

TOWN OF GLASTONBURY
APPLICATION FOR BUILDING PERMIT SINGLE FAMILY/2 FAMILY DWELLING
CONNECTICUT STATE BUILDING CODE

DEPARTMENT DECISION

Approved _____ Disapproved _____
 Date _____ Inspector _____



COSTS		FEES	
STRUCTURAL		STRUCTURAL	
PLUMBING		PLUMBING	
ELECTRICAL		ELECTRICAL	
HEATING/AC		HEATING/AC	
TOTAL		ED. FEES:	
		TOTAL	

Actual cost affidavits may be requested

(PLEASE PRINT OR TYPE ALL ENTRIES)

Work Location / Street Address: 57 Laurel Trail Lot # _____
 Owner's Name: Justin Salvio Street Address: 57 Laurel Trail State: CT Zip: 06033
 Home Phone #: 860 281 6611 Work Phone #: 860 301 8398 Mobile Phone #: _____

Applicant/Contractor's Name: _____ Address: _____ Town: _____ State: _____ Zip: _____
 Home Phone #: _____ Work Phone #: _____ Cell Phone #: _____ Contractor's License #: _____

PURPOSE OF THIS PERMIT: #1 Shed NEW #2 ~~Front Porch~~ ADDITION #2 ~~Front Porch~~ ALTERATION _____ OTHER _____

SQUARE FOOTAGE OF WORK: Bsmt. NA 1st. Fl. _____ 2nd. Fl. NA 3rd. Fl. NA Total _____

CHECK APPROPRIATE: NA Septic NA City Sewer NA Well Water NA City Water

DESCRIPTION OF WORK: ~~Shed~~ Front Porch - Gable Roof cover
 See Reverse Side for Further Description

CERTIFICATION: I hereby certify that: _____ I am the owner of record of the property or _____ the proposed work is authorized by the owner Of record and/or I have been authorized to make this application as an authorized agent, and we agree to conform to all applicable laws, Regulations and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.

Justin Salvio
 PRINT NAME

 SIGNATURE OF OWNER/ AUTHORIZED AGENT
07/15/20
 DATE

ZONING INFORMATION

Dist. From	Zone	
Street Line	Rear Line	
Left Line	Right Line	
ZBA/TPZ App.	Filed W/ T.C.	

E-MAIL ADDRESS: justinsalvio@gmail.com

Permit #:

DIVISION REVIEW & OWNER/AGENT ACCEPTANCE

(Additions, sheds, swimming pools & other accessory uses)

RESUBMISSION

To be completed by applicant or his/her representative: Date: 07/10/20
 Applicant: Justin Salvia Phone #'s: 860 301 8398 860 781 6611
 Address of Proposed Work: 57 Laurel Tr., Blastonbury, CT 06033
 Type of Work Proposed in Detail: 8' x 6' Front Porch / Stoop Replacement
 City Water ___ Well ___ Sanitary Sewer ___ Septic System ___ Tanks ≥250 Gal. ___
 * A DETAILED PLAN OF PROPOSED WORK MUST BE INCLUDED (with Septic & Well Location, if applicable)

Engineering Conditions of Approval:

Authorized Engineering Agent: _____ Date: _____

Health Department Conditions of Approval: **B100a Review Fee \$50** Yes No

Authorized Health Officer: _____ Date: _____

Wetland Conditions of Approval:

_____ The Proposed Work Is Not Within 100' of a Wetland & Meets All Environmental Requirements
 _____ The Proposed Work is Within 100' of a Wetland & Must Meet All Requirements of State Statutes
 Wetland Agents Approval Letter Dated _____

Community Development Conditions of Approval:

Authorized Community Dev. Agent: _____ Date: _____

Fire Marshal Conditions of Approval:

Authorized Fire Marshal: _____ Date: _____

Zoning/Building Department Conditions of Approval:

Authorized Building/Zoning Official: _____ Date: _____

The undersigned has read the conditions and requirements listed above and understands they are required to be completed and maintained as part of the project approval.

TOWN OF GLASTONBURY

Notice to Building Permit Applicants

Completion and Signature of the following form is required in order to process your building permit application*. Please note that this component of the process is intended to ensure that you are advised of all applicable regulations and permits necessary for the proposed property improvement. Early identification of permits required will expedite processing of your building permit application and help to avoid improvement implementation delays associated with mid-construction notification of additional requirements. The Town encourages property owners to pursue projects that beautify and serve to better meet individual needs within established regulatory boundaries.

Applicable regulations are designed to protect the environment and overall property values throughout Town. Your cooperation in recognizing and observing local regulatory requirements will assist in keeping Glastonbury beautiful and in maintaining the Town as a wonderful place to live, work, and conduct business.

