

TOWN OF LISBON

INCORPORATED 1786



BUILDING INSPECTOR ZONING ENFORCEMENT OFFICER 1 NEWENT ROAD LISBON, CONNECTICUT 06351-2926 TEL. (860) 376-8291

TOWN OF LISBON RESIDENTIAL TRADE PERMIT APPLICATION

One permit per form – please check (x)

GeneralEle	ctricalPlumbing_	Heating & A/C	Gas
Property Address:			ID#
Property Address: Property within Special Flood	Hazard Area: YES	NO If YE	S see Flood Plain Checklist
Owner of Record:			Phone:
Mailing Address:			
Email:			
Description of Proposed Work	<:		
Contractor:			LIC#
Address:	- ·		
Total Estimated Cost of Install	ation:		
CERTIFICATION			
AUTHORIZED BY THE OWNER OF RECHIS/HER AUTHOIZED AGENT I AGREE FOR WORK DESCRIBED IN THIS APPLIC REPRESESENTATIVE SHALL HAVE THE ENFORCE PROVISIONS OF THE CODE Name of Applicant (print):Signature of Applicant:Address:Email:	TO CONFORM TO ALL APPLICATION IS ISSUED, I CERTIFY THAT E AUTHORITY TO ENTER AREAS (S) APPLICABLE TO SUCH PERM	ABLE LAWS OF THIS JURISDI AT THE CODE OFFICIAL OR T COVERED BY SUCH PERMI IIT.	CTION. IN ADDITION, IF A PERMIT HE CODE OFFICIAL'S AUTHORIZED T AT ANY REASONABLE HOUR TO
OFFICE USE ONLY			
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Building Permit #		PAII)
Permit Fee: \$		CASH/CHECK #:	
CT EDU Fee \$	o	AMOUNT:	
TOTAL Due; \$		DATE:	RECIEVED BY:
Ruilding Official Signature:			
Building Official Signature: Fire Marshal Signature:			Date:
THE Maishai Signature.			Date:
*Permit is not valid without Building Official's signature and comments Revised: 8/18/2021 ejoseph (f:) CB_Residential_Trade_Permit_Application			