

**TOWN OF SILVER PLUME BUILDING PERMIT APPLICATION
FOR ROOF REPLACEMENT PROJECTS ONLY!!**

PERMIT # _____

PROPERTY OWNER INFORMATION

Phone Number _____

Last Name _____ First Name _____

Mailing Address _____

Email _____

CONTRACTOR INFORMATION

Contractor Phone Number _____

Company Name _____ License # _____

Mailing Address _____

Email _____

JOB ADDRESS: _____

DESCRIPTION OF WORK: _____

<p>LOT SIZE _____</p> <p>ZONE DISTRICT _____</p> <p>SQUARE FOOTAGE: Main Floor _____ Add. Floors _____ Basement _____ Crawlspace _____ Covered Porch _____ Decks _____ Garage _____ Other _____</p> <p>SETBACKS: Front Lot Setback _____ Side Lot _____ Rear Lot _____</p> <p>MISCELLANEOUS: <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Remodel <input type="checkbox"/> Shell Only <input type="checkbox"/> Tenant Finish <input type="checkbox"/> Repair, Replacement <input type="checkbox"/> Other _____</p>	<p>ROOF REPLACEMENT PERMITS: Material to be removed: _____ _____ _____</p> <p>Sq footage/# of squares: _____ _____ _____</p> <p>Replacement Materials: _____ _____ _____</p> <p>Ice/Snow Shield: _____ _____ _____</p> <p>INSPECTIONS: _____ Tear off _____ Mid Roof _____ Date of FINAL INSPECTION _____</p>	<p>CONSTRUCTION TYPE: <input type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Other _____</p> <p>DEMOLITION: <input type="checkbox"/> Site Plan required <input type="checkbox"/> State Permit required <input type="checkbox"/> Asbestos Permit required</p> <p>OCCUPANCY Classification _____ Certificate of Occupancy issued: _____ (date) _____</p> <p>FINAL INSPECTION: _____ _____</p> <p>TOTAL VALUE: Building Valuation \$ _____ Use Tax Valuation \$ _____</p>
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PLEASE INCLUDE THE FOLLOWING:

1. Construction plans (Land Use Code Section 4.2.B)
2. Documentation of compliance with other permit and approval requirements of these Regulations (Land Use Code Section 4.2.C)

The applicant shall comply with all codes and regulations of the Town governing location and construction of the proposed work. The Town or its agents are authorized to order the immediate cessation of construction at any time a violation of the Building Permit approval or Town codes or regulations appears to have occurred, and such violation may result in the revocation of the Building Permit pursuant to Division 12 of the Town of Silver Plume Land Use Code.

Buildings must conform with the plans submitted to the Town for Building Permit approval. Any change 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.

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

Signature of owner, contractor or owner's representative

Date

CONDITIONS:

FEES

Permit Fee \$ _____
Use Tax \$ _____
Water Tap \$ _____
Sewer Tap \$ _____
Other:
_____ \$ _____

TOTAL FEES \$ _____

Date Paid _____
Check # _____

APPROVED Building Inspector

Date

APPROVED Planning and Zoning Board

Date

SPACE FOR ADDITIONAL NOTES/CONDITIONS: