



BUILDING PERMIT APPLICATION

Planning & Building Department
1290 S. Public Road, Lafayette, Colorado 80026

303-661-1451
Email: buildingpermits@lafayetteco.gov

Please Print or Type

Project	PROJECT ADDRESS (Number and Street)			APPLICATION DATE		
	LOT NUMBER	BLOCK	SUBDIVISION OR TRACT NAME			
Applicant	CONTACT NAME		EMAIL	PHONE ()	FAX ()	
	COMPANY NAME (if applicable)		MAILING ADDRESS (Street, City, Zip)			
Owner	NAME OF PROPERTY OWNER		EMAIL	PHONE ()	FAX ()	
	COMPANY NAME (If applicable)		MAILING ADDRESS (Street, City, Zip)			
Contractor	COMPANY NAME		MAILING ADDRESS (Street, City, Zip)			
	CONTRACTOR TYPE		LICENSE NUMBER	PHONE ()	FAX ()	
Other	ARCHITECT		MAILING ADDRESS (Street, City, Zip)		PHONE ()	
	ENGINEER		MAILING ADDRESS (Street, City, Zip)		PHONE ()	
Description	PROJECT CATEGORY		DETAIL DESCRIPTION (Use reverse if necessary)		PROJECT VALUATION \$	
	<input type="checkbox"/> New Construction	<input type="checkbox"/> Plumbing <input type="checkbox"/> Sign			ELECTRICAL VALUATION \$	
	<input type="checkbox"/> New Residential	<input type="checkbox"/> HVAC <input type="checkbox"/> Fence			SQ. FT.	
	<input type="checkbox"/> Remodel	<input type="checkbox"/> Electrical <input type="checkbox"/> Other				
	<input type="checkbox"/> Basement	<input type="checkbox"/> Roof <input type="checkbox"/> Other				
Applicant	The information given on this application is accurate to the best of my knowledge. All provisions of laws and ordinances governing this work will be complied with, whether specified on this application or not. Granting a permit does not give authority to violate or cancel provisions of any other state or local law regulating construction or construction performance. The permit must be paid for within 45 days. The applicant agrees to pay the plan review fee whether permit is purchased or not.					
	Applicant Signature				Date	
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COMMENTS/SPECIAL CONDITIONS			Fee Type		Amount	
			Building Permit Fee		\$ _____	
			City Use Tax		\$ _____	
			BOCO Use Tax		\$ _____	
			Electrical Inspection		\$ _____	
			Water Tap		\$ _____	
			Sewer Tap		\$ _____	
			Drainage		\$ _____	
			Service Expansion		\$ _____	
			Parks and Tree Fee		\$ _____	
			Public Arts Fee		\$ _____	
Engineering Inspection		\$ _____				
Electrical Temporary		\$ _____				
Plan Check		\$ _____				
Other		\$ _____				
TOTAL FEES		\$ _____				
DATE RECEIVED		STAFF APPROVAL				
			INITIAL	DATE		
		<input type="checkbox"/> Planning	_____	_____		
		<input type="checkbox"/> Public Works	_____	_____		
		<input type="checkbox"/> Fire Department	_____	_____		
		<input type="checkbox"/> Building	_____	_____		
		<input type="checkbox"/> LURA	_____	_____		
GM CLASS						
<input type="checkbox"/> Exempt						
<input type="checkbox"/> Non-Exempt						
Year Built _____						