

# MINIMUM CONSTRUCTION CRITERIA\*

(Please Print or Type All Entries)

1. \_\_\_\_\_  
Date Based on the 2018 CT STATE BUILDING CODE
2. \_\_\_\_\_  
Street Number Street Address of Proposed Work
3. \_\_\_\_\_  
Owner's Name (as it appears in the Land Records)
4. \_\_\_\_\_  
Owner's Street Address Town State Zip Code
5. \_\_\_\_\_  
Home Phone Work Phone Cell Phone Fax #
6. \_\_\_\_\_  
Applicant's Name
7. \_\_\_\_\_  
Applicants Street Address Town State Zip Code
8. \_\_\_\_\_  
Home Phone Work Phone Cell Phone Fax #
9. \_\_\_\_\_ 10. \_\_\_\_\_  
Contractor/General Contractor Registration #
11. Does building have sprinklers? \_\_\_yes \_\_\_no Design Occupant Load of proposed area \_\_\_\_\_  
Number of Exits Required \_\_\_ Number of Exits Provided \_\_\_ Number of HC Accessible Exits \_\_\_\_\_  
Travel Distance Allowable \_\_\_\_\_ Travel Distance Actual \_\_\_\_\_

12. DESCRIPTION OF WORK \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 13. Project Type

- New construction  Repair/Replacement  Change of Use  
 Addition  Interior Demolition  Chapter 34  
 Alteration  Relocation  Designated Historic Structure  
 International Existing Building Code

14. Is structure located in Historical District?  Yes  No

15. Is structure within the 100 year flood plan?  Yes  No

16. Is structure served by private well or private septic Yes  No

17. Construction Type:  IA  IB  IIA  IIB  IIIA  IIIB  IV  
 VA  VB

18. Use Group(s):  A-1  B  H-1  I-1  M  S-1  
 A-2  E  H-2  I-2  S-2  
 A-3  F-1  H-3  I-3  R-1  
 A-4  F-2  H-4  I-4  R-2  U  
 A-5  H-5  R-3  
 R-4

Mixed Use:  Yes  No  Separated  Non-separated

If separated uses, supply listed assemblies with all details on walls and floor/ceiling assemblies.

\*NOTE: THIS IS A SIMPLIFIED LIST OF BASIC INFORMATION TO ASSIST PERMIT APPLICANTS IN SUBMISSION OF CONSTRUCTION DOCUMENTS FOR REVIEW. ADDITIONAL INFORMATION MAY BE REQUIRED.

19. \_\_\_\_\_  
Street Number Property Location Street Address

20. Height of Building: Stories: \_\_\_\_\_ Feet: \_\_\_\_\_

21. Total Gross Square Feet of Building: \_\_\_\_\_

22. List below the gross square footage of each story, above and below grade:

Story	Area in Sq. Ft.	Story	Area in Sq. Ft.	Story	Area in Sq. Ft.
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

23. Architect's Information: (Attach as applicable) License # \_\_\_\_\_

24. Engineers Information: (Attach as applicable) License # \_\_\_\_\_

25. Interior Design: (Attach as applicable) Registration# \_\_\_\_\_

26. Documents Submitted/Attached:

- Site Plan                       Mechanical Plans                       Sprinkler Plans
- Building Plan                       Electrical Plans                       Ansul Plans
- Building Sections                       Plumbing Plans                       Demolition Plans
- Building Elevations                       HVAC Plans                       Other (describe) \_\_\_\_\_
  
- Threshold Review\*
- Authorization of Applicant Other Than Owner                       Manufacturer's Literature
- Statement of Special Inspections\*
- State Traffic Commission Certificate if Building Located on State Road

27. Estimated Cost of Construction: \_\_\_\_\_  
(Value of Labor and Materials)

**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/or 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.

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Signature of Owner/Authorized Agent

Date: \_\_\_\_\_

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