

TOWN OF SCOTLAND

Building Department - Scotland Town Hall 9 Devotion Road - PO Box 288 - Scotland, CT 06264 (860) 456-7797 ext. 101

Building/Zoning Permit Application

Job Address:		Date:		
Owner:	Contra	Contractor:		
Mailing Address:		Mailing Address:		
Phone:C	Cell: Phone	:	Cell:	
Email:	Email:			
	Licens	e Type: Lic	cense #:	
of Connecticut and Town of Sc am authorized to make applica to enter the property to do re Section 110, A CERTIFICATE OF Applicant Signature:	sed work will conform to the State Buotland and further attest that the prostion for a permit for such work as desequired inspections. I understand to coccupancy/compliance is required.	posed work is authorize cribed above. I grant hat under the Internal RED FOR ALL PERMITE	zed by the owner in fee and that I permission to the Building Official ational/Residential Building Code, S ISSUED. Date:	
Construction Value: \$				
	FOR OFFICE USE C	ONLY:		
Estimated cost of Proposed Wo	ork: \$			
Permit #:	Permit fee: \$	Check #	Cash:	
Building Official Approval:		Date:		
Zoning Officer Approval :		Date:		
Fire Marshall Approval if Applic	cable:	Date:		
Health Dept. Approval: :		Date:		