TOWN OF NEWTOWN BUILDING DEPARTMENT

Finished Basement Permitting Package

PLEASE READ NEXT PAGE FOR PERMITTING PROCEDURES

Finished Basement Permitting Package

PLEASE READ CAREFULLY BEFORE STARTING THE PROCESS

List of Required Documentation

- Complete the permit application packet in its entirety including the Zoning & Health forms.
- o Provide two (2) copies of building plans drawn to scale.
- o If the Applicant is not the Owner of the Property, the Letter of Authorization must be completed.
- o Provide a copy of the Connecticut Home Improvement Contractor Registration/License.
- Provide a copy of contractor's insurance showing workman's comp.
 OR
- The Connecticut 7B Worker's Compensation Form must be completed and notarized.

Permit fees will be collected by each department separately and to be paid by check or cash only.

Building Department checks are made payable to "Town of Newtown."

Building Department (203) 270-4260

<u>Please see Building Department after all documents are ready & application has been completed BEFORE seeing the following:</u>

Land Use Agency (203) 270-4276

Borough (203) 270-4353

Health District (203) 270-4291

		WN BUILDING DEPARTN		
		NT- PERMIT APP		
Permit No.:	Receipt No.:		Date Issued:	
REQUIRED DI	PARTMENTS T	O SIGN OFF ON PER	RMIT APPLICATION	
Zoning:	Conservation:	9	Health:	
Is this property in the Borough?			if yes, Boroug	h sign off will be needed
Is this property in the Borough Historic District	?		if yes, appro	oval letter will be needed
Is this property in the Hattertown Historic Distri	ct?		if yes, appro	oval letter will be needed
All refunds must be requested within 30 days of	f permit date if proje	ect under this permit is o	ancelled. Date:	
Property Location Street Address:				
		CONTACT INFORMA or of Authorization from the Co		
Owner's Name as it Appears in Land Records:		Owner's Em	ail:	
Owner's Street Address:				
Town/City:	State:		Zip Code:	
Home Phone Number:	Work Phone Nu	umber:	Fax Number:	
	·		ONTACT INFORMATION Owner & Contractor will be required.	
Applicant's Name:	,	Applicant's E		
Street Address:		<u> </u>		
Town/City:	State:		Zip Code:	
Applicant's Phone Number:	Work Phone Nu	umber:	Fax Number:	
		TRACTOR INFORMA Letter of Authorization from the		
Name of Contractor:	is punning uns permit, a L	Contractor's		
Contractor's Business Name:				
Street Address:			Contractor's Phone Number:	
Town/City:	State:		Zip Code:	
Home Improvement Contractor License Number:			HIC Expiration Date:	
Complete the description of work to be done be	low:			
Will there be a change in use?	943			
Was work done without a permit? YES / NO	Is the structure	withint the 100 year flo	od plain? YES / NO Flood Zone	
ESTIMATED CONSTRUCTION COST (Minus Cost of Mechanicals)	Call Before You Dig: (800) 922-4455 BUD#:			
	ESTIMATED C	OST OF MECHANICAL	.S	
Electrical Cost & Security Alarm Cost:	Heating Cost:		Pump Cost:	

A/C Cost:

Gas/Propane Cost:

Plumbing Cost:

FINISHED BASEMENT

Please fill-in sub-contractor and contact telephone number below.

It is the responsibility of the property owner or the owner's agent to hire contractor(s) licensed by the State of Connecticut for each mechanical trade. The owner or owner's agent is required to get a signed Letter of Authorization by each contractor should the Owner or Owner's Agent be pulling a permit using the contractor's license.

Trade	Name of Sub-Contractor/Company	Telephone #
PLUMBING		
ELECTRICAL		
HEATING & A/C		
PUMP	The state of the s	
L.P. GAS OR NATURAL GAS		
ALARM		
MASONRY		
FIREPLACE INSERT		
OTHER:		

All applicable information must be filled in or this permit cannot be processed.

I hereby agree to conform to all of the requirements set forth by Connecticut State laws and the State of Connecticut Building Code in addition to the Ordinances of the Town of Newtown and to notify the Building Official of any alteration on the plans or specifications of the building for which this permit is asked. I agree that this building meets Town of Newtown Zoning & Conservation and the Health Department's set backs from all street lines, side yard lines, well(s), septic(s), and the required distances from all other zones and is located in a zone which this building and its use is allowed.

