



**City of Danbury**  
 155 Deer Hill Ave  
 Danbury, CT 06810

For Questions Please Contact the Permit Office at (203) 796-1653

**APPLICATION FOR PERMIT TO INSTALL  
 BUILDING SERVICE EQUIPMENT**

Plumbing  
 HVAC  
 Sprinkler  
 Lawn Irrigation

Wood Stove  
 Gas / Oil Burner  
 Oil Tank  
 Other \_\_\_\_\_

Is this in conjunction with a building permit? Yes No If yes, building permit number # \_\_\_\_\_

Plans with permit: Yes No # of sets: \_\_\_\_\_

**Job Address:** \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Building Use Group \_\_\_\_\_ Stories: \_\_\_\_\_ Public or Private \_\_\_\_\_

Current Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_ Number of Units: \_\_\_\_\_

**Licensed Contractor:** \_\_\_\_\_

License #: \_\_\_\_\_ Classification: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Numbers: Phone Number: \_\_\_\_\_ Other: \_\_\_\_\_

**Detailed Work Description:**

(Please be Specific)

**Total Estimated Construction Value: \$** \_\_\_\_\_

**Applicant (print):** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\*\* Do Not Write Below This Line \*\*\***

**Permit Fee: \$** \_\_\_\_\_ **Cash / Ck:** \_\_\_\_\_ **Initial:** \_\_\_\_\_

**Assessor's Lot #:** \_\_\_\_\_ **Application #:** \_\_\_\_\_

Taxes, Water, or Sewer overdue? Yes No Code Enforcement? Yes No

Worker Compensation/Liability Insurance Certificate: \_\_\_\_\_

Home Owner / Sole Proprietor Affidavit: \_\_\_\_\_

**Inspector Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



CONNECTICUT WORKERS' COMPENSATION  
INSURANCE AFFIDAVIT

FOR PROPERTY OWNERS OR SOLE PROPRIETORS

DATE: \_\_\_\_\_

PROPERTY OWNER(S) NAME \_\_\_\_\_

OR

SOLE PROPRIETOR \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_

IN THE CITY OF DANBURY

I, \_\_\_\_\_, THE OWNER OF THE ABOVE DESCRIBED PROPERTY OR A SOLE PROPRIETOR, HEREBY SWEAR AND ATTEST THAT I WILL REQUIRE PROOF OF WORKERS' COMPENSATION INSURANCE FROM EACH AND EVERY CONTRACTOR, SUBCONTRACTOR OR OTHER WORKER BEFORE HE/SHE ENGAGES IN WORK ON THE ABOVE DESCRIBED PROPERTY IN ACCORDANCE WITH THE PROVISIONS OF CHAPTER 568.

I UNDERSTAND THAT PURSUANT TO §31-275 OF THE CONNECTICUT GENERAL STATUTES, OFFICERS OF A CORPORATION AND PARTNERS IN A BUSINESS MAY ELECT TO BE EXCLUDED FROM COVERAGE BY FILING A WAIVER IN ACCORDANCE WITH §31-275, AND THAT SOLE PROPRIETORS ARE NOT REQUIRED TO HAVE COVERAGE, UNLESS THEY FILE THEIR INTENT TO ACCEPT COVERAGE PURSUANT TO §31-275.

\_\_\_\_\_  
(Signed)

\_\_\_\_\_  
(Date)

OATH

\_\_\_\_\_  
(NOTARY, COMMISSIONER OF SUPERIOR COURT,  
JUSTICE OF THE PEACE)

“Subscribed and sworn to before me  
THIS \_\_\_\_\_ DAY OF \_\_\_\_\_”

DATE COMMISSION EXPIRES: \_\_\_\_\_