HOME ADDITION

What Permits/Forms are required?

- 1. Zoning and Building Application, signed by Property Owner and signed by Haddam Tax Department
- 2. Health Department: B100a Application Septic System
- 3. Site Plan of the property, at a **SCALE of 1"=20' or 1"=40'**, showing all structures, dimensions, location of proposed addition, distance from the addition to the property boundaries, distance from the addition to the well & septic system **3 COPIES**.
- 4. Construction Documents -2 COPIES

All completed applications, documentation and payments are accepted in the Haddam Land Use Department.

2 payments are required at time of application, either cash or check, payable to:

CT River Area Health District --- \$ 100.00

Town of Haddam --- \$ 100.00 (includes State fee) for Zoning Permit

The application package is first reviewed by Health Department. Once approved, it is then reviewed by the Zoning Officer. Once approved by Zoning, the application package is then sent to the Building Department.

You will be contacted by the Building Department once the application is in that Department. There will be a Building Permit Fee due, payable to the Town of Haddam, based on the Estimated Cost of the project. This fee is assessed and collected once the Application is Approved by the Building Department. Additional Permit(s) will be required for Electrical, HVAC and Plumbing work.

Note: If any additional information or documentation is required by the Zoning, Health, or Building Departments, you will be contacted by those departments.

TOWN OF HADDAM BUILDING AND ZONING APPLICATION TEL# 860-345-8531

*YOUR APPLICATION TO THE BUILDING DEPARTMENT WILL NOT BE REVIEWED UNTIL ALL OTHER REQUIREMENTS HAVE BEEN COMPLETED.

Permit Location							
	1	Number		Stre	et Name	9	
			The state of the s		Phone #		
Owner's Name		*			E-Mail:		
Mailing Address _	No.	Street	P.O. Box		Cell#		
Town		State	Zip Code				,
Applicant							¥
					License #		
× -	No.	Street	P.O. Box				
Town	C.	ate	Zip Code				
Town	51	ate	Zip Code		Cell#		10
CONSTRUCTION:	New _	Alteration	on Addition	Repair	Demolition	Estimate	d Cost
		1.47	/ORK:				
						S 3	
PROPOSED TO SEW WORK OF	Total So	ı. Ft. Work ———	No. of Stories	Buildi —— Height	ng	Use Group	Construction Type
SEPARATE PERM	ITS AR	E REQUIRED		454.00		2011	VELL, WELL PUMP & SEP
OTHER APPROVALS	OR RE	VIEWS REQUIF			hereby certify th		
T C-11			DATE	ized by the owner	roperty or () that er of record and/or.	I have been auth	orized to
_ Tax Collector				conform to app	ition as an authorize blicable laws, regu	lations and ord	linances. All
Variance.				information co my knowledge	ntained within is and belief.	true and accura	te to the best of
Health Dept					- 6 - 4	~26	
Inland Wetlands			man and an analysis	Own	er		Date
DW Bond/E&S Bo	2002						
Fire Marshal				Age	nt		Date
Is any work being done within 100 feet of a lake, pond, river, perennial stream and/or soil types designated as poorly drained, very poorly drained, alluvial and flood plain?					ike your building f Occupancy?	plans returned	to you after issuance of a
		NO	1000		YES _	NO_	_
Duilding D		1		E USE ONLY	at Siza		Zana
building remnt #,		ſ	Map # Lot	#1	ot Size		Zone
APPRO	VED _	DISAPPROVE	ED	_	APPROVED	DISAPPR	OVED
Permit Fee Pd	_ Ck#	Zoning Pe	ermit#	Permit Fee Pd			Ck#
Zoning Official		Da	ite	Building Office	cial	-30- 11-11-34-	Date
Comments:				Comments:			

