



BUILDING PERMIT APPLICATION

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

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Please Print or Type

Project	PROJECT ADDRESS (Number and Street)			APPLICATION DATE
	LOT NUMBER	BLOCK	SUBDIVISION OR TRACT NAME	
Applicant	CONTACT NAME		EMAIL	PHONE ()
	COMPANY NAME		MAILING ADDRESS (Street, City, Zip)	
Owner	NAME OF PROPERTY OWNER		EMAIL	PHONE ()
	COMPANY NAME (If applicable)		MAILING ADDRESS (Street, City, Zip)	
Contractor	COMPANY NAME		MAILING ADDRESS (Street, City, Zip)	
	CONTRACTOR TYPE		LICENSE NUMBER	PHONE ()
Other	ARCHITECT		MAILING ADDRESS (Street, City, Zip)	
	ENGINEER		MAILING ADDRESS (Street, City, Zip)	
Description	PROJECT CATEGORY		DETAIL DESCRIPTION (Use reverse if necessary)	
	<input type="checkbox"/> New Construction <input type="checkbox"/> Plumbing <input type="checkbox"/> Sign <input type="checkbox"/> New Residential <input type="checkbox"/> HVAC <input type="checkbox"/> Fence <input type="checkbox"/> Remodel <input type="checkbox"/> Electrical <input type="checkbox"/> Other <input type="checkbox"/> Basement <input type="checkbox"/> Roof <input type="checkbox"/> Other			
			PROJECT VALUATION \$	
		ELECTRICAL VALUATION \$		
		SQ. FT.		
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
FOR OFFICE USE ONLY • FOR OFFICE USE ONLY • FOR OFFICE USE ONLY • FOR OFFICE USE ONLY • FOR OFFICE USE ONLY				
COMMENTS/SPECIAL CONDITIONS			Fee Type	Amount
			Building Permit Fee	\$ _____
DATE RECEIVED			BOCO Use Tax	\$ _____
			City Use Tax	\$ _____
GM CLASS <input type="checkbox"/> Exempt <input type="checkbox"/> N1 <input type="checkbox"/> N2 <input type="checkbox"/> N3			Electrical Inspection	\$ _____
			Water Tap	\$ _____
STAFF APPROVAL			Sewer Tap	\$ _____
			Drainage	\$ _____
INITIAL DATE <input type="checkbox"/> Planning _____ <input type="checkbox"/> Public Works _____ <input type="checkbox"/> Fire Department _____ <input type="checkbox"/> Building _____ <input type="checkbox"/> LURA _____			Service Expansion	\$ _____
			Parks and Tree Fee	\$ _____
			Public Arts Fee	\$ _____
			Engineering Inspection	\$ _____
			Electrical Temporary	\$ _____
			Plan Check	\$ _____
			Other	\$ _____
			TOTAL FEES	\$ _____