Owner's Signature: _	Date:
Owner's Printed Name:	
Agent/Contractor's Signature:	Date:
Agent/Contractor's Printed Name:	

<u>Letter of Authorization – Contractor to Sign</u>: Contractor giving permission to the Homeowner/Property Owner to pull a permit using his/her State of Connecticut Contractor's License.

Newtown Building Department 3 Primrose Street Newtown, CT 06470

To the Town of Newtown Chief Building Offi	cial:		
I	, give		permission to obtain
a/an	per	rmit using my Contracto	r's License for work to be done
at property location:			
Sincerely,		Date:	
		a	
*************	******	*******	**********
Letter of Authorization – Homeo	wner/Property	Owner to Sign:	Homeowner/Property Owner
giving permission to the Contractor \to pa where the permit scope of work will be p	•	Homeowner's/Proper	ty Owner's address of
Newtown Building Department			
3 Primrose Street Newtown, CT 06470			
To the Town of Newtown Chief Building Offi	cial:		
	, give		permission
to obtain a building permit for a/an			permit at my property
location of:			
Sincerely,		Date:	
		Baio.	

TOWN OF NEWTOWN

COMBUSTION AIR EXPLANATION OF CALCULATION

Permit Number:	Address:	

Combustion Air Calculation Forms are to be filled out to be issued a permit for the following:

- 1. All new homes
- 2. All finished basements
- 3. All boiler, furnace, and water heater replacements

What is the total gross BTU ratings for all fuel burning appliances?

Example:

2 furnaces at 100,000 BTU =

200,000 BTU's

1 Water heater at 85,000 BTU =

85,000 BTU's

Total:

285,000 BTU's

How many cubic feet are contained in the room that the appliances are located?

Example:

The room is 40' long by 28' wide by 7'6" high.

Total: 8,400 cubic feet

The code requires a room to be 50 cubic feet for each 1,000 BTU's of appliances. So in the above example, we have 285,000 BTU's so we would need 50 x 285 or 14,250 cubic feet. Therefore, for the above example, the room the boiler is in would be defined as a confined space and would require combustion air consideration and calculation.

- a.) Where we get the air for combustion from will determine what size openings are required.
- b.) If we are getting the air from an interior space, we will need 1 square inch for each 1,000 BTU's of combined rating. For the above example, we will need each opening to be 285 square inches. One opening within 12 inches of the ceiling and one opening within 12 inches of the floor.
- c.) If we are getting air directly from the outside through louvers, we will need 1 square inch for each 4,000 BTU's. This will require 72 square inches, but the code has set 100 square inches as the minimum size opening for combustion air. Therefore, we will require 2 openings,100 square inches each located as stated in (b.) above.
- d.) If we are getting air from the outside through horizontal ducts, we will require 1 square inch for each 2,000 BTU's. So for the above example, we will require 2 openings, each opening to be 285 divided by 2 = 143 square inches located as above.

Remember, if an interior source is being used, the space we are getting the air from must meet the 50 cubic feet for each 1,000 BTU's rule also. The size of the boiler room can be combined with the size of the room that the air is being taken from to achieve this volume. All calculations must be approved by the Building Official.

TOWN OF NEWTOWN - BUILDING DEPARTMENT

CALCULATIONS FOR COMBUSTION AIR

ADDRESS	OF PROPERTY:			
0	WNER'S NAME:			
	nbined gross BTU ratings of all the boiler room or rooms?			
What is the volume of (Length x Width x He				
	ual more than 50 cubic feet for each pined appliance ratings? If it does, OT required.			
		If the calculation result for the volume stated a <u>less than</u> 50 cubic feet for each 1,000 BTU's cratings, <u>combustion air IS required</u> .		
	e with combustion air be achieved	d? Check one below. ume of the room the air is being taken from?		
b.) Air c	directly from the exterior of the building	ng through screened openings.		
What is the calculat	ed size of each opening and the lo	ocation of each opening?		
Opening #1:	Size:	Location:		
Opening #2:	Size:	Location:		
Opening #3:	Size:	Location:		
Opening #4:	Size:	Location:		
Opening #5:	Size:	Location:		
This completed form MUST be submitted as part of the Finished Basement Permit Application. I attest that I have done the above-required calculations based on the 2022 Connecticut State Building Code.				
FORM COMPLETED B				
	SIGNATURE	DATE	*	
	PRINTED	D NAME / COMPANY NAME	G.	

