



# CITY OF CENTRAL BUILDING PERMIT

For Official Use Only	
PERMIT # _____	Date Rec'd _____
Rec'd By: _____	

PROJECT INFORMATION		
TYPE OF PERMIT: _____		
JOB ADDRESS: _____		
LEGAL DESCRIPTION: LOT _____	BLOCK _____	SUBDIVISION _____
MINING CLAIM _____		

PROPERTY OWNER INFORMATION		
OWNER NAME _____		
MAILING ADDRESS _____		
PHONE # _____	FAX # _____	E-MAIL: _____

CONTRACTOR / AUTHORIZED AGENT INFORMATION		
NAME OF COMPANY _____		
CONTACT PERSON _____		
MAILING ADDRESS _____		
PHONE # _____	FAX # _____	E-MAIL: _____
CONTRACTOR LICENSE #: _____		

PROJECT DESCRIPTION						
Project Valuation		Type of Const.		Occupancy		Occupant Load
New Construction		Setbacks				
Height	# of Floors	Area	Front	Rear	Side-yard Right	Side-yard Left
Tenant Finish	Area	Floor Level	Historic Grant	Zoning District		
			___ Yes ___ No			

If the submitted information is determined insufficient or incomplete, this application will be held in abeyance until such time as all required information is submitted or if no permit is issued within 180 days of the date of application due to an incomplete submittal shall expire. This permit becomes null and void if construction authorized is not commenced within 180 days or if construction or work is suspended or abandoned for a period of 180 days at anytime after the work is commenced. 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 shall be complied with whether specified herein or not. I understand that permits or inspections presuming to give authority to cancel the provisions of the above laws and ordinances or permits issued in error or the basis of incorrect information supplied by the applicant shall be invalid. Payment of the Plan Review Fee is due at time of application.

\_\_\_\_\_  
Owner/Contractor/Authorized Agent Signature (Applicant)

\_\_\_\_\_  
Date

**DO NOT WRITE BELOW THIS LINE**

Departments	N/A	REQ	Apv'd By	Date
Planning				
HPO				
Public Works				
Fire Dept				
BH/CC San Dist				
XCEL Energy				

ADMINISTRATIVE FEE & TAXES	
Building Permit Fee	_____.
Plan Review Fee	_____.
Use Tax	_____.
Water Tap	_____.
<b>TOTAL</b>	<b>_____.</b>

\_\_\_\_\_  
Building Official – Signature (Approval)

\_\_\_\_\_  
Date

ALL CONTRACTORS MUST BE IDENTIFIED & REGISTERED BEFORE THE PERMIT IS ISSUED  
PROJECT VALUATION MUST INCLUDE ALL SUBCONTRACTED WORK