

**TRUMBULL BUILDING
DEPARTMENT**

buildinginfo@trumbull-ct.gov

Phone: 203.452.5020

Fax: 203.452.5093

***Town of Trumbull
Connecticut***



Town Hall
5866 Main Street
Trumbull, Connecticut 06611

Office Hours 7:30 AM – 4:00 PM
Permit Hours 7:30 - 10:00 AM

Please fill out in ink

APPLICATION FOR BUILDING PERMIT

Date: _____

House Number: _____ Lot Number: _____ Street: _____

Owner: _____ Phone: _____

Owner's Address: _____
Street City State

Email address: _____

Construction: Residential: ____ Commercial: ____ New: ____ Addition: ____ Remodel: ____ Pre-existing: ____ Foundation Only: ____
Use Group: _____ Type of Construction: _____ Edition of Code: _____ Design occupant load: _____
Size of Building _____ Number of Floors _____ Floor Area _____ Structure: Frame: ____ Masonry: ____
Automatic Sprinkler: Yes ____ No: ____

Description: _____

I estimate the value of this work will be: \$ _____ Permit Fee \$ _____

Contractor's Name: _____ License #: _____ Type: _____

Address: _____ Email: _____

Phone: _____ Cell Phone: _____ Fax: _____

Architect's Name: _____ License #: _____

Address: _____ Email: _____

Phone: _____ Cell Phone: _____ Fax: _____

I HEREBY MAKE APPLICATION FOR A PERMIT TO DO WORK IN ACCORDANCE WITH THE CONNECTICUT STATE BUILDING CODE
IN EFFECT AT THE TIME OF APPLICATION AND WITH ANY AND ALL REGULATIONS OF THE TOWN OF TRUMBULL.

Applicant's Signature: _____ Applicant's Printed Name: _____

Address: _____ Phone: _____

THE PROPOSED WORK IS AUTHORIZED BY THE OWNER-IN-FEE AND THE UNDERSIGNED IS AUTHORIZED BY THE OWNER-IN-FEE
TO MAKE THE APPLICATION FOR BUILDING PERMIT.

Agent of owner's signature: _____ Agent of Owner's Printed Name: _____

PERMIT: _____
DATE: _____

Address: _____

Description of Work: _____

Reviewed By: _____

A CERTIFICATE OF INSURANCE IS REQUIRED FOR ALL CONTRACTORS

Departmental Approval for Building Permit

Required

() Planning & Zoning _____ Date: _____

() Town Commission _____ Date: _____

() Z.B.A. Letter: _____ Date Recorded: _____

() Engineering _____ Date: _____

() Inland Wetlands _____ Date: _____

Flood Plain? Yes: ____ Flood Plain Elevation Certificate Required? Yes: ____

() W.P.C.A. _____ Date: _____

City Water: ____ Sewer: ____

() Health Department _____ Date: _____

Well: ____ Septic: ____

() Fire Marshal _____ Date: _____

() Tax Collector

Insulation documents required

() RES check

() MEC check

Approvals for the Certificate of Occupancy are also required.