White: Building Department

Yellow: Zoning Department

Pink: Assessor

Gold: Applicant

TOWN OF HADDAM BUILDING AND ZONING APPLICATION TEL# 860-345-8531

*YOUR APPLICATION TO THE BUILDING DEPARTMENT WILL NOT	BE REVIEWED UNTIL ALL OTHER REQUIREMENTS HAVE BEEN COMPLETED.
Tomme Bocation	IAIN STREET
Number	Street Name
Owner's Name TOHN SMITH Mailing Address 81 MAIN STREET No. Street P.O. Box HADDAM CT 0643. Town State Zip Code	Phone # 860 345 1299 E-Mail: johnsmith @ gmail.com Cell# 860 156-1234
Applicant Tom Tones Builder Mailing Address 22 Oak ST No. Street P.O. Box MIDDLETOWN CT 0602 Town State Zip Code	Cell# 860 555-2222
CONSTRUCTION: New Alteration Addition	Repair Demolition Estimated Cost
BRIEF DESCRIPTION OF PROPOSED WORK:	
PROPOSED Total Sq. Ft. No. of NEW WORK of New Work Stories	Building Use Construction Height Group Type
	eating, preming fire 1.4. e. Masorny, well. well-primy a septio
OTHER APPROVALS OR REVIEWS REQUIRED/RECEIVED DATE Tax Collector Variance. Health Dept. Inland Wetlands	Certification I hereby critify that () I am the owner of record of the named property or () that the proposed work is authorized by the owner of record and/or. I have been authorized to make the application as an authorized agent, and we agree to conform to applicable laws, regulations and ordinances. All afternation contained within is true and accurate to the best of pay knowledge and belief.
DW Bond/E&S Bond	
Fire Marshal	Agent Date
Is any work being done within 100 feet of a lake, pond, river, perennial stream and/or soil types design ded as poorly drained, very poorly drained, alluvial and flood plain?	Would you like your building plans returned to you after issuance of a Certificate of Occupancy?
Poorly dramed, and vial and nood plain? YES NO	YES NO
YESNO	E USE ONLY t # Lot Size Zone
YES NO OFFICE OFFICE Building Permit # Map # Lot	E USE ONLY t# Lot Size Zone
YES NO OFFICE	E USE ONLY
YES NO OFFICE Building Permit # Map # Lot	E USE ONLY t # Lot Size Zone APPROVED DISAPPROVED

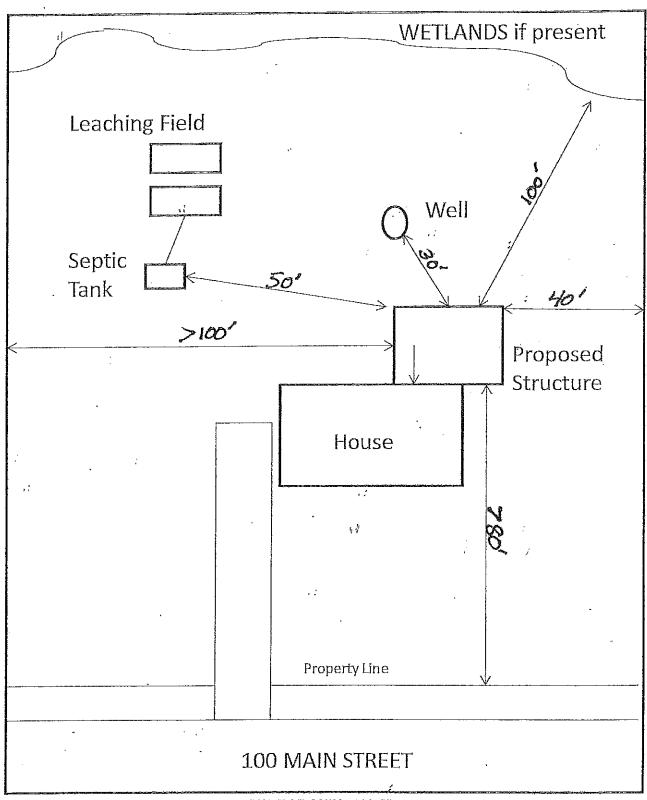
Yellow: Zoning Department

Pink: Assessor

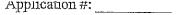
Gold: Applicant

White: Building Department

SITE PLAN EXAMPLE



EXAMPLE ONLY - ALL SITE PLANS SHOULD BE DRAWN TO SCALE



Payable to: CRAHD

Fee: \$100.00



Connecticut River Area Health District

455 Boston Post Road, Suite 7 Old Saybrook, CT 06475

Telephone (860) 661-3300 · FAX (860) 661-3333

B-100a: Application

Note: A diagram of the proposed addition or accessory structure in relation to existing structures, property lines, septic system and water source must be shown on attached detailed plot plan. Proposed building plans must also be submitted with this application. Submit any/all septic system information and soil testing available for the subject property.

