



**City of Danbury**  
155 Deer Hill Ave  
Danbury, CT 06810

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

Application # \_\_\_\_\_

## GENERAL BUILDING PERMIT

Free Standing Applications:

Roof, Windows, Repair, Fire Damage, Interior Alt: No Use Change

Assessors lot #: \_\_\_\_\_ Town Clerk Map #: \_\_\_\_\_ Town Clerk Lot #: \_\_\_\_\_

Property Address \_\_\_\_\_

Zone Code: \_\_\_\_\_ Application Date: \_\_\_\_\_

Application Status (typ. Plan Review): \_\_\_\_\_

Application Type: (list all appropriate application types) \_\_\_\_\_

Total Estimated Construction Value: \_\_\_\_\_

Tenant Number/Name: \_\_\_\_\_

Current Use Property: \_\_\_\_\_

Total Square Footage: \_\_\_\_\_ Private or Public Building: \_\_\_\_\_

Work Description:

**\*Any Commercial Structure larger than 5,000 sq.ft. will require that BOCA Plan Review Record be submitted with this application.**

**DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY**

Code Enforcement Actions Pending? YES NO Describe: \_\_\_\_\_

Taxes, Water or Sewer Overdue? YES NO Describe: \_\_\_\_\_

APPLICATION NUMBER ASSIGNED? \_\_\_\_\_

**BUILDING INFO:**

Footing Widths: \_\_\_\_\_ Footing Thickness: \_\_\_\_\_

Foundation Walls Depth \_\_\_\_\_ Foundation Walls Thickness: \_\_\_\_\_

Footing Material: \_\_\_\_\_ Foundation Wall Material \_\_\_\_\_

Exterior Wall finish: \_\_\_\_\_ Exterior Wall Thickness: \_\_\_\_\_

Interior Wall Finish: \_\_\_\_\_ Interior Wall Thickness: \_\_\_\_\_

Insulation Type: \_\_\_\_\_ Insulation R Value Walls: \_\_\_\_\_

Insulation R Value Floor: \_\_\_\_\_ Insulation R Value Ceiling: \_\_\_\_\_

Type of Ceiling: \_\_\_\_\_ Floors: \_\_\_\_\_ Sill Size \_\_\_\_\_

Floor Joist Size \_\_\_\_\_ Lally Columns: \_\_\_\_\_ Plate Size: \_\_\_\_\_

Ceiling Joist Size \_\_\_\_\_ Roof rafters Size \_\_\_\_\_ Type of Heat \_\_\_\_\_

# of Chimneys: \_\_\_\_\_ Flue Size: \_\_\_\_\_ Roof Type (Hip, Shed, Etc.): \_\_\_\_\_

Roof Pitch: \_\_\_\_\_ Roof Covering: \_\_\_\_\_ Finished Basement Height: \_\_\_\_\_

Height of 1<sup>st</sup> Floor: \_\_\_\_\_ 2<sup>nd</sup> Floor: \_\_\_\_\_ 3<sup>rd</sup> Floor: \_\_\_\_\_ 4<sup>th</sup> Floor: \_\_\_\_\_

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

General Contractor / Construction Manager: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Property Owner \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mechanical/HVAC Contractor: \_\_\_\_\_ License # \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Zoning Sign Off:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Building Official Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_