

NO INCOMPLETE APPLICATIONS WILL BE ACCEPTED

HOW TO FILL OUT THE BUILDING ADDITION/RENOVATION/ACCESSORY STRUCTURE APPLICATION

- Applicant must fill out all sections of the contact information (e-mails and phone numbers are required).
- Check off which type of application is being submitted (Building addition, Renovation, Accessory Structure, or Building Conversion).
 - Separate applications may be required if any combination of the above project types is proposed.
- Applicants must give a description of what the proposed project will consist of. (Performing winterization; type and number of rooms being added; square footage of house addition, type of structures to be added; footprint changes, etc.)
 - Example: “a 1200 square foot addition to include two bedrooms and a 1 full bath, to an existing 5-bedroom house.”
 - Example: “Renovation of Master bedroom, with kitchen expansion, replace fixtures in two bathrooms”
 - Example: “500 square foot driveway expansion or bluestone patio with cement base”
 - Example: “1800 square foot pole barn, with ½ bathroom”

Addition/Renovation Section:

- **Pertains to the proposed project**, what is the project proposing to add to the existing dwelling/structure?
 - List the number of bedrooms that are proposed in the addition/renovation.
 - List the number of bathrooms that are proposed in the addition/renovation.
 - List the number of water use fixtures that are proposed in the addition/renovation. (sink, toilet, shower, bidet, etc.)
 - List the number of other rooms (besides bedrooms) that are proposed in the addition/renovation.
 - **List number of oversized bathtubs** that will be added in the addition/renovation (any tub over 99 gallons is considered oversized).
 - Will the addition/renovation/accessory structure have heat?
 - Will the addition/renovation increase the existing dwelling’s footprint?
 - **Will the addition/renovation include footing drains?**
 - If unknown, the applicant should ask the engineer, contractor, or architect.
 - If still unknown, assume “yes”.
 - (example: a 1200 square foot heated addition, that will be adding two bedrooms and 1 full bath, with 0 tubs over 99 gallons, 4 water use fixtures, 0 other rooms, and will increase the existing house footprint and install footing drains).

Existing Structure Section:

- **Pertains to the existing dwelling/structure.**
 - Residential or non-residential buildings.
 - List the number of existing bedrooms in the dwelling
 - List the number of existing bathrooms in the dwelling.
 - EXISTING NUMBER OF OVERSIZED BATHTUBS (any tub over 99 gallons must be counted)

- **DO NOT LEAVE BLANK**
- Size of existing structure (ex: 7500 square feet)
- What type of water supply (well or public water) serves the existing structure
- Are there footing drains around the existing structure?
 - **DO NOT LEAVE BLANK**- if unknown, refer to an existing application on file, check with the Town's Building department or assume yes.

Existing septic system section:

- Utilize an existing application OR AHD As built/permit to discharge.
 - **DO NOT LEAVE BLANK**
- Applicant to check with town if sewers are available. (Sewers are only available in parts of Westport).
- Curtain drains will be located on an as built or permit to discharge. If unknown, assume no.
- Soil testing for septic system design differs than soil testing for wetland identification.



Aspetuck Health District 180 Bayberry Lane Westport, Connecticut 06880
T: 203.227.9571 F: 203.221.7199 W: www.aspetuckhd.org

INSTRUCTIONS FOR COMPLETING APPLICATION FOR A BUILDING ADDITION, BUILDING CONVERSION, BUILDING RENOVATION OR ACCESSORY STRUCTURE

Fee is Non-Refundable. Permit Expires in 1 year from Issue

Please complete application and attach the following:

Two (2) copies of current (A2) survey drawn to scale showing North direction with an arrow. Survey must show all existing structures and additions on property. The survey will not be accepted without the existing septic, well or water line shown.

- a) Proposed addition,
- b) Location and size of septic tank and leaching area,
- c) Well location or public water service, if applicable. All utility trenches must be shown. d) Water course or wetland area,
- e) Other permanent buildings or structures,
- f) Easements for other utilities or other purposes.

Two (2) sets of building plans (labeled with address), including basement and attic.

Two (2) copies of floor plan of existing rooms and the proposed enlargement showing water use fixtures, i.e., whirlpools, hot tubs, sinks, etc. (labeled with address).

A letter of authorization must accompany application, if not signed by the owner.

Check payable to *Aspetuck Health District* in the amount of:

\$320.00*	Building Addition, Conversion, or Renovation (Habitable)	(In house or apartment, foundation change, additional living space, including a room over the garage, etc.)
\$265.00*	Accessory Structure (Non-Habitable)	(Decks, garages, porches.)

**Note: A \$115.00 fee is charged for retroactive filing Applications.*



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APPLICATION FOR A BUILDING ADDITION, BUILDING CONVERSION, RENOVATION OR ACCESSORY STRUCTURE

Date: _____ Owner's Name _____

Property Address: _____

Type of Application: Building Addition Renovation Accessory Structure (Deck, Garage, Porch) Building Conversion, Change in Use (Winterization)

Give a Brief Description of (Performing winterization; type and number of rooms being added; square footage of house

Proposed Application: _____ addition, type of structures to be added, and footprint change, etc.)

Addition/Renovation: No. of bedrooms: _____ No. of bathrooms: _____ No. water use fixtures _____
Increase in house footprint? Yes No No. of other rooms: _____ No. of tubs more than 99 gal.: _____ Heat? Yes No
Approximate proposed increase in floor area (in Sq. Ft.) _____ Are footing or foundation drains required? Yes No

Existing Structure: Residential Non-Residential (Describe): _____
No. of bedrooms: _____ No. of bathrooms: _____ No. of oversized tubs (>99 gal.) _____
Approximate floor area (in Sq. Ft.) _____ Water supply: Private well Public water
Footing or foundation drains present? Yes No

Existing Septic System: Year system was installed? _____ New Repair Public sewer available? Yes No
Size of septic tank: _____ gals. Size and type of leaching system: _____
Curtain drain? Yes No Has any soil testing been performed on the property? Yes No
If yes, when and by whom? _____
Owner or Duly Authorized Representative (Print) _____ Contact Phone Number: _____
Email: _____

Signed: _____ Date _____
Owner or Duly Authorized Representative Date

ASPETUCK HEALTH DISTRICT REMARKS:
Compliance with 19-13-B100a required Yes No Possible storm drainage structure required by Engineering Yes No
Soils evaluation required Yes No SSDS proposal required Yes No Wetlands Yes No Don't know

Comments: _____

Approved: _____ DATE: _____

FINAL AHD INSPECTION REQUIRED AT COMPLETION OF JOB		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Final Inspection	Final Inspection/Final Approval: _____	Sanitarian	Date