Circle Town: Old Saybrook Clinton Deep River (Haddam)							
Date: Property Address:							
Owners Name:Owners Phone #:							
Applicant Name: Applicant Address:							
Applicant Phone # Applicant Fax #							
Existing Structure: [Residential Number of Bedrooms]							
[Non-Residential Describe]							
Water Service: Well Public Year Septic System Installed:							
Type of Application:							
Building Conversion (Winterization) Change in Use (Addition of Bedrooms etc.) Existing Bedrooms Proposed Bedrooms							
Building Addition Existing sq.ft Proposed sq.ft							
Accessory Structure, ex. Garages, Pools, Sheds, Decks.							
Lot Division, Lot Line Change, Lot Reduction Give a brief description of proposed application:							
Applicable to Old Saybrook Only: Is the property in the Wastewater Management District: YES NO							
Print:Sign:(Owner or authorized agent)							
.ddress: Check# Cash							

This $2^{\pi d}$ page of the application is for CRAHD staff only to complete

Building Conversion, Change in Use: Applicable
Has a code complying area been determined for this property? Yes No
Will the proposed change result in greater than 50% increase in design flow?
• If yes, will the property owner be required to expand the existing septic system?
Building Addition: Applicable
Has a code complying area been determined for this property? Yes No
If a code complying area is not found, does the application meet the following conditions?
1. Replacement area provides 50% of effective leaching area Yes No
2. Replacement area provides 50% of MLSS requirement
3. No exception(s) to well separation distance is required
4. The addition does not reduce the potential repair area
5. The addition does not increase the design flow of building
Will the proposed addition result in greater than 50% increase in design flow?
• If yes, will the property owner be required to expand the existing septic system?
Accessory Structure:
Has a code complying area been determined for this property?
If a code complying area is not found, does the application meet the following conditions?
1. Accessory structure, etc. does not reduce the potential repair area and the Yes No separation distances between the accessory structures, etc. and any part of the existing septic system shall comply with technical standard requirements.
Lot Division, Lot Line Change, Lot Reduction: Applicable
Has a code complying area been determined on the lot containing the existing building and has a code complying primary and reserve are been determined for the new lot?
TOTAL A
Will the septic system be repaired: YES NO Approved \(\sum_{\text{NO}} \) Not Approved
Comments:
Signed: Date:
Rev:6-30-16

TOWN OF HADDAM PERMIT FEE SCHEDULE

BE IT ORDAINED by the Town Meeting at the Town of Haddam, that pursuant to Section 3-7 of the Town of Haddam Charter, the following amendments to ordinance chapter 52. BUILDING CONSTRUCTION, shall be adopted on October 25,2017, to be effective on November 1, 2017

1. Building Permit Fee Evaluations:

The applicant for a permit shall provide an estimated permit value at the time of application. Permit valuations shall include total value of work, including materials and labor, for which the permit is being issued, such as electrical, gas, mechanical, plumbing equipment and other permanent systems. If, in the opinion of the building official, the valuation is underestimated on the application, the permit shall be denied, unless the applicant can show detailed estimates to meet the approval of the building official. Final building permit valuation shall be set by the building official.

2. The following fees shall be paid for processing building permit applications:

- A. State Education Fee of \$.26 per thousand for all permits (effective July 1, 2010)
- B. Building permit fee: \$20.00 per thousand or any fraction thereof of construction cost based on fair market value; Minimum fee \$25.00 (plus state education fee)
- C. Electric permit fee: \$20.00 per thousand or any fraction thereof of construction cost based on fair market value; Minimum fee \$25.00 (plus state education fee)
- D. Plumbing permit fee: \$20.00 per thousand or any fraction thereof of construction value based on fair market value; Minimum fee \$25.00 (plus state education fee)
- E. HVAC permit fee: \$20.00 per thousand or any fraction thereof of construction cost based on fair market value; Minimum fee \$25.00 (plus state education fee)
- F. Renewal of existing Permit \$25.00
- G. Permit fees are non refundable (effective August 1, 2008)

TOWN OF HADDAM BUILDING DEPARTMENT REQUIRED INSPECTIONS

According to Section R109 of the IRC and section 110 of the IBC within the 2016 Connecticut State Building Codes, construction or work for which a permit is required shall be subject to inspection and the work shall remain accessible and exposed for inspection purposes until approved. It is the duty of the permit applicant to keep the work accessible and exposed and to request inspections. '12 IBC 110.5

The Building Dept. requires at least two (2) business days' notice prior to requested inspection.

