



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

Roofing and Siding Permit Application

Job Address: _____ Date: _____
Owner: _____ Contractor: _____
Mailing Address: _____ Mailing Address: _____
Phone: _____ Cell: _____ Phone: _____ Cell: _____
Email: _____ Email: _____
License Type: _____ License #: _____

☐ Roofing Overlay

☐ Strip and Reroof

☐ Siding

Type: _____

Number of Squares: _____

Construction Value: \$ _____

Building(s) work is occurring: _____

I hereby certify that the proposed work will conform to the State Building code and all other codes as adopted by the State of Connecticut and Town of Scotland and further attest that the proposed work is authorized by the owner in fee and that I am authorized to make application for a permit for such work as described above. I grant permission to the Building Official to enter the property to do required inspections. I understand that under the International/Residential Building Code, Section 110, **A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS REQUIRED FOR ALL PERMITS ISSUED.**

Applicant Signature: _____

Date: _____

COPY OF LICENSE REQUIRED (Other than Homeowner Applicant)

Construction Value: \$ _____

FOR OFFICE USE ONLY:

Estimated cost of Proposed Work: \$ _____

Permit #: _____ Permit fee: \$ _____ Check # _____ Cash: _____

Building Official Approval: _____ Date: _____