

# Town of New Milford

## Permit & Approval Requirements

Applicant Name: \_\_\_\_\_

Location/Address: \_\_\_\_\_

Single Family    
 Multi-family    
 Commercial

Office	Signature	Date	
<b>Tax Collector</b> Ground floor			
<b>Health Dept.</b> Second floor			C.O sign-off
<b>Inland/Wetlands</b> Basement			C.O sign-off
<b>Zoning Dept.</b> Basement			C.O sign-off
<b>Sewer</b> 123 west street			C.O sign-off
<b>Fire Marshal</b> Second floor			C.O sign-off
<b>Public Works</b> 6 Youngs field rd.			C.O sign-off