Depending on the scope of work of each project and permit the following inspections may be required:

Work shall not be done beyond the point indicated in each successive inspection without first obtaining the approval of the building official. Any portions that do not comply shall be corrected and such portion shall not be covered or concealed until authorized by the building official. '12 IBC 110.6

- A preliminary inspection of buildings, structures and sites is authorized by the building official prior to issuing a permit. This can be helpful with alterations.
 '12 IBC110.2
- Footing/soil inspection done after excavation for footings are complete and any required reinforcing steel is in place.
 '12 IBC 110.3.1
- Foundation inspection of formwork and any required reinforcing steel must be in place.
 '12 IBC 110.3.1
- o Footing Drain and foundation coating in place and prior to backfill.
- Concrete slab and under floor inspection done after in-slab and under-floor reinforcing steel and building service equipment, conduit, piping accessories and other ancillary equipment items are in place and before any concrete is poured or floor sheathing is installed, including the subfloor and required insulation at edge of slab. The required **vapor barrier** is also required to be inspected prior to concrete placement.

'12 IBC 110.3.2

- o Well trench (48" minimum trench depth with 6" sand bed with well lines covered with a minimum of 12" of clean material over)
- Lowest floor elevation verification. This applies to construction in flood hazard areas only.
 '12 IBC 110.3.3

TOWN OF HADDAM BUILDING DEPARTMENT REQUIRED INSPECTIONS

- Permanent electrical service/Electric trench if underground. (24"-36" minimum trench depth with 6" sand bed with conduits covered with a minimum of 12" of clean material over with dig safe tape 6" above conduit)
- o Rough mechanical & electrical. All electrical wiring and devices, heating wiring, piping and ducts, and plumbing piping to be concealed must be inspected prior to framing inspection. '12 IRC R109.1.2
- Rough Framing inspection done after roof deck or sheathing, all framing, fireblocking and bracing are in place and pipes, chimneys and vents to be concealed are complete.
 '12 IBC 110.3.4
- Fireplace inspection including hearth (formed with rebar in place), throat (with smoke shelf and flue started) and firebox.
- Energy efficiency inspections. Inspections shall be made to determine compliance with energy code requirements such as thermal insulation, insulation of pipes and ducts, sealing of gaps, duct tight fenestration U-value, etc. These may be done at various stages of construction prior to drywall application. '12 IBC 110.3.7
- Gypsum board For fire-resistance rated assemblies this inspection is required before joints and fasteners are taped and finished.
 '12 IBC 110.3.6
- Fire-resistant penetrations and protection of joints in fire-resistance-rated assemblies shall not be concealed from view until inspected and approved.
 '12 IBC 110.3.6
- Other inspections may be required to determine code compliance as determined by the building official.

'12 IBC 110.3.8

- Special inspections as required in Chapter 17 of the 2012 International Building Code portion of the 2016 State Building Code.
 '12 IBC 110.3.9
- Final inspection. This is done after all other inspections and all work required by the building permit is completed and prior to issuance of a certificate of occupancy/approval.
 '12 IBC 110.3.10



State of Connecticut Workers' Compensation Commission

Rev. 3-17-2006

7B

Please TYPE or PRINT IN INI

Proof of Workers' Compensation Coverage when Applying for a Building Permit for the Sole Proprietor or Property Owner who WILL act as General Contractor or Principal Employer

