

# **BUILDING PERMIT APPLICATION**



**JEFFERSON COUNTY DIVISION OF BUILDING SAFETY**

**100 JEFFERSON COUNTY PARKWAY, GOLDEN, COLORADO 80419-3540**

Two sets of working drawings, drawn to scale, must accompany this application and a minimum of one working day may be required for issuance of a permit for new construction.

**NOTE: ALL CREDIT CARD TRANSACTIONS WILL BE ASSESSED AN ADDITIONAL 2.5% SERVICE FEE.**

**PERMIT NUMBER:**

**RSN:**

**OFFICE HOURS: 7:30 am To 5:30 pm**

**CALL FOR INSPECTION: (303) 271-8260**

**Web site address: <http://building.jeffco.us>**

## **LEGAL DESCRIPTION**

**Building Address:**

**Unit #:**

**Subdivision / PIN:**

**Bin #:**

**Filing**

**Unit**

**Phase**

**Lot**

**Block**

**Height of Building:**

**Elevation Above Sea Level:**

## **TYPE OF BUILDING**

**One Family**

**Two Family**

**Multi-Family**

**Commercial**

**Other**

**Stories**

**Units**

**BdRms**

**Brick**

**Block**

**Frame**

**Other**

**PURPOSE:**

**SCOPE OF WORK:**

(For Building Division Use Only)

**VALUATION: Material/Labor \$**

## **OWNER and CONTRACTOR INFORMATION**

**Owner:**

**Email:**

**Address:**

**City:**

**State:**

**Zip:**

**Tel :**

**Contractor:**

**License #**

**Address:**

**Email:**

**City:**

**State:**

**Zip:**

**Tel :**

**NOTICE: CORRECT SETBACKS FROM THE PROPERTY LINES ARE THE RESPONSIBILITY OF THE APPLICANT.**

I hereby swear and affirm that I am the current owner or am representing the current owner in applying for this permit. I further acknowledge that I have read this application and state that the above is correct and agree not to start this project until this application has been approved and the permit has been issued and posted on the job site. I further agree that the described building will not be occupied without final inspections. I understand that a certificate of occupancy, if required, will not be issued until all utilities have been installed and connected.

**Applicant's Signature:**

**Print Name:**

**Date:**

/ /

**Contact Person:**

**email address:**

# FOR DIVISION USE ONLY

## PLANNING & ZONING DIVISION

<b>ZONED DISTRICT:</b>		<b>SETBACKS:</b>	N		S		E		W
<b>APPROVED BY:</b>					<b>DATE:</b>	/	/		
<b>I. L. C. REQUIRED:</b>	YES		NO						
<b>T. I. F. REQUIRED:</b>	YES		NO						
<b>REMARKS:</b>									

## PLANNING ENGINEERING

<b>APPROVED BY:</b>					<b>DATE:</b>	/	/		
<b>REMARKS:</b>									

## BUILDING DIVISION

<b>APPROVED BY:</b>					<b>DATE:</b>	/	/		
<b>REMARKS:</b>									

<b>VALUATION:</b>	\$		<b>FEE:</b>	\$		<b>T. I. F.</b>	\$		
<b>CHIEF BUILDING OFFICIAL:</b>					<b>DATE:</b>	/	/		