*Building permit applications involving improvements/renovations that are limited to the following shall not be required to complete this form unless the subject property is located within a designated Historic District or has been the subject of previous Town Plan and Zoning Commission special permit approval, Town Council approved Planned Area Development or Adaptive Redevelopment Zone approval

- Roof replacement
- Window replacement
- Siding/fascia replacement
- Interior electrical upgrades and/or modifications
- Replacement of interior mechanical system components

****Improvements & renovations that fall under Connecticut Public Health Code 19-13-B100a will require a separate \$50 fee to the Health Department. Payment will be required before a building permit will be issued.**

TOWN OF GLASTONBURY
PERMIT SCREENING FORM

Name: Justin Salvio

Address: 57 Laurel Trail, Glastonbury, CT

Address of Proposed Improvement: 57 Laurel Trail

Telephone Number: 860 301 8398

Email: justinsalvio@gmail.com

Date: 7/15/20

Brief Description of Proposed Improvement: Gable Roof to
cover front porch / stoop

**TOWN OF GLASTONBURY
PERMIT SCREENING FORM**

SECTION 1: COMMUNITY DEVELOPMENT; PLANNING AND LAND USE SERVICES
(860) 652-7510

1.1 List zoning district of property in question.

If "Unsure", please visit our website at the following link: <https://gis.glastonbury-ct.gov/SLV/Viewer.html?Viewer=Glastonbury%20Public>, or visit the Department of Community Development for further assistance.

1.2a - Is this project the subject of a previously issued Town Plan and Zoning Commission Special Permit approval, Town Council approved Planned Area Development or Adaptive Redevelopment Zone approval?

Yes _____ No _____ *If yes, please see the Office of Community Development staff and note additional signature requirements on Page 12.

1.2b - Is this project part of an approved subdivision? Yes _____ No _____
If yes, identify the name of the subdivision _____ Date of Approval _____

*Attach all conditions of approval of the subdivision with this application. (Please see Office of Community Development for conditions of approval)

1.3 Is your proposed project residential or commercial in nature?

Commercial _____ Residential _____

If "Residential", please answer Questions 1.4 – 1.7. If "Commercial", skip to Question #1.7. If you answer "Yes" to any of the questions in this section, please see a representative of the Community Development Department. Land use regulations may apply.

RESIDENTIAL

1.4 Are you building a house or expanding/renovating an existing house?

Yes _____ No _____

1.5 Are you building an accessory structure (i.e. a garage or shed)?

Yes _____ No _____

1.6 Are you creating an accessory apartment/in-law apartment?

Yes _____ No _____

1.7 Are you changing the character or features of the land in any way (i.e. regrading, removing, or bringing in fill?)

Yes _____ No _____

COMMERCIAL

If your proposal is for a "Commercial" use, please answer Questions 1.8 – 1.13.

If yes to any questions 1.8 – 1.13, you will need to see Office of Community Development for a change to existing Special Permit or for a new Special Permit.

1.8 Are you building a new commercial structure or enlarging an existing one?

Yes _____ No _____

1.9 Is the proposed use different from the previous use? (i.e. a retail store to a hair salon, or a hair salon to a food service establishment).

Yes _____ No _____

1.10 Do you plan to make any changes to the exterior of the building? (Includes, but not limited to, windows, awnings, doors, siding, signage, lighting, etc.).

Yes _____ No _____

1.11 Are you making any changes to the site itself? (Includes, but not limited to, parking, lighting, landscaping, etc.).

Yes _____ No _____

1.12 Are you adding any new structures?

Yes _____ No _____

1.13 Are you proposing modifications to a restaurant dining area that will change the number, type or location of seating within or outside of the establishment?

Yes _____ No _____

SECTION 2: HEALTH DEPARTMENT – (860) 652-7534

There is a \$50 review fee due to the Health Dept. before this application will be accepted.

2.1 Are you adding or finishing any rooms that afford privacy and have access to a full bathroom?

Yes _____ No _____

If "Yes", please see a Health Department Sanitarian for guidance.

2.2 Are you finishing a basement that includes adding a full bathroom?

Yes _____ No _____

If "Yes", please see a Health Department Sanitarian for guidance.

2.3 Does your proposed improvement involve construction that includes installation of a footing drain, yard drain, or other type of drain that discharges below ground level?

Yes _____ No _____

If "Yes", a separating distance of 25' from your potable water well will apply. Please see a Health Department representative if you are unsure of your water source or if you are unsure of your well location.

2.4 Does your property use a septic system for sewage disposal?

Yes _____ No _____

If "Yes", please see a Health Department Sanitarian to determine if your proposed improvement will require a permit.

