

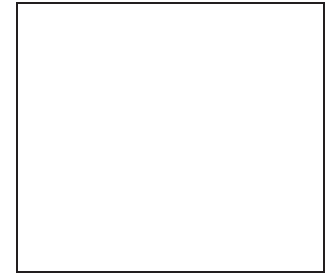
Town of West Hartford RESIDENTIAL SUMP PUMP Permit Application

Application Date: _____ Application #PRSUMP____ 2020 _____

___ Job includes installation of back flow preventers
___ Job **DOES NOT** include the installation of back flow preventers

Required Information:

Is this installation part of the MDC program? YES NO



Entered by: _____

___ Sump pump manufacturer's installation instructions including type
Of check valve and shutoff valve

___ Plot plan indicating the sump pump discharge point and
the nearest property line.

___ Manufacturer's installation instructions for battery-back up system

NOTE: The installation of the sump pump must be installed in accordance with all applicable codes and standards, including but not limited to, sections R401.3.1 and P3007 of the 2015 IRC portion of the 2018 State of Connecticut Building Code.

Occupancy Type:

___ One Family Home ___ Two Family Home

Description of Work _____

Value of Work \$ _____ **Permit Fee \$** _____ **Check #** _____

JOB LOCATION: _____

NAME OF TENANT IF A BUSINESS: _____

Property Owner Name _____

Property Owner Address _____ City _____ State _____ Zip Code _____

Phone _____ Fax _____ Cell _____ Email Address _____

Applicant's Name _____

Business Name _____ Registration/Lic# _____ Exp Date _____

Address _____ City _____ State _____ Zip Code _____

Phone _____ Fax _____ Cell _____ Email Address _____

Contractor's Name (if different than applicant) _____

Business Name _____ Registration/Lic# _____ Exp Date _____

Address _____ City _____ State _____ Zip Code _____

Phone _____ Fax _____ Cell _____ Email Address _____

TO THE BUILDING INSPECTION DIVISION, TOWN OF WEST HARTFORD, CT:

I, _____ the undersigned hereby agree to conform to all the requirements of the laws of the State of Connecticut and the Ordinances of the Town of West Hartford and to notify the Building Inspection Division of any alteration in the plans or specifications.

PLEASE CHECK ONE OF THE BELOW BOXES:

CERTIFICATION: I hereby 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 I have been authorized to make this application as an authorized agent, and 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. No work shall be started until the applicant has received a signed, approved permit.

Signature of Property Owner **AND** Signature of Authorized Agent

Print Name of Property Owner **AND** Print Name of Authorized Agent

This information given to the Town is only in support of permit application. No work can start until applicant has received the signed approved permit.

CURRENT EDITION OF BUILDING CODE IN EFFECT IS 2018 CONNECTICUT STATE BUILDING CODE

PLEASE DO NOT WRITE BELOW THIS LINE. FOR TOWN USE ONLY.

Building Approval _____ *Date of Building Approval* _____

Zoning Approval _____

Distance to the nearest storm drainage _____

Doc: Sump Pump Application

Revised 06/2020

SUMP PUMP PERMIT INFORMATION

Application # PRSUMP2022-_____

Please fill in the following.

ADDRESS: _____

____ Job includes installation of back flow preventers

____ Job **DOES NOT** include the installation of back flow preventers

Is this installation part of the MDC program? YES NO

SUBMIT THE FOLLOWING INFORMATION WITH APPLICATION:

- Sump pump manufacturer’s installation instructions including type of check valve and shutoff valve
- Plot plan indicating the sump pump discharge point and the nearest property line.
- Manufacturer’s installation instructions for battery-back up system if applicable

NOTE: The installation of the sump pump must be installed in accordance with all applicable codes and standards, including but not limited to, sections R401.3.1 and P3007 of the 2015 IRC portion of the 2018 State of Connecticut Building Code.

Applicant _____ Signature _____ Date _____