Tel. (203) 270-4370 Fax. (230) 270-1528



To:

All Building Contractors

From:

Richard Frampton

Subject:

Outside Burning at Construction Sites

Section 22a-174 of the Connecticut General Statutes is the enabling legislation which governs the administrative regulations for the control of open burning. These regulations empower the local open burning official to <u>only</u> issue permits to any resident of the Town to dispose of brush on property where he resides. This means that if there is no residential structure occupied on the property, a permit cannot be issues. Owners or contractors wishing to burn brush on vacant land or construction sites cannot be issued permits. In such circumstances, the brush should be piled to one side of the property and burned when there is an occupied residential structure on the site. Burning permits for brush only are issued by the Fire Marshal's Office from November 1 through March 31. Owners or contractors should contact the Fire Marshal's Office for conditions of burning as set forth in the regulations.

No burning of construction materials at construction sites in the Town of Newtown is permitted. Debris should be piled into a dumpster and disposed of properly.

Should the fire department be called to a construction site for a fire it will be extinguished, and the contractor may be arrested for burning without a permit. The contractor will also be billed a set amount by the fire department for the responses and extinguishment.

Your signature on this letter acknowledges your receipt of the above information.

Printed Name

Date

Signature

Tel. Phone Number

Job Location

Proudly serving the towns of Bridgewater, Newtown and Roxbury



3 Primrose Street Newtown, CT 06470 P: (203) 270-4291

www.newtown-ct.gov/health-district

NEWTOWN DISTRICT DEPARTMENT OF HEALTH APPLICATION FOR BUILDING PERMIT APPROVAL / SIGN OFF

This is not a Building Permit - A permit from the Building Department is required prior to construction.

Street Address of Proposed Project		Town		
Owner Contractor Name		Phone	Email	ai ai
		Phone	Email	
Contractor Address Town		State	Zip Co	ode
Lot Size:	Septic and W	ell Information Provided:	Yes	No
 A sketch/dra system area 	ı (B100a), if required.	to septic systems and wells		
A check made pay	able to <u>Newtown Health</u>	District in the amount of	:	
FEES: circle appro \$ 10.00 \$ 15.00 \$ 25.00 \$ 25.00 \$ 25.00 \$ 50.00 \$ 50.00 \$ 100.00 Description of Build	Residential renovations Shed less than 200 squ Accessory Structure (s Finished Basement wit Commercial Building F Additions, Conversion, In-ground swimming po New Commercial Build New Residential/Per S	it-out / Remodel Change in Use, Finished I	ground pool etc. pasement with b re feet lwelling unit	edroom
Owner or Applicant	Signature:	*	Date:	
	A letter of Authorization	is acceptable in place of Own	er's Signature.	
		Ith District Use Only		
	DENIED	Fee Paid:	Check #:	Cash:
Sanitarian:			n Date:	



TOWN OF NEWTOWN APPLICATION FOR ZONING PERMIT

1. Owner		8. Will any topsoil or earth materials other than		
2. Ap	pplicant	topsoil be removed from the lot or onto the		
3. Pro	oject Address:	lot?	yes	no
4. Ph	one		der penalties of false on the foregoing of the drue.	
5. En	nail		ision of a Zoning offic Zoning Board of App	
	rmit for (Specify use below selection): New Building or Structure	197	the CT General Statu	
b) _	Enlarged Building or Structure	Ow	ner/Applicant	Date
c) _	Structural Alteration (no increase in area)			
d) _	Landscape Work (includes ¼ acre ponds)	ZEO Notes:		
e) _	Change in Use			
f) _	Temporary Use	<u>-</u>		
g) _	Other Use			
Desc	eription of Activity:			
		-		
7. Pre	esent use of lot (i.e. Single Family Residence)	ZEO S	ignature	Date
8. Att	rached Plans:yesno	Fee \$	By	Date
	not necessary			