GARAGE/BARN/GREENHOUSE (DETACHED ACCESSORY BUILDING) INCLUDING LARGE SHEDS

What Forms and Documentation are required?

1. Zoning and Building Application, <u>signed by Property Owner</u> and signed by Haddam Tax Department

\$ 100.00

2. Health Department: B100a Application - Septic Review

\$ 100.00

- 3. Site Plan of the property, at a SCALE of 1"=20' or 1"=40', showing:
 - 1) all structures,
 - 2) location and dimensions of proposed building,
 - 3) distance from the building to the property boundaries,
 - 4) distance from the building to the well & septic system 3 COPIES.
- 4. Construction Documents 2 COMPLETE SETS.

All completed applications and documentation are accepted in the Haddam Land Use Dept.

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

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

2) CT River Area Health District --- \$ 100.00

The application package is first reviewed by Health Department. Once approved, it is then reviewed by the Zoning Officer. Once approved, 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. 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 Locatio	n						
		Number		St	reet Name	9	
					Phone #		
Owner's Name			 8	E-Mail:			
Mailing Addre	No.	Street	P.O. Boy				
	INO.	Succi	1.O. DOX				
Town		State	Zip Code	7			
Applicant							e
Mailing Addre	ess	+1			License #_		
- 	No.	Street	P.O. Box				
Town	S	State	Zip Code				
							10
CONSTRUCTION	ON: New_	Alteration	Addition	Repair	Demolition _	Estimated	l Cost
PROPOSED NEW WORK	Total S	q. Ft. Work	No. of Stories	Buil —— Heis	ding	Use	Construction Type
						10-184	/ELL, WELL _o PUMP & SEP
and researchers, or a monthly or the		EVIEWS REQUIRE	1900 N 100 N	Certification of the named	: I hereby certify t I property or () tl	hat () I am the c	owner of record work is author-
_ Tax Collector					ner of record and/or ication as an authoric		
Variance.			conform to applicable laws, regulations and ordinances. All information contained within is true and accurate to the best of				
					ge and belief.	strac and accura	to the best of
Inland Wetlar					М		D. 1
DW Bond/E&	S Bond			0	vner		Date
Fire Marshal				A o	gent		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?			Would you like your building plans returned to you after issuance of a Certificate of Occupancy?				
poorty dramed, at	YES_	NO			YES _	NO_	_
	W. 180	1472		E USE ONLY	E 1723		
Building Perr	nit #	Ma	np # Lot	#	Lot Size		Zone
AI	PPROVED	DISAPPROVED			APPROVED	DISAPPRO	OVED
Permit Fee Pd	Ck#	Zoning Perm	nit#	Permit Fee	Pd		Ck#
Zoning Official _		Date		Building Of	fficial	782-192-192-182-	Date
Comments:				Comments:			

White: Building Department

Yellow: Zoning Department

Pink: Assessor

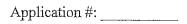
Gold: Applicant

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

*YOUR APPLICATION TO THE BUILDING	DEPARTMENT WILL NOT BE	REVIEWED UNTIL AL	and the same	
Permit Location Numbe	SI MA	IN SIKE		The second secon
Owner's Name Mailing Address No. Street HADDAM Town State Applicant Tom Jones	Smith AIN STEET P.O. Box T 06438 Zip Code		hone # 860 34 -Mail: Johnsmith Cell# 860 156	@ gmail.com
Mailing Address 22 Oa No. Street MIDDLETOWN Town State	K ST. P.O. Box CT 0602. Zip Code		icense # 3299 hone # 860 55 -Mail: tom j @ 6 Cell# 860 55	5 IIII gmail.com 5-2222
CONSTRUCTION: New Alter	ation Addition	_ Repair Der	molitionEstimated	Cost
PROPOSED Total Sq. Ft.	No. of	Building	Use	Construction
NEW WORK of New Work SEPARATE PERMITS ARE REQUIRE		Height —	Group	Type Type
OTHER APPROVALS OR REVIEWS REQ Tax Collector Variance. Health Dept. Inland Wetlands DW Bond/E&S Bond Fire Marshal		Certification I heretof ile named properties of the named properties of the application at conform to applicable afor action contains the properties of the	by crtify that () I am the o by or () that the proposed v scord and/or. I have been author is an authorized agent, and we a le laws, regulations and ord ed within is true and accurate	owner of record work is author- prized to ligree to linances. All
Is any work being done within 100 feet of a perennial stream and/or soil types design are poorly drained, alluvial and flood plain? YES NO	l as poorly drained, very	Certificate of Occ	*	to you after issuance of a
Building Permit #		JSE ONLY		Zone
APPROVEDDISAPPROVEDDISAPPROVEDZoning Official	g Permit#	Permit Fee Pd	PPROVED DISAPPRO	Ck#
Comments:		Comments:		