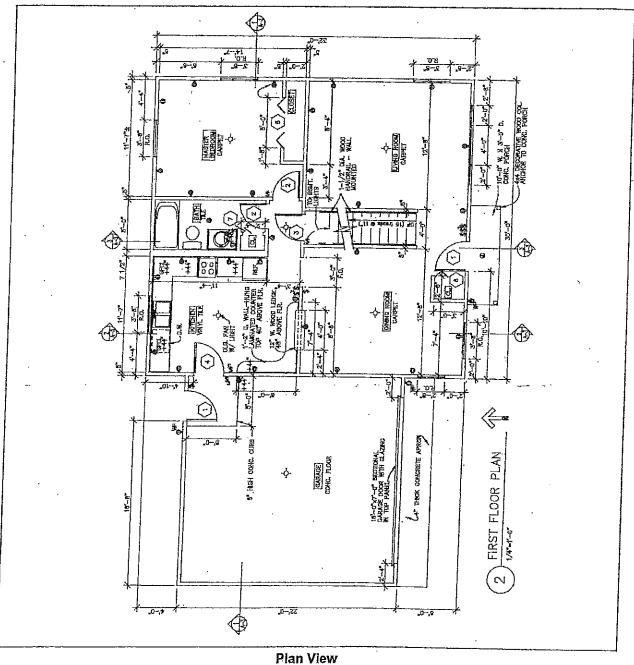
APPLICANT FOR BUILDING PERMIT								
Name of Applicant for Building Permit								
Property located at								
in the City / Town of								
ATTEST								
If you are the owner of the above-named property or the sole proprietor of a business doing work on the site of the construction project at the above-named property and you WILL act as the general contractor or principal employer, you must provide proof of workers' compensation insurance coverage for all employees.								
Complete this form and, if applicable, sign the Affidavit below in the presence of a Notary Public or a Commissioner of the Superior Court.								
CHECK ONE (1) BOX ONLY, provide the appropriate information, and sign:								
I am the OWNER of the above-named property. I WiLL act as the general contractor or principal employer and, as such, will submit proof of workers' compensation insurance coverage for all employees who are doing work on the site of the construction project at the above-named property.								
Signature of OWNER Applicant								
I am the SOLE PROPRIETOR of a business doing work at the above-named property. I WILL act as the general contractor or principal employer and, as such, will submit proof of workers' compensation insurance coverage for all employees who are doing work on the site of the construction project at the above-named property. Signature of SOLE PROPRIETOR Applicant I am the OWNER of the above-named property or the SOLE PROPRIETOR of a business doing work at the above-named property. I will not personally submit proof of workers' compensation insurance coverage, but I will attest to the following:								
AFFIDAVIT								
. I hereby swear and attest that I will require proof of workers' compensation insurance for every contractor, subcontractor, or other worker before he or she does work on the site of the construction project at the above-named property in accordance with Section 31-286b of the Workers' Compensation Act.								
Signature of OWNER or SOLE PROPRIETOR Applicant								
Name of Business—if applicable								
Federal Employer ID# (FEIN)—if applicable								
Subscribed and sworn to before me this day of, 200								
Signature of Notary Public / Commissioner of the Superior Court								

Architectural Views

Architectural views provide builders, owners and permit technicians different ways of looking at proposed construction. There are six different types of views that can be shown.

• Plan View

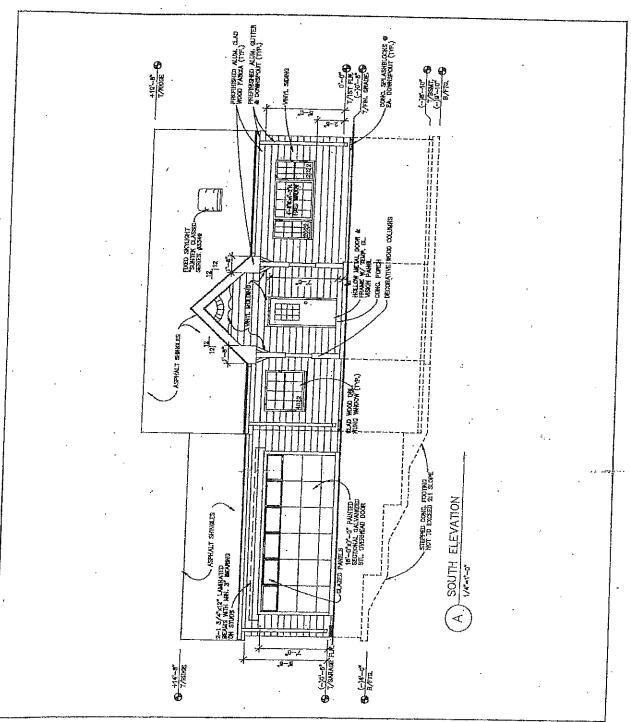
The plan view shows the proposed construction as if it were being viewed from the air.



