



Town of Washington

Application for Building Permit

I hereby certify that I have read, do understand, and will comply with the following: (Please read, initial each, then sign)

1. The work covered by this application may not be commenced before the issuance of a Building Permit. Work begun prior to the issuance of a Building Permit will be subject to an additional fee of 55%. ST
2. Building Permits shall be visibly displayed at the work site and remain visible until the project has been completed. ST
3. All work shall be performed in accordance with the construction documents submitted and accepted as part of the application. The Building Inspector shall be notified immediately in the event of changes occurring during construction. ST
4. A building permit becomes void if the work is not started within 180 days of issue. Building permits expire 1 year after issue, and may be renewed for up to (2) 6 month periods, renewal fee is 55% of the original fee. ST
5. The applicant agrees to comply with all applicable State and Town laws, ordinances and regulations. ST
6. Work shall remain accessible and exposed until inspected and accepted by the Building Inspector, and it is the responsibility of the applicant to schedule all required inspections. ST
7. No structure or improvement may be occupied or used in whole or in part for any purpose whatsoever until a Certificate of Occupancy or Certificate of Compliance has been issued. ST
8. The applicant does hereby give consent to representatives of the Town of Washington, including, but not limited to the Building Inspector, Zoning Administrator or Assessor to conduct such inspections as they deem necessary in relation to this building permit application, date and time of inspections to be scheduled in advance with the property owner or their representative. ST

Applicant: *Sheryl Lynn Todd Prueger* Date: 4/14/25
 SIGNATURE

Building Inspector: _____ Date: _____

FOR OFFICE USE ONLY: Permit Number: _____ Permit Fee: _____ Check Number: _____

Zoning Approval No Open Permits or Violations Insurance Plans and Site Plan Plan Review

Reason if Denied/Referred: _____

Type of Construction: **I II III IV V A B** Use and Occupancy Classification: _____

Assembly Occupant Load: _____ Automatic Sprinkler System: **Y N** Required: **Y N**

Bedrooms: _____ # Bathrooms: _____ # Kitchens: _____ Basement Type: _____ Finished: **Y N** Sq Ft: _____

Walls: _____ Siding: _____ Roof: _____ Finished Attic: **Y N**

Insulation: Ceiling _____ Walls: _____ Floor: _____ Slab: _____ Foundation: _____

