



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	\$	Please separate material and labor: Materials: \$ Labor: \$	
Occupancy Classification	Type of Construction	Building Area	Height (Stories/Feet)
		Fees	
		Building Permit	\$
		Plan Review Fee	\$
		Use Tax	\$
		Permit Deposit	\$
		Other	\$
		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. Failure to obtain permit before commencing work will result in a stop work order and doubling of your original permit cost.

 Print Name of Contractor or Authorized Agent

 Print Name of Owner

 Signature of Contractor or Authorized Agent

 Signature of Owner

