Town of Seymour Department Approvals

Application for Building Permit

1. Applicant’s Name: ____________________________ Date: _______________
   Address: _____________________________________________________________________
   Phone Contact Number: _________________________________________________________
   Description of Project: __________________________________________________________

2. Assessor’s Office (203) 881-5013
   List #: _____________________________
   Property Location: _____________________________________________________________
   Owner of Record: ______________________________________________________________
   Assessor’s Map: __________________________________________________________________

3. Tax Collector’s Dept. (203) 888-0517
   Confirmation of NO delinquent taxes due on the above property
   Tax Collector _____________________________ Date _________________________________

4. Inland Wet Lands Dept. (203) 881-5007
   Based upon the review of the Inland Wet Lands Maps, Record Subdivision Map, Site Plan or other data the above
   project is in compliance with Wetlands Regulations.
   Inland Wet Lands - APPROVED ___________________ DISAPPROVED ___________________

5. Planning & Zoning Dept. (203) 881-5007
   Project approval granted by Administrative Review: YES ___________ NO ___________
   Project approval granted by P&Z Commission Review: YES ___________ NO ___________
   Project approval granted by Zoning Board of Appeals: YES ___________ NO ___________
   Planning & Zoning Agent: __________________________________ Date: _________________

6. Water Pollution Control Authority / Naugatuck Valley Health District - (203) 735-8087 + (203) 888-3830
   Municipal Sanitary Sewer Connection Approval
   WPCA Agent: _____________________________ Date: _____________________________
   NVHD Approval of onsite Septic Designed System and water Well Location
   NVHD Agent: _____________________________ Date: _____________________________

7. Public Works Dept. (203) 735-5838
   Project Approval for Driveway Permit    Permit # _________________________________
   Project Approval for Road Opening Permit  Permit # _______________________________
   Public Works Agent: _____________________________ Date: ________________________

8. Fire Marshals Office: (203) 888-0510
   Approval based on submitted plans and review - CT Review Code ____________________
   Fire Marshal Signature _____________________________ Date: ______________________

9. Building Dept. (203) 888-3545 --- Project Compliance Per Plans and Review per the CT State Building Code
   Building Official: _____________________________ Date: ________________________