## **BUILDING** PERMIT APPLICATION

## JEFFERSON COUNTY DIVISION OF BUILDING SAFETY

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



Two sets of working drawings, <u>drawn to scale</u>, 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 TRA	NSACTI	ONS WILL I	BE ASSI	ESSED A	AN AD	DITION	AL	1.75%	SERV	/ICE FEE.	
PERMIT NUMBER:								R	SN:				
OFFICE HOURS: 7:30 am To 5:30 pm						CALL FOR INSPECTION: (303) 271-8260							
Web site add	ress: htt	p://buildin	g.jeffco.u	s									
LEGAL DESCRIPTION													
<b>Building Add</b>								τ	J <b>nit #:</b>				
Subdivision / PIN:									I	3in #:			
Filing		Unit		Phase			Lot			В	lock		
Height of Building:			Elevation Above Se										
TYPE OF BUILDING													
One Family	T	wo Family	Family		Family		Comme		al		Other		
Stories	Uni	ts BdR	Rms	Brick		Block	ock Fr		rame		Other		
<b>PURPOSE:</b>													
SCOPE OF WORK: (For Building Division Use Only)													
			\$										
VALUATION: Material/Labor   \$ OWNER and CONTRACTOR INFORMATION													
Owner:		O WILL AND COLUMN TO A THE TOTAL TOTAL						Email:					
Address:													
City:				Z	Zip:			el:					
Contractor:					Lice			License	#				
Address:			_			Ema							
City:				State:	Z	ip:		Т	el:				
NOTICE: CO	ORRECT S	SETBACKS I	FROM TH	E PROPERTY	LINES	ARE TH	E RESP	ONSIBI	LIT	Y OF TI	НЕ АР	PLICANT.	
I hereby swear permit. I furth start this proje I further agree certificate of o	ner ackno ect until tl that the	wledge that nis application described bu	I have rea on has bec uilding wi	ad this applica en approved a ll not be occu	ation an and the p pied wit	d state t permit h hout fin	that the nas beer al inspe	above is issued a	s cor and I ur	rrect an posted iderstai	d agroon thou	ee not to e job site.	
Applicant's Signature:													
Print Name:		ne:							)ate	·:	/	1	
Contact Person:		on:				email	addre	ss:				_	

## FOR DIVISION USE ONLY PLANNING & ZONING DIVISION $\mathbf{E}$ SETBACKS: N W **ZONED DISTRICT: APPROVED BY: DATE:** I. L. C. REQUIRED: YES NO T. I. F. REQUIRED: **YES** NO **REMARKS:** PLANNING ENGINEERING **APPROVED BY: DATE: REMARKS: BUILDING DIVISION APPROVED BY:** DATE: **REMARKS:** FEE: \$ T. I. F. \$ **VALUATION: CHIEF BUILDING OFFICIAL: DATE:**