



TOWN OF WESTPORT MASONRY FIREPLACE PERMIT APPLICATION

This Form To Be Completely Filled Out By Applicant

Address of Work:

Building Permit No.:

Owners Name:

Address:

City/Town:

State:

Zip:

Phone (home & day):

Contractor:

Address:

City/Town:

State:

Zip:

Phone (office):

Phone (cell):

E-mail:

Description of Work

Number of Fireplaces:

Basement:

First Floor:

Second Floor:

Other:

I, THE UNDERSIGNED, in accordance with the Building Code of the State of Connecticut, hereby applies for a permit to construct a masonry fireplace and chimney and agrees to conform strictly to the Building Code and to give The Town of Westport notice when the hearth and fireplace throat are ready for inspections.

Print Name:

Signature:

Date: