PLAINVILLE-SOUTHINGTON REGIONAL HEALTH DISTRICT

Main Office 196 NORTH MAIN STREET SOUTHINGTON, CT 06489 860-276-6275 • FAX 860-276-6277 Satellite Office ONE CENTRAL SQUARE PLAINVILLE, CT 06062 860-793-0221 x219 • FAX 860-747-1123



APPLICATION FOR BUILDING ADDITIONS, POOLS, ACCESSORY STRUCTURES

NOTE: A scaled diagram of the proposed addition or accessory structure in relation to existing structures, property lines, existing septic system and water source must be shown on attached detailed plot plan. This plot plan must show adequate area for primary septic system replacement (code-complying area). Building modifications require current and revised floor plans.

PROPERTY ADDRESS:		
Lot #	Street Address	Town
Property Owner Name: Address:		
Contractor Name: Address:	Phc	ne#:
Detailed description of request (addition/structure dimensions, number and type of rooms to be added, above- or in-ground pool, etc.):		
Residential Non-Residential # of Bedrooms: Before addition Before addition After addition Square Footage: Addition Existing dwelling Addition Footing Drains required for addition: Yes Yes No		Water Supply: Private Public Septic System: Vear installed Fank size (gal.) Size and type of leaching system:
Signed (Owner or duly authorized represent	ative)	Date:
Sanitarian Signature:		d: Denied: