Departments*****

Type of Project	Septic	Zoning	Building
Shed	Yes	Yes	Yes

Table to be used as a guide only. Department can require permit at there discretion.

Certain permits will require different types of map and drawings to accompany their submission. The following is a list of Plan requirements by Permits.

Type of Project	Septic	Zoning	Building
Shed.	Sub-surface Disposal Plan	Map showing property lines and all structures on site. An A2 survey my be required	2 copies of Building Plans

NOTE:

- All Structures will require Certificates of Zoning Compliance.
- All Structures cannot exceed 15' in height.
- Structures greater than 600 sq.ft. will require a foundation.
- Structures greater than 200 sq.ft. require building permits and Certificates of Approval.
- No detached structures can be located in the front yard.

Assessors lot #: _____ Town Clerk Map #: _____ Town Clerk Lot #: _____

Property Address: _____

Application Date: _____ Current Use of Property: _____

Zone Code: _____ Total Estimated Construction Cost: _____

Work Description: (Size and location on structure): _____

Please list the following information for all Professionals and Contractors:

**NAME, LICENSE NO., COMPANY, TELEPHONE, FAX, E-MAIL.*

General Contractor / Construction Manager: Name: _____

Address _____

Signature: _____ Phone #: _____ Fax #: _____

Property Owner or Owner's Agent (letter required): _____

Signature _____ Phone #: _____ Fax # _____

***** DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY! *****

Code Enforcement Actions Pending? YES NO

Taxes, Water or Sewer Overdue? YES NO

ZONING INFO: *Please see Sheet D for Setback Information for Zone Requirements*

Is project located in a Wetland or Watershed area? (Yes) (No)

If yes explain: _____

Height of Bldg.: _____ Shed size (L-W): _____ Dwelling Building Coverage (sq.ft.) _____

Lot Size (sq.ft.) _____ Total Site Building Coverage (sq.ft.) _____

Front Yard Setbacks: _____ Side Yard Setbacks: _____, _____ Rear Yard Setbacks: _____

HEALTH DEPT INFO: Septic *Please see Sheet E for separating distance and other requirements.*

Please indicate if property has any one of the following: (Pond, River, Stream, Pool or any other notable variations in terrain): _____

Public Water available: (Yes) (No) Public Sewer available: (Yes) (No)

Existing structure served by: (Well) (Septic System) (Sewer) (Community Well)

Authorized Signature: _____ *Date:* _____

BUILDING INFO: *Please see Sheet C for Conditions for Permit and Inspection Order.*

*Please complete attached Workman's Compensation Form

Footing Widths: _____ Footing Thickness: _____ Footing Material: _____

Interior Wall Finish: _____ Interior Wall Thickness: _____ Floors: _____

Sill Size: _____ Floor Joist Size: _____ Lally Columns: _____

Plate Size: _____ Ceiling Joist Size: _____ Roof rafters Size: _____

Roof Type (Hip, Shed, Etc.): _____ Roof Pitch: _____ Roof Covering: _____

Building Officials Signature: _____ *Date:* _____