Yellow: Zoning Department

White: Building Department





Connecticut River Area Health District

a Health District Fee: \$100.00
Payable to: CRAHD

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 Date: Property Address:	Deep River (Haddam)					
Owners Name:						
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 et	c.) Existing Bedrooms Proposed Bedrooms					
Building Addition Existing sq.ft	Building Addition Existing sq.ft Proposed sq.ft					
Accessory Structure, ex. Garages, Pools,	Sheds, Decks.					
Lot Division, Lot Line Change, Lot Redu Give a brief description of proposed application						
Applicable to Old Saybrook Only: Is the property	o in the Wastewater Management District: YES NO					
Print: (Owner or a	Sign:authorized agent)					
Address:	Check#Cash					

This 2^{nd} 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?		Yes		No
• If yes, will the property owner be required to expand the existing septic system?		Yes		No
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 condition	ns?			
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?		Yes		No
• If yes, will the property owner be required to expand the existing septic system?		Yes		No
	,		,	
Accessory Structure: 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 condition	ns?			
1. Accessory structure, etc. does not reduce the potential repair area and the separation distances between the accessory structures, etc. and any part of the existing septic system shall comply with technical standard requirements.		Yes		No
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?	Ó	Yes		No
Tritid 1 1 1 1 Toron and 1 Tor				>
Will the septic system be repaired: YES NO Approved Not Approved				
Comments:				
·			<u> </u>	
Signed: Date:				
Signed: Date: Date:				

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
- o 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

- 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

- O 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

V. 3-17-2008

78

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

Please TYPE or PRINT IN INK

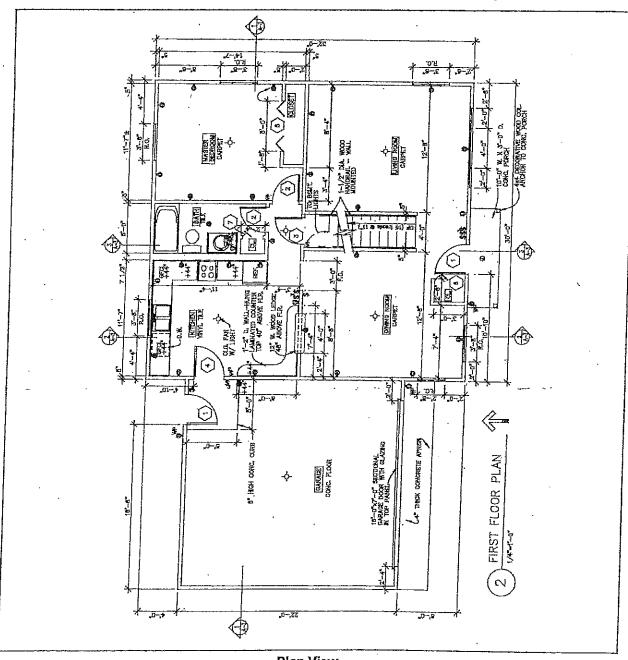
APPLICANT FOR BUILDING PERMIT					
Name of Applicant for Building Permit					
Property located at '					
in the City / Town of					
ATTEST					
If you are the owner of the above-named property or the sole proprietor of a business doing work on the site of the construction project at the above-named property and you WILL act as the general contractor or principal employer, you must provide <u>proof of workers' compensation insurance coverage</u> 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 preperty 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)—#applicable					
Subscribed and swom to before me this					
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

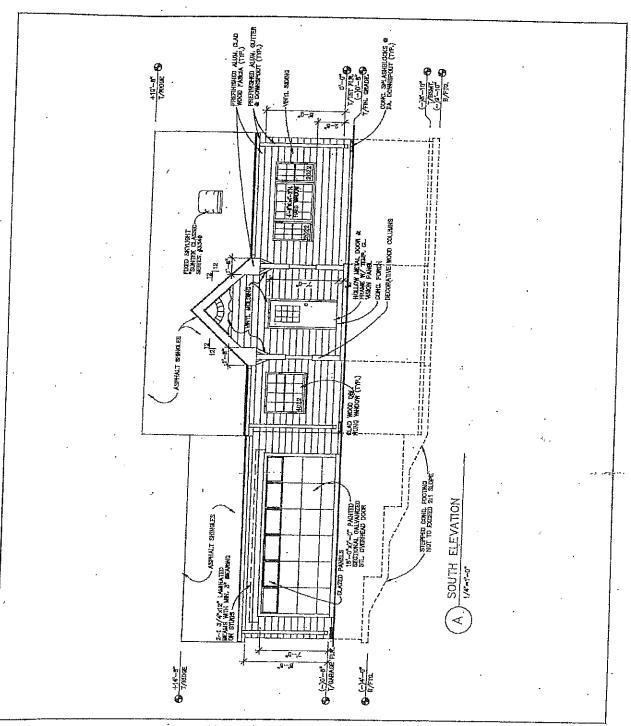
The plan view shows the proposed construction as if it were being viewed from the air.



