

**Town of Cornwall**  
**Building Department**  
PO Box 141  
Cornwall, CT 06754

Building Office  
26 Kent Road South  
bldginspection@cornwallct.gov

Office: (860) 672-0711  
Cell: (860) 480-9154

**Building Plan Return Form**

Date: \_\_\_\_\_

Location: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

I am the owner of the building plans for the above location and have received them.

\_\_\_\_\_  
**Signature of Owner of the Building Plans**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Office Use Only:**

Plans for Building Permit Number:

\_\_\_\_\_

Type of Job:

\_\_\_\_\_

\_\_\_\_\_  
Signature of Building Department

\_\_\_\_\_  
Date