



Town of Red Cliff

PO Box 40, 400 Pine Street
Red Cliff, CO 81649
Ph: (970) 827-5303

BUILDING PERMIT APPLICATION

Project Address		Permit # (By Staff)	
Parcel Number(s)		Application Date	
PROPERTY OWNER	Name		Phone:
	Address City/State Zip		
CONTRACTOR	Name:		Phone:
	Address City/State Zip		
LICENSED PLUMBER	License No.:	Email:	Phone
LICENSED ELECTRICIAN	License No.:	Email:	Phone
PERMIT TYPE	USE: <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Other _____	CLASSIFICATION: <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> New Construction <input type="checkbox"/> Other _____ <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Demolition	
	PROJECT DESCRIPTION		
PROJECT VALUATION	\$		
Occupancy Classification	Type of Construction	Building Area	Height (Stories/Feet)
		Fees	
		Building Permit	\$
		Plan Review Fee	\$
		Use Tax	\$
		Total	\$

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.

Print Name of Contractor or Authorized Agent

Print Name of Owner

Signature of Contractor or Authorized Agent

Signature of Owner