



**TOWN OF HAMDEN
BUILDING DEPARTMENT**

Hamden Government Center

2750 Dixwell Avenue

Hamden, CT 06518

Tel: (203) 287-7160

Fax: (203) 287-7155

A GUIDE FOR OBTAINING A BUILDING PERMIT

REQUIREMENTS:

Original Zoning Compliance

Tax Collector sign off

QVHD – Septic Systems

Engineering Department-city sewer systems

Fire Marshal sign off where applicable

Building Department Requirements

Building permit application completely filled out.

Commercial projects need architect's stamp and Engineer's stamp where applicable.
Home Improvement Contractor license number & New Home license number and copy.
Site plan.

2 sets of construction plans:

Construction plans are to show:

- 1.) Foundation drawings showing footing depths, lally column spacing and girder sizes and type of foundation and thickness.
- 2.) All framing details, type and species of lumber sizes, spans and spacing.
- 3.) Full section drawing.
- 4.) Show the four elevations.

Worker's Compensation Certificate

Combustion air form filled out

Before you dig #BUD

Building Permits Issued 8:30-10:30 am only



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APPLICATION FOR BUILDING PERMIT

RESIDENTIAL []

COMMERCIAL []

Permit No.	Receipt No.	Check No.	Date:		
Job Location Address:					
Owner's Name:					
Street Address:					
Town:		State:	Zip:		
Area Code & Home Ph. No.	Work Ph. No.	Fax:			
Contractor Name:					
Address:	Town:	State:	Zip:		
Phone No.	Work Phone:	Fax:			
Home Improve Reg No.	New Home Cont Lic #	Major Cont Lic #			
Name of Architect	Lic #	Name of Eng.	Lic #		
Is this a change of use?	Yes No	Type of Const	Use Group		
Building sprinkler	separated	non separated	mixed use		
Describe the Work To Be Performed					
Construct new []	alter []	addition []	reroof []		
The Following Square Footage Information Shall Be Filled In Accurately					
First Floor	Sq. Ft.	Second Floor	Sq. Ft.	Third Floor	Sq. Ft.
Basement	Sq. Ft.	Habitable Attic	Sq. Ft.	Garage	Sq. Ft.
Bonus Room	Sq. Ft.	Finished Basement	Sq. Ft.	Deck	Sq. Ft.
Mixed Use:	Height of Building in ft.		In Stories:		
Estimated Cost Less Mechanicals:			Other:		
Electrical Est. Cost	HVAC Est. Cost		Plumbing Est. Cost		
Tax Collector:					

PLEASE COMPLETE AND SIGN THE BACK OF THIS FORM.

I certify that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and/or I have been authorized to make this application as an authorized agent, we agree to conform to all applicable laws, regulations and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.

Printed Name of Owner _____

Signature of Owner _____

Date _____

Printed Name of Authorized Agent _____

Signature of Authorized Agent _____

Required before a permit is issued:

- Copy of license Workman's Compensation Zoning where required
 Mechanical cards where required

BUILDING DEPARTMENT USE ONLY

Fees \$25/1st 1,000 - \$18/thereafter - mechanicals \$18/1,000

Date _____

Const Value _____ /fee _____ **elect** _____ /fee _____

HVAC _____ /fee _____ **plmbg** _____ /fee _____ **other** _____ /fee _____

Amended Fee _____ **Date** _____

Total Fee _____

TOWN OF HAMDEN
BUILDING DEPARTMENT APPROVAL