



QVHD

Quinnipiac Valley Health District

1151 Hartford Turnpike, North Haven, CT 06473

Phone: (203) 248-4528 FAX: (203) 248-6671 WEBSITE: www.qvhd.org

PERMIT APPLICATION

ADDITION, ACCESSORY STRUCTURE, CHANGE-IN- USE, BUILDING CONVERSION or LOT LINE REVISION

PROPERTY ADDRESS	TOWN

PROPERTY OWNER	PHONE #

APPLICANT	PHONE #

CONTACT EMAIL	ALTERNATE EMAIL

Existing Structure: Residential; Existing Number of Bedrooms _____
 Non-Residential; Current use _____

Water Supply Private Well Public Water

Sewage Disposal: Septic system
 Is information (location, size etc.) available? Yes No Unknown
 Public Sewer

This application is for:

- Building addition Building conversion (winterization) Lot line revision
- Detached garage Pool Shed Deck Buried propane tank
- Other Accessory Structure: _____
- Change- in- Use: Residential Addition of #___ Bedroom(s) Other _____
- Change- of- Commercial Use: Current Use: _____
 Proposed Use: _____

Brief Description of Proposal (continue on back if needed):

_____	_____	_____
PRINTED NAME	SIGNATURE	DATE

ATTACH A DETAILED PLOT PLAN (include location and description of proposal, existing septic system, well, property lines, existing structures, code complying area) Include building plans if applicable.

The following have been contacted: Building Official Planning and Zoning Official Other Town/State Agency

FOR OFFICE USE ONLY

Soil testing required Yes No

FEE: [] \$50.00 Permit Fee [] \$75.00 soil test fee if applicable