2.5 Are you proposing installation of a pool?

Yes _____ No _____

If "Yes", and your property uses a septic system for sewage disposal, please see a Health Department representative for guidance. Setback distances from the septic system may apply.

2.6. Does your proposed improvement include installation of any new foundation drains?

Yes _____ No _____

If "Yes", and your property uses a septic system for sewage disposal, please see a Health Department representative for guidance. Setback distances from the septic system may apply.

2.7 Does your property use a private well for potable water? Does the well have any type of treatment system? If it has a treatment system, does the backwash discharge to a separate leaching system on the property?

Yes _____ No _____ *There is a well No treatment system*

If "Yes" to all and your proposed improvement will obligate additional land area on your property, please see a Health Department representative for guidance. Setback distances from the improvement may apply.

SECTION 3: WETLANDS – (860) 652-7510

3.1 Do you know if there are wetlands on your property?

Yes _____ No _____

If "Yes", please contact the Environmental Planner in the Department of Community Development for further guidance.

If "No", please contact the Environmental Planner in the Department of Community Development or visit our GIS Parcel Viewer: <https://gis.glastonbury-ct.gov/SLV/Viewer.html?Viewer=Glastonbury%20Public>.

If you answer "Yes" or "Unsure" to Questions 3.2, 3.3 and 3.4, please contact the Environmental Planner in the Office of Community Development. Inland Wetlands regulations may apply.

3.2 Are there any wetlands within 100 feet of the proposed activity?

_____ Yes
_____ No
_____ Unsure

3.3 Will there also be any:

Excavation Yes _____ No _____
Filling Yes _____ No _____
Regrading Yes _____ No _____
Retaining Walls Yes _____ No _____
Fence(s) Yes _____ No _____

3.4 Are there any conservation easement areas within 50 feet of the proposed activity?

____ Yes
____ No
____ Unsure

3.5 Approximately how large of a land area is involved with clearing the vegetation in preparation of the proposed activity?

48 Square Feet

Applicants are advised of the potential need to install erosion and sedimentation controls in conjunction with any approved improvement as determined by the Environmental Planner.

SECTION 4: FIRE MARSHAL- (860) 652-7526

4.1 Does your project/permit application involve construction or alteration of a one or two-family dwelling?

Yes No _____

If "Yes", a building permit will be required, but Fire Marshal review will not be necessary. If your project includes construction or modification of another type of structure that accommodates human occupancy, your project/permit will require Fire Marshal review. Examples are work conducted at commercial buildings, offices, stores, apartments, day care centers, assisted living facilities, nursing homes, shopping malls, etc. Any change of use or occupancy type will require a review.

4.2 Does your project/proposal involve the use or connection, installation, or removal of mechanical equipment that utilizes fuels such as natural gas, propane, or heating oils?

Yes _____ No

If "Yes", you are required to apply for the appropriate permits from the Building Department for review.

4.3 Does your project/permit application involve the installation of above or below-ground fuel storage tanks?

Yes _____ No

If "Yes", you will be required to apply for the appropriate permits from the Building Department.

4.4 Does your project/proposal involve the removal of above or below-ground fuel storage tanks?

5.1a Will your construction project include a new connection to the existing sanitary sewer system?

Yes _____

No _____

If "Yes", Water Pollution Control Authority (WPCA) Assessment of Benefits and Sewer Permit are required from the Engineering Division.

5.1b Will your construction project include a residential apartment (i.e. in-law apartment) to an existing single-family home (converting the existing structure into a multi-family dwelling)?

Yes _____

No _____

If "Yes", WPCA Assessment of Benefits and Sewer Permit are required from the Engineering Division.

5.1c Will your construction project be changing or expanding the existing permitted use of an existing commercial or industrial building (i.e. retail store to restaurant, storage space to office space, etc.)?

Yes _____

No _____

If "Yes", WPCA Supplemental Assessment of Benefits, Sewer Permit, and the CT DEEP Fats Oil and Grease (FOG) General Permit Requirements may apply.

Please see an Engineering Division representative for further information.

5.1d Will your construction project require any excavation work within 5 feet of the existing sanitary sewer lateral?

Yes _____

No _____

If "Yes", see Engineering Division for sewer protection/alteration requirements. If unsure of the sewer lateral location, please see Engineering Division staff for assistance.

5.1e Will your construction project include any disturbance within an existing storm drainage or sanitary sewer easement located on your property?

Yes _____

No _____

If "Yes", Engineering Division review and approval required. If unsure, please see Engineering Division staff for assistance.

