



BUILDING PERMIT APPLICATION

TOWN OF MINTURN PLANNING AND ZONING DEPARTMENT
 P.O. Box 309 - 302 Pine Street - Minturn, Colorado 81649-0309
 Phone: 970-827-5645 Fax: 970-827-5545 Email: planner@minturn.org



Construction Location:

Street Address: _____

Parcel Number(s): _____

Property Owner:

Name: _____

Mailing Address: _____ Phone Number: _____

Contractor:

General Contractor Name: _____ Business License #: _____

Mailing Address: _____

Phone: _____ Email: _____

Licensed Plumber: _____ License #: _____

Licensed Electrician: _____ License #: _____

Building Permit Type (Check all that apply):

- | | | |
|---------------------------------------|---|-------------------------------------|
| USE: | CLASS: | |
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> ADDITION | <input type="checkbox"/> ELECTRICAL |
| <input type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> ALTERATION | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> OTHER: _____ | <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> PLUMBING |
| | <input type="checkbox"/> OTHER: _____ | <input type="checkbox"/> DEMOLITION |

Description of Work:

Estimated Valuation (Including Materials, Labor, and Profit):

Construction Information:

Number of Stories:	Finished Area:	Unfinished Area:	Total Area:

READ BEFORE SIGNING: I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to or cancel the provisions of any other state or local law regulating construction or the performance of construction. This permit becomes null and void if work or construction authorized is not commenced within 180 days or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

Signature of Owner: _____ Date: _____

Signature of Contractor: _____ Date: _____

APPLICATION ACCEPTED BY: _____ **DATE:** _____