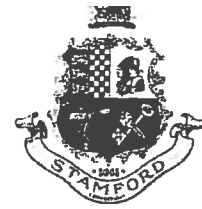


CITY OF STAMFORD
 DEPARTMENT OF BUILDING
 888 WASHINGTON BLVD
 STAMFORD, CT 06901



AFFIDAVIT OF COST

STATE OF CONNECTICUT
 COUNTY OF FAIRFIELD } ss:

_____, being duly sworn, deposes and says: that the actual cost, to him, for which
 (OWNER, TENANT-LEASEHOLDER)

Permit No. _____ was issued to Contractors: _____

and Street No. _____ to be the sum of:

\$ _____ Actual Cost of Construction

\$ _____ Estimated Cost for Construction

\$ _____ Adjusted Cost of Construction

*COST – The term “Cost” means the actual value of all services, labor materials, construction, equipment, rental and service equipment installations: but not including cost of such grading, decorating or other intended primarily for appearance or embellishment and which is not necessary for the safe and lawful use of the building or structure (such as carpeting and furniture).

 Signature Owner, Tenant or Leaseholder

Sworn to before me this

_____ day of _____

 NOTARY PUBLIC

DO NOT FILL IN BELOW THIS LINE

	TOTAL	PERMIT FEE	STATE FEE	ESTIMATED COST
TOTAL FEE DUE \$	_____	_____	_____	_____
AMOUNT PAID \$	_____	_____	_____	_____
BALANCE DUE \$	_____	_____	_____	_____

DATE PAID _____

REVIEWED BY _____