



TOWN OF SUFFIELD
ASSESSOR'S OFFICE
83 Mountain Rd Suffield, CT 06078

Crumbling Foundation Application

Date: _____

Address: _____ Parcel: _____ ID: _____

Year Dwelling Build: _____ Current Owner's Name: _____

Foundation Cracks? Yes No

Foundation Crumbling? Yes No

Finished Basement? Yes No

Can all interior foundation walls be viewed? Yes No

Do you have a licensed Engineer's Report? Yes No

What is your support documentation? _____

Are you currently living in this residence? Yes No

Has the Building Official condemned this structure? Yes No

Has your Insurance Company inspected the dwelling? Yes No

Did they provide you with a report? Yes No

Have you secured written estimates for the cost to cure from a licensed professional? Yes No

What is the written estimate Cost to Cure the foundation problem? _____

Will you allow town officials to inspect the interior of the property? Yes No

Who is the original builder of the property? _____ I don't know

List the names and phone numbers of the professionals you've contacted: _____

Applicant Phone number: _____ E-mail Address: _____

Signature of Applicant: _____

Please provide any documents (Insurance & Engineer Report Estimates) with this application.