



TOWN OF COLUMBIA

323 Jonathan Trumbull Highway, Columbia, CT 06237
(860) 228-0440 FAX: (860) 228-2847

Building & Land Use Department

BUILDING PERMIT APPLICATION FORM

Permit No.: _____

Construction Value: _____

Job Address: _____
(Number) (Street) (Unit)

Detailed Description: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Contractor: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

License Type: _____ License No.: _____ Expiration Date: _____

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 the Town of Columbia 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 and Assessor to enter the property to do the required inspections. I understand that under section 110 of the State Building Code a certificate of occupancy or a certificate of approval is required for all permits issued.

Applicant Signature: _____ Date: _____

Office Use Only

Deed Information

Permit Fees

Map _____ Lot _____ Zone _____ Unique ID _____

Building Fee: _____

Working w/o Permit: _____

State Ed Fee: _____

Zoning Compliance Fee _____

State Zoning Compliance Fee _____ 60.00

Total Fees: _____

Building Official Approval: _____

Approval Date: _____

TYPICAL INSPECTIONS

Every permit that is issued has at least one required inspection to be performed in order to determine substantial compliance with the State Building Code. Your particular project may require additional inspections in addition to the ones listed below.

In general our office will require a minimum of 1-2 days advanced notice for schedule inspections. On occasions the inspection may not be able to be scheduled for several days.

An approved set of construction documents shall be kept at the site of work and shall be open to inspection by the building official or his or her authorized representative.

Separate permits are required for all mechanical, electrical, plumbing and fuel gas work.

Inspection	General Description
Footing	<ol style="list-style-type: none"> 1. On undisturbed soil or approved fill 2. 42" minimum frost protection 3. Forms in place – bottom surface of footings shall not have a slope exceeding 1:10 4. Rebar in place (if applicable), Developed lengths of 20 ft or more of #4 or larger rebar shall be bonded 5. Looking for the presence of ledge, water, frozen material
Deck Piers	<ol style="list-style-type: none"> 1. On undisturbed soil or approved fill 2. 42" minimum frost protection 3. Forms (tubes) in place
Backfill	<ol style="list-style-type: none"> 1. Waterproofing installed 2. Foundation drainage system installed - including discharge piping 3. Anchor bolt spacing 4. Sill plate installed, floor framing may be installed, no floor sheathing to be installed around perimeter
Underslab	<ol style="list-style-type: none"> 1. Vapor barrier installed 2. Insulation installed, if applicable.
Masonry Fireplace Throat & Chimney	<ol style="list-style-type: none"> 1. One flue past the smoke chamber for fireplaces 2. One flue past thimble for masonry chimneys 3. Wood-burning fireplaces shall have gasketed doors and outdoor combustion air
Framing	<ol style="list-style-type: none"> 1. Performed after Rough-in inspections have been approved 2. Constructed in accordance with approved plans
Insulation	<ol style="list-style-type: none"> 1. R-values installed match approved plans 2. Windows and doors match approved plans in size, quantity and U-values 3. Building envelope air tightness and insulation tested for air leakage of less than 7 air changes per hour when tested with a blower door at a pressure of 50 pascals (1 psf)
Certificate of Occupancy	<ol style="list-style-type: none"> 1. Occupiable condition, no furniture in the house, no wet paint 2. Building numbers installed per the Town Ordinance 3. Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage are sealed. 4. Energy efficiency certificate is affixed to the electrical panel 5. All devices (receptacles, switches, smoke detectors, lights, etc.) and utilities installed and operational
Certificate of Approval	<p>A certificate of approval shall be issued indicating substantial compliance for all completed work that requires a building permit but does not require a certificate of occupancy. Such work shall include, but not limited to: re-roofing; re-siding; fences over 6 feet in height; retaining walls over 3 feet in height; and electrical, plumbing and mechanical repairs or alterations performed on the absence of additional work that requires a certificate of occupancy.</p>

APPLICATION for a ZONING PERMIT
TOWN of COLUMBIA

Building Permit number _____

COMPLETE ALL ITEMS IN INK. PEN Incomplete applications will be delayed or returned.

Location of Proposed Work _____

Name of Applicant: _____

Address: _____

Phone # Days _____ Cell phone # _____ e-mail _____

Name of Owner (if different from applicant) _____

Phone # Days _____ Cell phone # _____ e-mail _____

This application is for _____
(Description of proposed project)

Dimensions: _____ ft. # of Stories: _____ Habitable Floor Area: _____ sq ft
(height above grade) (include attic w/habitable space)

Percentage of lot covered by all structures (Total footprint) _____ percent
(footprint (+ garage) of structure 30'x40' etc.)

Distance from Proposed Structure to PROPERTY LINES:
Front _____ ft Rear _____ ft Left Side _____ ft Right Side _____ ft
(DO NOT measure from road edge)

Size of Lot (area) _____ Lot Frontage _____ ft. Is the property within the 100 Year-Flood Plain? Yes No
Subdivision Name _____ Subdivision Lot # _____ Assessors Map Lot _____

Zone _____ LAR, LBR, and LCR are an overlay zone & require Section 21.4 worksheet.

VARIANCE GRANTED? Y/N Date: _____ SPECIAL EXCEPTIONS GRANTED? Y/N Date: _____

ZONING PERMIT VOID if: (1) Work or Activity is NOT commenced within 6-months. (2) Construction NOT completed within 1-year.

I _____ hereby certify that the above information and required PLOT PLAN is correct to the best of my knowledge and belief. I am aware that a submittal of incorrect or incomplete information may VOID an approved zoning permit

OFFICE USE ONLY _____ Approved _____ Denied _____ If APPROVED with Conditions outlined
Applicant signature _____ Date _____

Signature of Zoning Enforcement Officer - _____ Date _____

NOTE: Any ground disturbances (piers, in-ground tanks & outbuilding where ground is disturbed) other than those approved with the issued building permit documents will require further review and approval either by the zoning agent or wetlands - additional fees may be required.

TOWN OF COLUMBIA
PLANNING AND ZONING COMMISSION
YEOMANS HALL, 323 ROUTE 87, COLUMBIA, CT 06237 (860)228-0440

Building Permit # _____

**A CERTIFICATE OF
ZONING COMPLIANCE**

Owner of Record _____
As it appears in the land records

Property Address _____

Map _____ Lot _____ Zone _____ Columbia's Unique ID # 030

Pursuant to Title 8, Chapter 124, Section 8-3.(f) of the Connecticut General Statutes, the above-mentioned structure, use (or is a valid non-conforming use) or building has been determined to be in conformity with the Town of Columbia's zoning regulations adopted on September 13, 1983. Columbia's zoning regulations have been revised and are effective as of November 12, 2009.

Additional Notations (other than noted on completed zoning applications):

Pursuant to the **Zoning Regulations** for the Town of Columbia, additional notations (other than noted on completed zoning application)

Please note you must also comply with the regulations of the Sanitarian, Inland Wetlands and the Building Official.

ZEO

Date