Plan View Figure 2-9

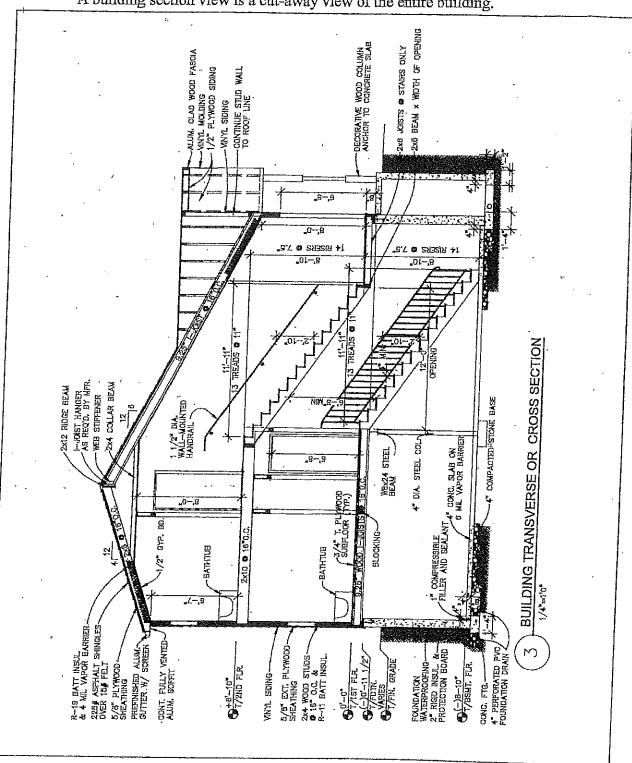
Elevation View

The elevation view shows the proposed construction as if you were standing on the ground looking at it. This view would include the building foundation.



Front Exterior Elevation View Figure 2-10

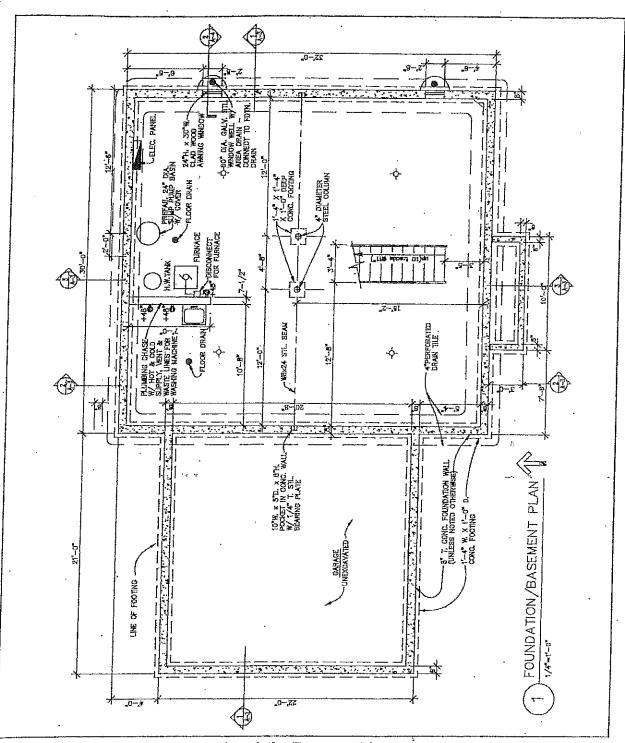
Building Section View
A building section view is a cut-away view of the entire building.



Building Section View Figure 2-11

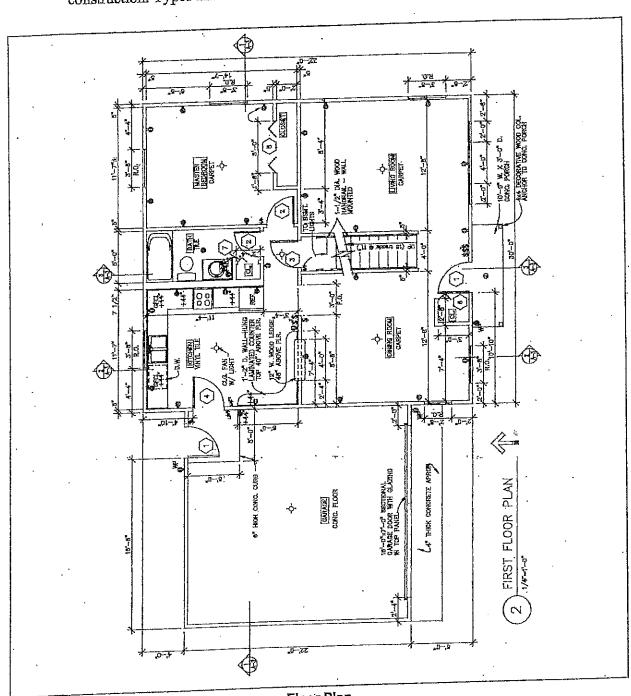
• Foundation Plan

Foundation construction, basement floor construction, wall openings and unexcavated areas are shown on the foundation plan.



Foundation/Basement Plan Figure 2-7

• Floor Plan
A floor plan shows the layout and dimensions of the rooms in the proposed construction. Types and thickness of wall partitions can also be determined.



Floor Plan Figure 2-8