



Town of Wallingford, Building Department

Concrete Record Requirement per C.G.S. Chapter 541 Section 29-265c

Project Address: _____

Date: _____

**Concrete Supplied By
Footings and/or Piers:** _____

**Concrete Supplied By
Walls:** _____

**Concrete Supplied By
Slab(s):** _____

Concrete Installed By Name/Business Name: _____

Concrete Installer Address: _____

Concrete Installer Phone Number: _____

Authorized Name: _____

Authorization Signature: _____