Plan View Figure 2-9

Elevation View

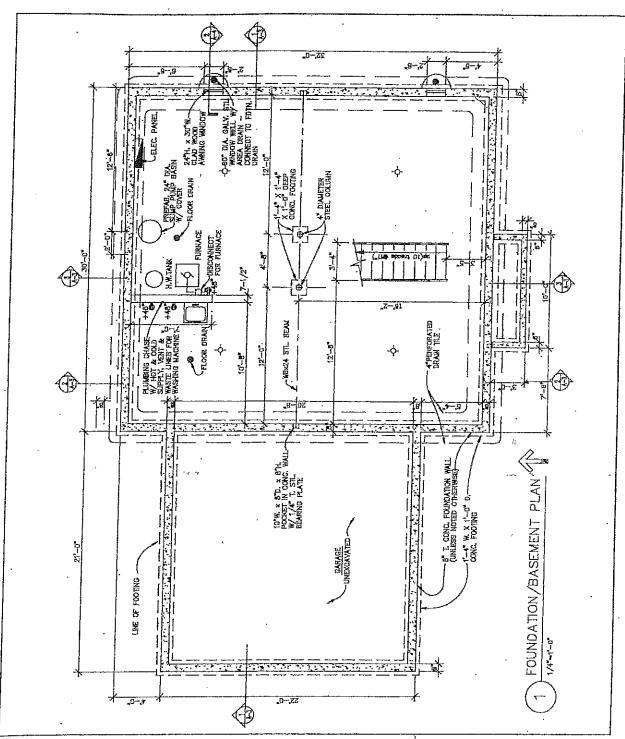
The elevation view shows the proposed construction as if you were standing on the ground looking at it. This view would include the building foundation.



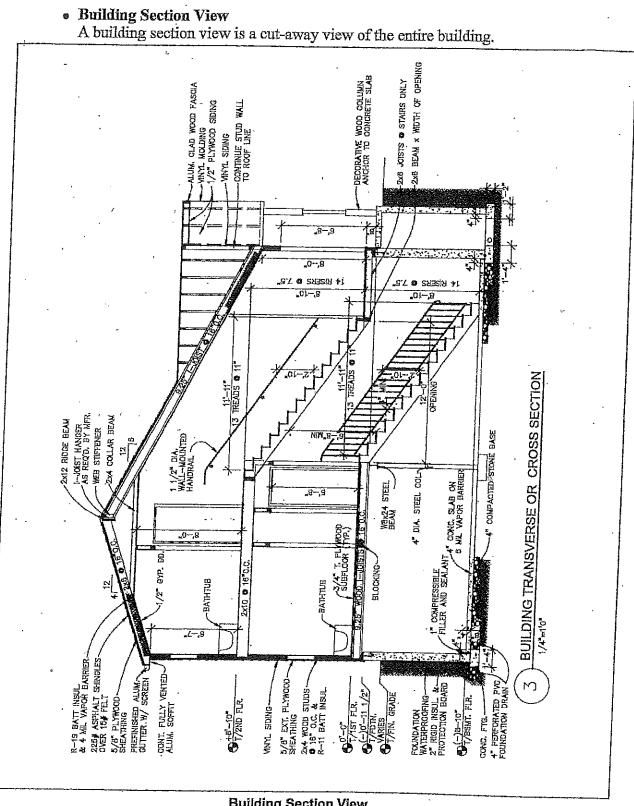
Front Exterior Elevation View Figure 2-10

• Foundation Plan

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

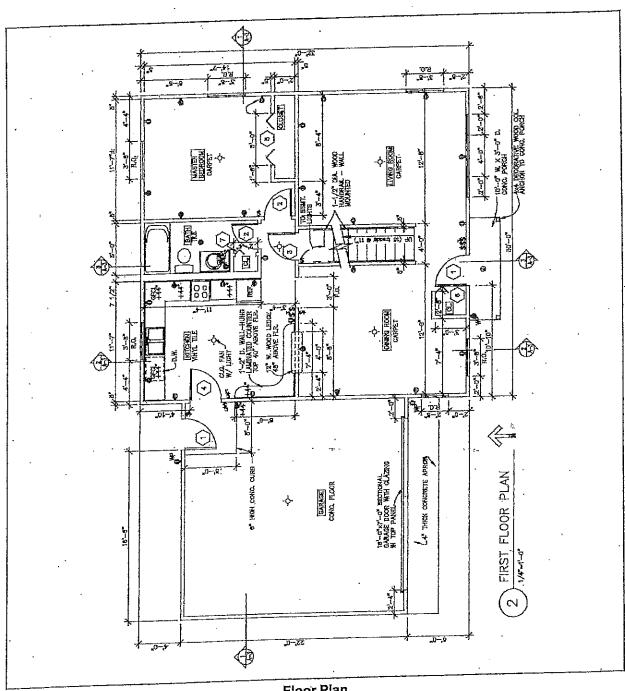


Foundation/Basement Plan Figure 2-7



Building Section View Figure 2-11

• 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