AFFIDAVIT

Date:	General Building Permit #
Address:	
Description:	

Permit #	Permit Type	Permitted Value	Permit Fee Paid	Value of Add. Work
	Building	\$	\$	\$
	Electrical			
	Plumbing			
	HVAC			
	Sprinkler			
	Fire Alarm			
TOTAL 0		•	•	
TOTALS		\$	\$	\$

Total Additional Value rounded up to nearest \$1,000 \$_____ x \$.01726 = \$_____

State of Connecticut County of Hartford

I,	of	a	am the
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(check one) \Box Owner \Box Agent \Box Contractor do attest that the work performed under the permit(s) listed above, issued by the Building Inspection Division of the Town of West Hartford, being duly sworn to make oath and say that the actual cost of the completed work authorized under said permit is (Total Value of Construction).

Signed: _____

Subscribed and sworn to before me this _____ day of _____ A.D. 2020

NOTARY SIGNATURE