

PERMIT # _____ PIE- _____

APPLICATION for BUILDING PERMIT

Town of Pierce

144 Main St.

Pierce, CO 80650

Phone (970)834-2851

Fax (970)834-2755

Application Instructions

- ① Do not leave spaces blank - if an item does not apply, enter NA in the space provided.
- ② Complete and attach all requested information prior to submittal – incomplete applications will not be accepted

Property Owner:		Phone:	
Mailing Address:		Email:	
Project Address:		Year Original Structure Built:	
Subdivision:	Filing:	Lot:	Block:
<input type="checkbox"/> New Building <input type="checkbox"/> Deck <input type="checkbox"/> Tenant Finish <input type="checkbox"/> Addition <input type="checkbox"/> Basement Finish <input type="checkbox"/> Siding <input type="checkbox"/> Furnace <input type="checkbox"/> Re-Roof <input type="checkbox"/> Air Conditioner		Other: _____ Estimated Value (Materials and labor): \$ _____	

Residential Structures <input type="checkbox"/> Single Family <input type="checkbox"/> Duplex #Bedrooms _____ <input type="checkbox"/> Multi-Family: #units _____ #Baths: Full _____ ¼ _____ ½ _____ <input type="checkbox"/> Garage <input type="checkbox"/> Motel/hotel Number of stories _____ <input type="checkbox"/> Other _____ Building Height _____ Parking Spaces _____ Total Land Area _____ sq.ft.	Commercial / Industrial Structures Business Name: _____ <input type="checkbox"/> New Building <input type="checkbox"/> Shell Only <input type="checkbox"/> Remodel / Addition <input type="checkbox"/> Tenant Finish <input type="checkbox"/> Other _____ Electrical Valuation: \$ _____
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Master Plans Plan Name / # _____ New Master Plan: Yes No Same-As?: Yes No

General Contractor Name: _____ Phone (mobile preferred): (____) ____ - ____
 Contractor License #: _____ Mailing Address: _____ Email: _____

Electrical Contractor Name: _____ Phone: (____) ____ - ____
 Contractor License #: _____

Plumbing Contractor Name: _____ Phone: (____) ____ - ____
 Contractor License #: _____ Type of Sewage Disposal: Public Septic
 Water Supplier: _____ Tap Size: _____

Heating Contractor Name: _____ Phone: (____) ____ - ____
 Contractor License #: _____ Type of Heat: _____ Type of Mechanical _____

Square Footage

Main Floor _____	Unfinished Basement _____	Crawlspace _____	Decks _____	Number/Square Footage of Accessory Buildings on Lot: _____
Additional Floors _____	Finished Basement _____	Covered Porch _____	Garage _____	# _____ Sq.Ft. _____

Distance to property lines: N _____ S _____ E _____ W _____ Corner lot: Yes No Walkout Basement: Yes No

Provide details on proposed use (or proposed business name & product), type of construction, dimension, square footage, materials to be used, etc.: _____

NOTICE:

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 any time a violation of the codes or regulations appears to have occurred. Violation of any of the applicable codes or regulations may result in the revocation of this permit

Buildings MUST conform with plan, 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 inspection at various stages of the construction and in accordance with the aforesaid requirement, the applicant shall give the building inspector not less than one (1) working day notice to perform such activities.

By my signature below, I acknowledge **1**) that I am responsible for payment of the plan review fee and the administrative review fee associated with this application, whether I obtain this permit or not, and regardless of any lapse in building permit approval; **2**) that before I am entitled to obtain a building permit for this property, I must pay any delinquent building permit fees associated with this property. Please see attached pages for additional notices regarding this building permit application.

Applicant Signature: _____ **Date:** _____

OFFICE USE ONLY		Date Rc'vd: _____	Use: _____
Zoning: _____	Lot Square Feet: _____	Required Setbacks/Offsets: N _____ E _____ S _____ W _____	Fees: SAFEbuilt \$ _____
Valuation: _____	Building Coverage %: _____ (60% max.)		Town \$ _____
	Open Space %: _____ (30% min.)		TOTAL FEES \$ _____
Plot Plan Review Dates:	Signatures:		Date: _____
To Engineer _____	Town Engineer: _____		Date: _____
From Engineer _____	Building Inspector Reviewing Plan: _____		Date: _____
	Approving Town Official: _____		Date: _____