5.2 Will your construction project require any excavation or other disturbance to the Town right-of-way? (The Town right-of-way width varies by street, but generally includes the area 12 feet behind the face of curb/edge of pavement or 1 foot behind the sidewalk.)

Yes _____

No

If "Yes", your project will require an application from the Fire Marshal's office.

4.5 Does your project/proposal involve the erection of a tent 400 square feet or larger?

Yes _____

No

If "Yes", your project will require approval by the Fire Marshal's office.

4.6 Does your project/proposal involve work on a fire alarm, fire sprinkler, or extinguishing system in any occupancy other than a one or two-family dwelling?

Yes _____

No

If "Yes", your project will require appropriate permits from the Building Department.

4.7 Does your project/event involve the gathering of more than 50 people for any type of public assembly where a liquor license is required?

Yes _____

No

If "Yes", your project/event and applications will require review and signature from the Fire Marshal's office.

4.8 The Fire Marshal's office also reviews and issues permits for specialized issues that are listed on the Town of Glastonbury website. These include permits for open burning.
<http://www.glastonbury-ct.gov/departments/departments-directory-a-k/fire-marshall-office/faq#162>

SECTION 5: ENGINEERING DIVISION – (860) 652-7735

5.1 Is your property connected to the existing public sanitary sewer?

Yes _____

No

If "No", answer questions 5.1a and 5.1e.

If "Yes", answer questions 5.1b, 5.1c, 5.1d, and 5.1e.

If unsure, please see a representative of the Engineering Division.

Yes _____

No _____

If "Yes", a right-of-way permit is required from Engineering Division.

(Examples of work that may require a right-of-way permit are: construction entrance installation for new construction; installation of utility services; driveway installation, repair, or replacement; installation of walkways, retaining walls, landscaping, fences, etc.).

5.3 Will your construction project create any piped or concentrated discharges of stormwater into the Town right-of-way or onto an abutting property?

Yes _____

No _____

If "Yes", see Engineering Division for guidance.

I, Justin Salvio, certify that I have provided truthful answers to questions posed in this document and understand my obligation to identify and obtain all permits required in conjunction with the proposed improvement. I understand that issuance of a building permit alone does not signify compliance with all Town requirements. I further understand my obligation to comply with approval conditions of all permits granted and to notify Town of Glastonbury staff regarding any changes proposed to plans approved by permitting agencies.



Signature of Property Owner

07/20/20
Date

If your proposed activity is the subject of a previously issued Town Plan and Zoning Commission Special Permit approval or a Town Council Planned Area Development approval, signatures as noted below are required:

Property Owner:

Date

Property Tenant:
(if different from Owner and Tenant is responsible
for project completion)

Date

General Contractor:

