



DEPARTMENT OF ADMINISTRATIVE SERVICES

PROPOSED CHANGE OF THE CONNECTICUT STATE  
BUILDING CODE AND FIRE SAFETY CODE

DATE SUBMITTED: \_\_\_\_\_

**CODE INFORMATION**

Proposed change to: ☐ Building Code ☐ Fire Safety Code

Code section(s): \_\_\_\_\_  
\_\_\_\_\_

**PROPONENT INFORMATION**

Name: \_\_\_\_\_ Representing: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Town State Zip Code*

**PROPOSAL INFORMATION**

Description of change and reason for change (attach additional information as needed):  
\_\_\_\_\_

Proposed text change, addition or deletion (attach additional information as needed):  
\_\_\_\_\_

Supporting data and documents (attach additional information as needed)  
\_\_\_\_\_

☐ **This Proposal is original material.** (Note: Original material is considered to be the submitter's own idea based on or as a result of his/her own experience, thought or research and, to the best of his/her knowledge, is not copied from another source.)

☐ **This Comment is not original material, its source (if known) is as follows:** (such as material / code development proposal from a prior development cycle or proposal submitted to model code committee etc.)  
\_\_\_\_\_

☐ **I would like to make an in-person presentation of my proposal.**

**Release**

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*David Shulman*

Proponent's Signature

Printed Name

PLEASE EMAIL (PREFERRED) TO [DAS.CodesStandards@CT.GOV](mailto:DAS.CodesStandards@CT.GOV) OR MAIL OR FAX (SEE BELOW)

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