

City of Bridgeport Building Application

_____ Permit Number Date Issued _____

(A) Location of Building General Information	Owner _____ Site Address _____ Phone _____
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(B) Zoning Information	Zoning District _____ Tax Map No. _____ Lot No. _____ Parcel No. _____
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(C) Type of Improvement	<table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> () NEW STRUCTURE ADDITION () Single Family Residential () Multi family Residential () Commercial () Industrial () Sign () Room Addition () Attached Garage () Detached Garage () Utility Building () Driveway () Sidewalk (New) () Satellite Dish () Pool () Fence () Deck/Patio () Retaining Wall () Other _____ </td> <td style="width: 50%; vertical-align: top;"> ALTERNATIVE/REMODEL/REPAIR () Commercial Remodel () Demolition () Electrical Alteration () Mechanical Alteration () Plumbing Alteration () Roofing () Windows () Soffit/facia () Foundation Drains () Interior - Structural () Exterior - Structural () Siding () Sidewalk (Repair) () Other _____ </td> </tr> </table>	() NEW STRUCTURE ADDITION () Single Family Residential () Multi family Residential () Commercial () Industrial () Sign () Room Addition () Attached Garage () Detached Garage () Utility Building () Driveway () Sidewalk (New) () Satellite Dish () Pool () Fence () Deck/Patio () Retaining Wall () Other _____	ALTERNATIVE/REMODEL/REPAIR () Commercial Remodel () Demolition () Electrical Alteration () Mechanical Alteration () Plumbing Alteration () Roofing () Windows () Soffit/facia () Foundation Drains () Interior - Structural () Exterior - Structural () Siding () Sidewalk (Repair) () Other _____
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(D) Cost of Improvement	\$ _____
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(E) Dimensions	Total Square Feet _____ % of Lot Covered _____ Site Plan Attached Yes <input type="checkbox"/> No <input type="checkbox"/>	(F) Type of Frame () Wood () Masonry () Other _____	(G) Type of Heating () Gas () Electric () Other _____
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(H) Parking Spaces	Enclosed _____ Outdoors _____ Handicap _____
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(I) Validation	Fee \$ _____ Receipt No. _____
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Applicant Signature _____	City Authorization: Signature _____ Title _____
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(J) Contractor Information		
Registered Y/N	Name	Contact / Phone No.
Sub Contractors _____ N/A _____ List Attached _____		