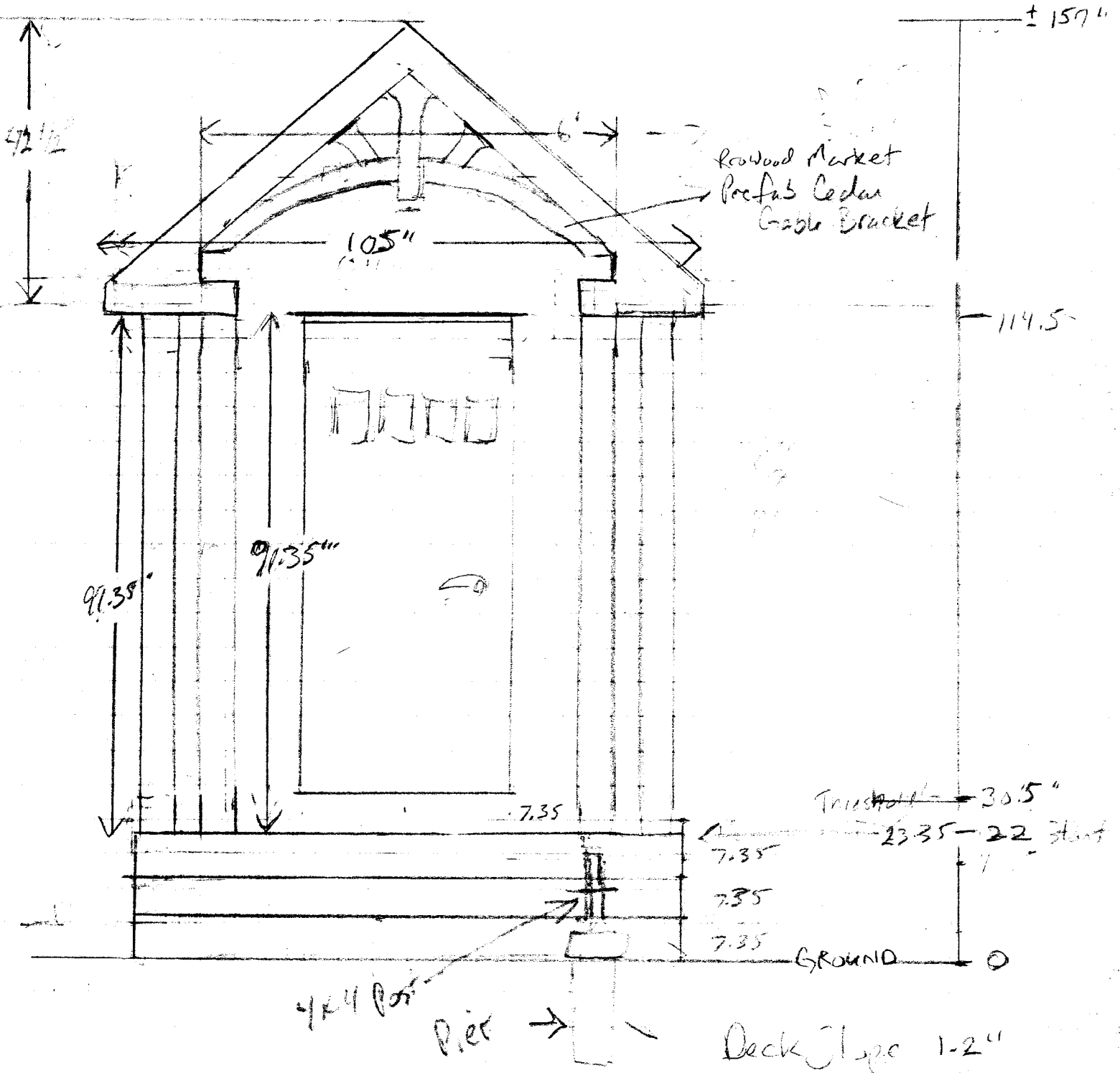
Date

Engineer/Architect of Record:

