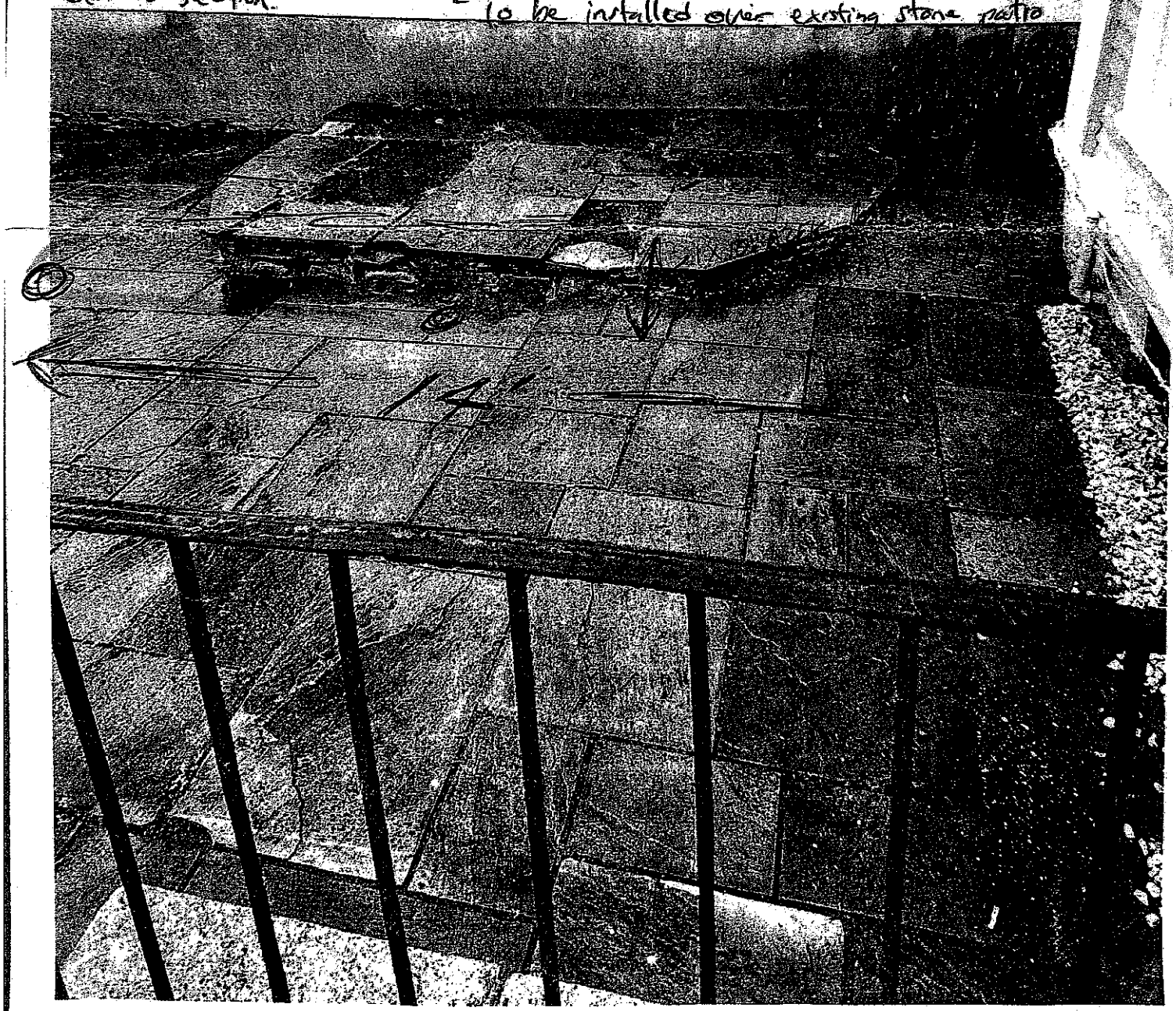
- new ground-level platform to
C'est La Vie front Patio.

- Depending on finished elevation we may need to install 1 section of railing at South end 10' section.

- Construct 10' deep x 14' wide freestanding, ground-level platform on piers using PT framing and posts and finish w/ synthetic decking
- To be installed over existing stone patio



TOWN OF EAST HADDAM

ZONING AND BUILDING APPLICATION

Zoning: 860-873-5031 • Building: 860-873-5024

*Your application to the building department will not be reviewed until all other requirements have been completed

Permit # _____ Location 9 Main St. (No. / Street)

Map # _____ Lot # _____ Lot Size _____ Zone _____

Applicant Martinez Construction LLC Rafael Martinez

Mailing Address P.O. Box 10 (No. / Street / PO Box)

Clinton (Town) CT (State) 06413 (Zip)

860-301-7045 (Phone number) NHIC.0017290 (Contractors Registration No.)

E Mail Address: rdmartinez242@yahoo.com

Owner's Name Jimmy's Legacy Bar + Grill

Mailing Address 9 Main St (No. / Street / PO Box)

E. Haddam (Town) CT (State) 06423 (Zip)

860-213-0564 (Phone number)

Date of filing with building department

CONSTRUCTION: New ____ Alteration ____ Addition X Repair ____ Estimated Cost 9,000

BRIEF DESCRIPTION OF PROPOSED WORK Construct ground level platform 10X14 on existing patio over raised section of patio. All PT framing with proper fasteners and posts/concrete set to below frost line. Finish w/ composite decking and railing along south side

PROPOSED NEW WORK: Total Sq. Ft. of New Work 140 | No. of Stories ____ | Building Height ____ | Use Group ____ | Construction Type Deck

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, HEATING, PLUMBING, WELL, WELL PUMP AND SEPTIC SYSTEMS

REQUIRED APPROVALS

__Tax Collector_____

__Health District._____

Comments_____

__Fire Marshal_____

Comments_____

__Variance_____

__Wetlands_____

__Driveway Permit_____

__Historic Comm._____

Is any work being done in an Historic District? YES____ NO____

Is any work being done within 100 feet of a lake, pond, river, perennial stream and/or soil types designated as poorly drained, very poorly drained, alluvial and flood plain? YES____ NO____

Certification: I hereby certify that ( ) I am the owner of record of the named property or ( ) that 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 applicable laws, regulations and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.

Workers Comp. Insurance_____

Affidavit_____

OWNER / AGENT _____ DATE 5/19/25

OFFICE USE ONLY

____APPROVED____DISAPPROVED Permit Fee Pd_____Ck#_____

Zoning Official_____Date_____

Comments_____

____APPROVED____DISAPPROVED Permit Fee Pd_____Ck#_____

Building Official_____Date_____

Comments_____