Office of the State Building Inspector

Form for Posting Position Wanted

I would like my name placed on your list for "Available Licensed Code Officials." Please **print or type** the following information and return it to the Office of the State Building Inspector:

Applicant's Name:	
Home Address:	
City/State/Zip:	
Home Telephone:()	
Email (optional):	
Check the category(s) below that you are licensed as. You will be listed in t category as an available Code Official.	that
Building Official Assistant Building Official	
Availability:	
Fill-in Other	
Please 🗌 do 🗌 do not post this information on the Internet.	
The above information is true and correct to the best of my knowledge.	
Signature Date Signat	ed
Please note that this information will be retained on the list for one calendar y (January – December). Notify this office in writing of any changes. Mail or completed form to:	
DAS-Office of the State Building Inspector 165 Capitol Avenue, Room 265 Hartford, CT 06106 http://www.ct.gov/dcs	
Telephone: (860) 713-5900 Fax: (860) 713-7410	