Date

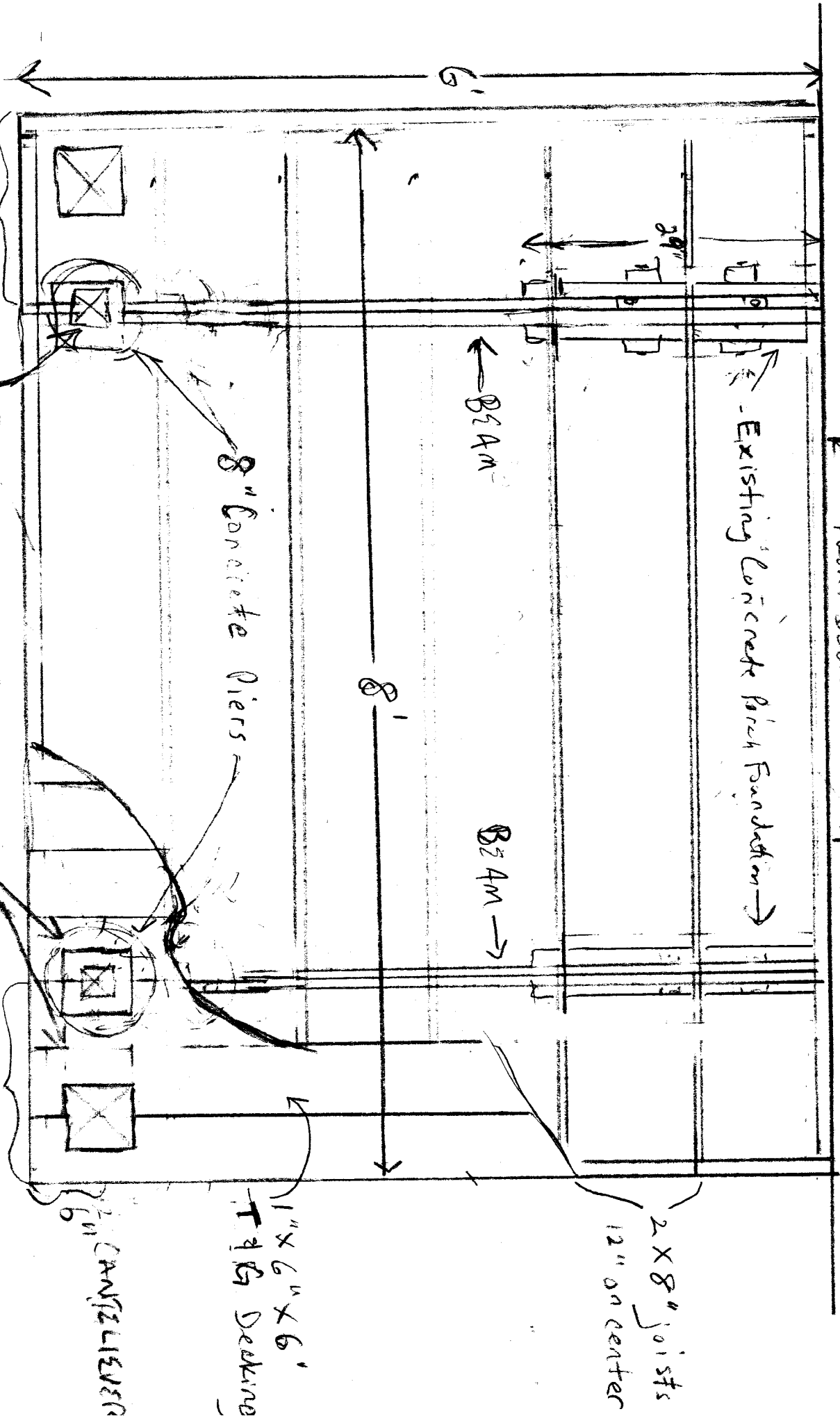
FRONT PORCH - FRONT VIEW

10/12 Roof Pitch (39.81°) (3'4" : 8')



OVERHEAD VIEW-FLOOR (Not connected to Ledger House)

