



207 Muegge Way • Bennett, CO 80102
 Tel: (303) 644-3249 Fax: (303) 644-4125
 www.townofbennett.org

BUILDING PERMIT APPLICATION

DATE: _____ **PERMIT #** _____

TO BE COMPLETED BY APPLICANT

Property Owner Name:			Phone:		Email:	
Project Address:			Mailing Address (if different):			
City:	State:	Zip:	City:	State:	Zip:	

CONTRACTOR INFORMATION*List additional contractors on Sub-Contractor Signature Form, all Sub-Contractors must have valid Town of Bennett Contractor License or Registration.**

1. (circle one) General Plumber Electrician Mechanical		Address:			
Name:		City:		State:	Zip:
Email:		Phone:	TOB Lic #:	Exp:	
2. (circle one) General Plumber Electrician Mechanical		Address:			
Name:		City:		State:	Zip:
Email:		Phone:	TOB Lic #:	Exp:	
3. (circle one) General Plumber Electrician Mechanical		Address :			
Name:		City:		State:	Zip:
Email:		Phone:	TOB Lic #:	Exp:	

PARCEL INFORMATION

Subdivision:	Parcel #	Lot	Block
Zoning:	Distance from lot line: N _____ S _____ E _____ W _____ Corner lot? _____		

TO BE COMPLETED BY APPLICANT - PROJECT INFORMATION

TYPE OF IMPROVEMENT: <input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ADDITION <input type="checkbox"/> REMODEL/FINISH <input type="checkbox"/> REPAIR/REPLACEMENT <input type="checkbox"/> MOBILE HOME <input type="checkbox"/> OTHER	PROPOSED USE: RESIDENTIAL <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family # of units _____ <input type="checkbox"/> Hotel, Motel, Dormitory # of units _____ <input type="checkbox"/> Garage: Single Double Attached Detached <input type="checkbox"/> Carport: Attached Detached <input type="checkbox"/> Patio: Attached Detached <input type="checkbox"/> Basement: Partial Full Finished Unfinished <input type="checkbox"/> Other: _____ <input type="checkbox"/>
Description of Work:	

FOR NEW RESIDENTIAL WHEN SAME HOUSE MODEL IS BUILT AGAIN PLAN # ON FILE _____ OPTION # _____	COMMERCIAL <input type="checkbox"/> Shell only <input type="checkbox"/> Tenant Finish <input type="checkbox"/> Telecommunications Facility <input type="checkbox"/> Remodel/Addition <input type="checkbox"/> New Building
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TOTAL VALUE (INCLUDES MATERIAL & LABOR): \$ _____	ELECTRICAL VALUATION: \$ _____
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Construction Type: <input type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Manufactured home <input type="checkbox"/> Other _____ Type of Mechanical: <input type="checkbox"/> Central Air Conditioning <input type="checkbox"/> Electric <input type="checkbox"/> Hydronic Heating Fuel Type: <input type="checkbox"/> Gas NG or LP <input type="checkbox"/> Electric <input type="checkbox"/> Solar <input type="checkbox"/> Other _____	Square Footage: Main floor _____ Additional floors _____ Basement _____ Crawlspace _____ Decks _____ Garage _____ Other _____ # of bedrooms _____ # of baths - Full _____ ¾ _____ ½ _____ Stories _____	Type of Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Septic Type of Water: <input type="checkbox"/> Tap size <input type="checkbox"/> Supplies
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Telecommunications Facility

Outside Public ROW Height _____ Inside Public ROW Height _____ Change in Height _____ Change in Width _____

Change to existing (In Public ROW) _____ Change to existing _____ # of electrical cabinets _____

- Excavation or deployment outside current site
- Non-compliance of existing original conditions

***Reference Telecommunications Facility Submittal Requirements**

Applicant must read and initial the following:

1. The applicant, his agents and employees shall comply with all rules, restrictions and requirements of the Town and building codes governing location, construction and erection or the above proposed work for which the permit is granted. _____
2. 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 codes or regulations applicable may result in the revocation of this permit. _____
3. Buildings MUST conform with plans, as submitted to the Town. Any changes of plans or layouts must be approved prior to the change being made. Any change in the use or occupancy of the building or structure must be approved prior to proceeding with construction. _____
4. The Applicant is responsible for ascertaining true & correct locations of all property, right of way, & easement lines. If encroachments on land other than that owned by the property owner are discovered after installation of improvements, the property owner may be required to remove the improvements at their expense. _____
5. The Applicant is required to call for inspections at various stages of the construction, and in accordance with the aforesaid rule, the applicant shall give the building inspector not less than one day's notice to perform such activities. _____
6. In the event construction is not commenced within 180 days of issuance of their permit, then the same is automatically void. Cessation of work for a period of 180 continuous days shall also cause the permit to be void. _____

***Permits are not transferable.**

APPLICANT SIGNATURE: _____ **DATE:** _____

FOR OFFICIAL USE ONLY

BUILDING PERMIT FEES

DEVELOPMENT/IMPACT FEES

Permit Fees

Building Permit \$ _____
 Plan Review \$ _____
 Electrical \$ _____
 Construction Meter \$ _____

Taxes

2% Use Tax \$ _____
 .25% Arapahoe Open Space Tax \$ _____

Miscellaneous

Stop Work Order \$ _____
 Other \$ _____

SUBTOTAL PERMIT FEES \$ _____

DEVELOPMENT/IMPACT \$ _____

TOTAL DUE \$ _____

Water and Waste Water

Water Development Fee \$ _____
 Water Tap Inspection \$ _____
 Sewer Development \$ _____
 Sewer Tap Inspection \$ _____
 Meter Pit/charges \$ _____

Impact

Park/Recreation \$ _____
 Park/Recreation \$ _____
 Police Facilities \$ _____
 Public Facilities \$ _____
 Transportation Facilities \$ _____
 Storm Drainage \$ _____

SUBTOTAL DUE \$ _____

APPLICATION ACCEPTED BY:	DATE:	COMMENTS:
BUILDING DEPARTMENT:	DATE:	COMMENTS:
BUILDING OFFICIAL:	DATE:	COMMENTS:
BENNETT FIRE PROTECTION DIST:	DATE:	COMMENTS:
PUBLIC WORKS:	DATE:	COMMENTS:
ENGINEERING:	DATE:	COMMENTS:
PLANNING/ZONING:	DATE:	COMMENTS:
ZONING ADMINISTRATOR:	DATE:	COMMENTS: