

TOWN OF PARACHUTE
 PO BOX 100
 222 GRAND VALLEY WAY
 PARACHUTE, CO 81635



BUILDING PERMIT APPLICATION

Date: _____, 20____

Owner/Applicant Name: _____ Phone no. _____

Address: _____

Builder/Contractor Name: _____ Phone no. _____

Address: _____

Construction Site Legal Description: _____

Construction Site Street Address: _____

Purpose of building Permit: (check all applicable)

1. Construction for Primary structure:

<input type="checkbox"/> Single-Family	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Manufactured (HUD) Home	<input type="checkbox"/> Commercial Building	<input type="checkbox"/> New construction	<input type="checkbox"/> Remodel/Replace
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2. Mechanical/Plumbing Permit Information: (required for install/replacement/relocation of all equipment, fixture, units, appliances, etc.) List units etc. in boxes below and attach specifications.

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3. Construction for Accessory structure: (check all applicable)

<input type="checkbox"/> Garage	<input type="checkbox"/> Shed	<input type="checkbox"/> Carport	<input type="checkbox"/> Deck	<input type="checkbox"/> Fence	<input type="checkbox"/> Other _____	<input type="checkbox"/> New construction	<input type="checkbox"/> Remodel/Replace
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Building Planning Information: (this section must be completed)

Zone District:	Lot Size:	Floor space:	Bld. Length:	Bld. Width:
Type of Roof:	Bld. Height:	No. Floors:	Style:	Ext. Finish:
Type of Foundation	Set Backs: Front: _____ Rear: _____ L.Side: _____ R.Side: _____	Distance from: buildings: _____ Street: _____ Flood Plain: _____	Number of: Bedrooms: _____ Baths: _____ Laundry: _____ Other: _____	Water Source: _____ Sewer Source: _____

Type of Construction: Please identify construction type on the chart below

IA	IB	IIA	IIB	IIIA	IIIB	IV	VA	VB
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NEW CONSTRUCTION: Total Square Footage of Project _____

REMODELS AND ADDITIONS: Cost of Labor and materials \$ _____

Date construction will begin: _____ Date of completion: _____

And I/We hereby agree to build the above described strictly to the terms of and in accordance with the Uniform Building Codes and the Land Use Regulations currently revised and/or adopted. I/we understand that I/we must clear the grounds and adjacent street or streets of all rubbish and debris caused by the construction of said building/structure.

Respectfully, _____
(Applicant/owner signature) (Date)

The Town of Parachute hereby grants the above permit as per terms therein stated. This _____ day of _____, 20_____.

Building Department

CHECK LIST:

- Proof of Ownership
- New Water tap *(for changes in use, expansion, etc of existing tap EQR calculations must be submitted also)*
- New Sewer tap *(for changes in use, expansion, etc of existing tap EQR calculations must be submitted also)*
- Sewer Connection Permit *(required for all construction projects)*
- Use tax forms *(required for all construction projects)*
- Street impact fee assessment form *(required for new construction)*
- List of Contractors and proof of liability insurance
- 3 sets of Construction Plans Residential, 4 Sets of Construction Plans Commercial *(Architectural and Engineering plans are required for commercial buildings)*
- 3 sets of Specifications Residential, 4 Sets of Specifications Commercial *(include design specifications)*
- 3 sets of Site Plans Residential, 4 sets of Site Plans Commercial *(to scale w/ water, sewer, driveway, irrigation, & all utility setbacks/easements etc.)*
- Sign permit *(as applicable)*
- Lot Line Affidavit for lot consolidation *(as applicable)*
- Mechanical, Plumbing, and Electrical Permits *(as applicable)*
- Street Excavation Permit *(as applicable)*
- Flood Plain Development Permit *(as applicable)*
- Colorado Department of Transportation Access Permit *(as applicable)*

Administrative Use Only:

Permit Charge: \$ _____

Plan Check Fee: \$ _____

TOTAL:\$ _____

Date Application Received: _____

Date Approved: _____

Payment Received date: _____

W/S Fees: _____

Water meter #: _____

Water Meter Size: _____