← FRONT DOOR →



18" CANTILEVER 4 X 4 POSTS

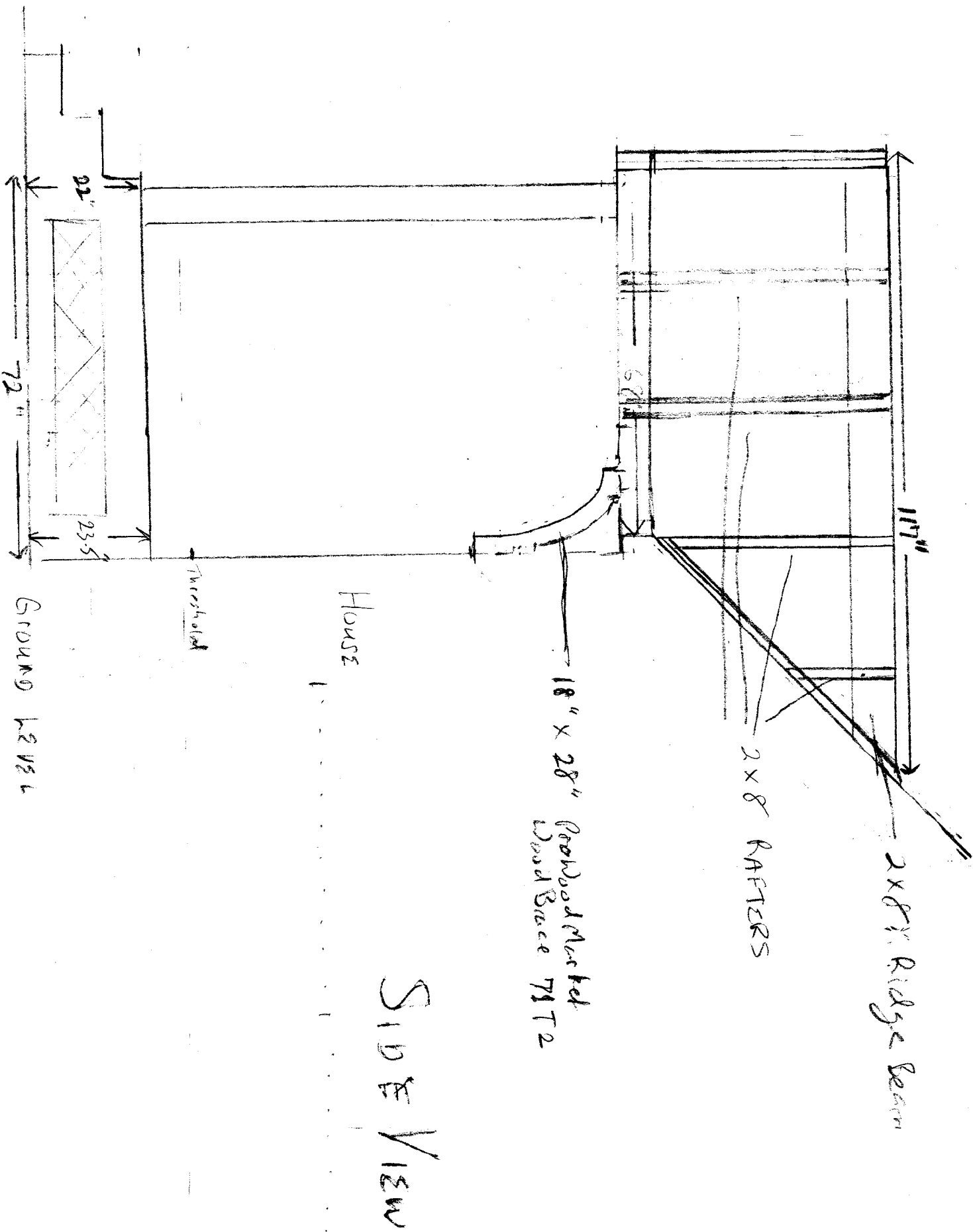
6 X 6 Roof Posts

18" CANTILEVER

1" X 6" X 6" T & G Decking

2 X 8" joists 12" on center

18" CANTILEVER



2x8 Ridge Beam

2x8 RAFTERS

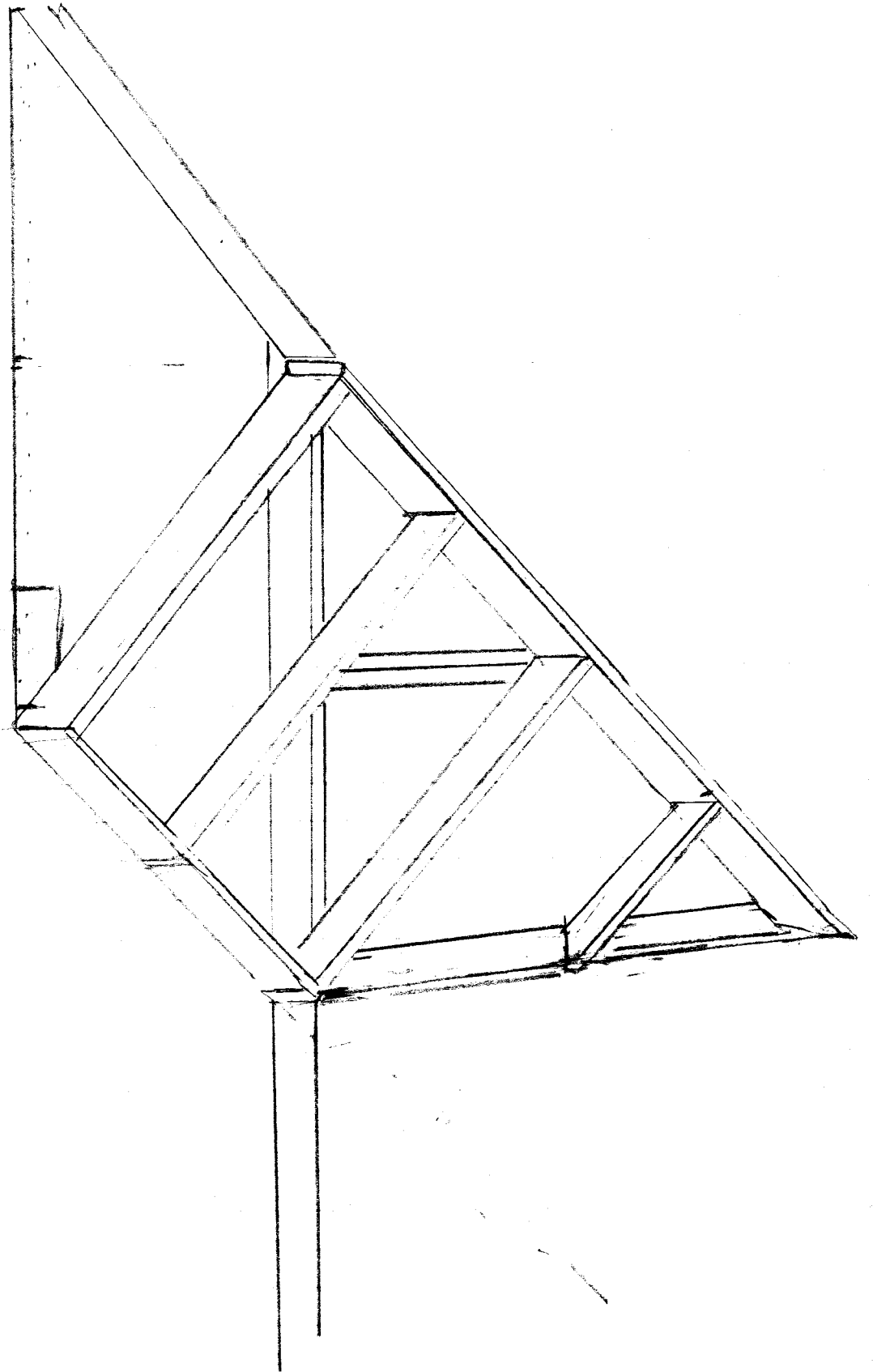
18" x 28" ProWood Market Wood Brace 71T2

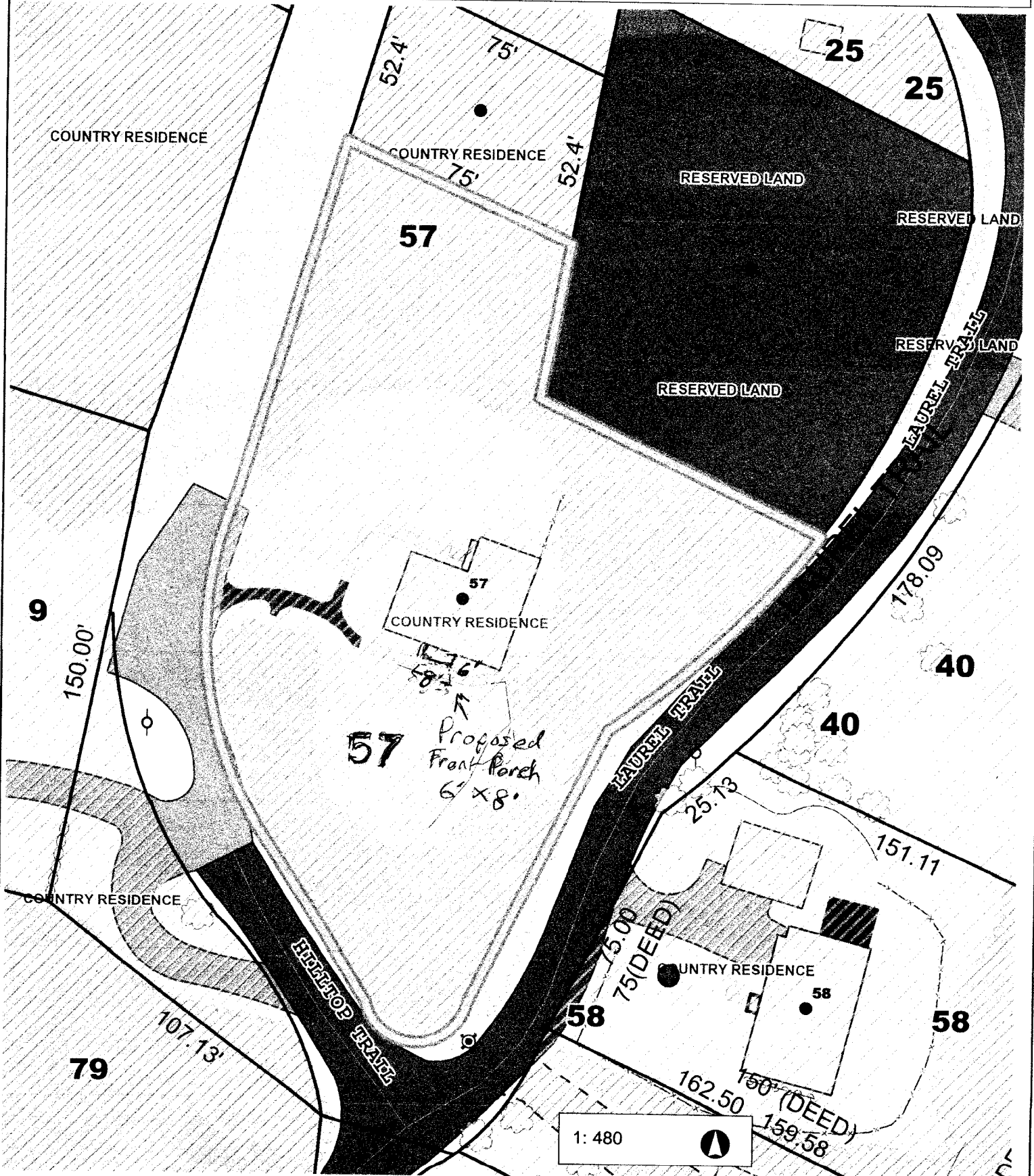
House

Threshold

Ground Level

SIDE VIEW





1: 480



NAD_1983_StatePlane_Connecticut_FIPS_0600_Feet

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This map is a user generated static output from an Internet mapping site and is for reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.

THIS MAP IS NOT TO BE USED FOR NAVIGATION

FRONT PORCH PLANS
57 LAUREL TRAIL
GLASTONBURY, CT

OWNER: JUSTIN SALVIO

HOUSE/PORCH FOOTPRINT
57 LAUREL TRAIL
GLASTONBURY, CT

