



PO Box 1618
 Eagle, CO 81631
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Permit #:

PROPERTY OWNER		PHONE	
MAILING ADDRESS			
CONTRACTOR / CONTACT PERSON		PHONE	
CONTRACTOR ADDRESS		CELL	
LICENSED PLUMBER		LICENSE NUMBER	
LICENSED ELECTRICIAN – ADDITIONAL ELECTRICAL PERMIT REQUIRED		LICENSE NUMBER	
JOB ADDRESS			
SUBDIVISION		PARCEL#	LOT
BLOCK			

Description of work:

IMPORTANT – COMPLETE ALL ITEMS AND MARK ALL APPLICABLE BOXES

A. SQUARE FOOTAGE Main Floor _____ Add. Floors _____ Basement _____ Crawlspace _____ Covered Porch _____ Decks _____ Garage _____ Other _____		B. PROPOSED USE <u>Residential</u> <input type="checkbox"/> One Family / Duplex <input type="checkbox"/> Multi Family – Enter number of units - _____ <input type="checkbox"/> Hotel, motel, or dormitory-Enter number of units - _____ <input type="checkbox"/> Garage – Single ___ Double ___ Attached ___ Detached ___ <input type="checkbox"/> Carport – Attached ___ Detached ___ <input type="checkbox"/> Patio – Attached ___ Detached ___ <input type="checkbox"/> Basement – Partial ___ Full ___ Finished ___ Unfinished ___ <input type="checkbox"/> Fireplace – Masonry ___ 0-Clearance ___ <input type="checkbox"/> Other _____ <u>Commercial</u> <input type="checkbox"/> Shell Only <input type="checkbox"/> Tenant Finish <input type="checkbox"/> Remodel /Addition <input type="checkbox"/> New Building		C. DEMOLITION <input type="checkbox"/> Site Plan <input type="checkbox"/> State Permit <input type="checkbox"/> Asbestos Permit D. TYPE OF IMPROVEMENT <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Remodel \ Finish <input type="checkbox"/> Repair, replacement <input type="checkbox"/> Fence <input type="checkbox"/> Other _____			
E. FEES: <input type="checkbox"/> Permit Fee: _____ <input type="checkbox"/> Plan Review: _____ <input type="checkbox"/> Use Tax: _____ <input type="checkbox"/> Water Tap: _____ <input type="checkbox"/> Sewer Tap: _____ <input type="checkbox"/> Other: _____ Total Fees: _____ Please check box when paid		G. CONSTRUCTION TYPE <input type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Other _____ NOTES:		I. TYPE OF SEWAGE DISPOSAL <input type="checkbox"/> Public <input type="checkbox"/> Individual (Septic tank) J. TYPE OF WATER SUPPLY <input type="checkbox"/> Private <input type="checkbox"/> Public K. OCCUPANCY Classification _____ Construction Type _____ <input type="checkbox"/> Separated <input type="checkbox"/> Non-Separated		L. MISCELLANEOUS Number of stories _____ Lot Size _____ Parking Spaces _____ Enclosed _____ Outdoors _____ M. RESIDENTIAL ONLY # of Bedrooms _____	
F. TOTAL VALUE Building Valuation \$ _____ Use Tax Valuation \$ _____		H. HEATING FUEL TYPE <input type="checkbox"/> Gas LP or NG <input type="checkbox"/> Electricity <input type="checkbox"/> Solar <input type="checkbox"/> Other _____					

The applicant, his agents and employees shall comply with all the rules, restrictions and requirements of the Town and Building Codes governing location, construction and erection of the above proposed work for which the permit is granted. The Town or its agents are authorized to order the immediate cessation of construction at anytime a violation of the codes or regulations appears to have occurred. Violation of any of the codes or regulations applicable may result in the revocation of this permit.

Buildings **MUST** conform with plans, as submitted to the Town. Any changes of plans or layout must be approved prior to the changes being made. Any change in the use or occupancy of the building or structure must be approved prior to proceeding with construction.

The applicant is required to call for inspections at various stages of the construction, and in accordance with the aforesaid rule, the applicant shall give the building inspector not less than one day's notice to perform such activities.

In the event construction is not commenced within 180 days of issuance of this permit, then the same is automatically void. Cessation of work for a period of 180 continuous days shall also cause this permit to be void. Permits are not transferable.

SIGNATURE OF APPLICANT		APPLICATION DATE	
APPROVED BUILDING INSPECTION	DATE	APPROVED BY TOWN OFFICAL	DATE