

# GENERAL CONSTRUCTION PERMIT

**Town of Frederick**  
 Building Inspections  
 401 Locust Street - Frederick, CO 80530  
 (720) 382-5605  
 Inspections: (720) 382-5620 www.frederickco.gov



Permit Number: \_\_\_\_\_

Date of Application: \_\_\_\_\_

**PLEASE FILL ALL TYPEABLE AREAS IMPORTANT: ENTER ALL DATA NECESSARY FOR A COMPLETE DESCRIPTION OF THE PROJECT**

PROPERTY ADDRESS / UNIT # (S)		COUNTY	LOT(S)	BLOCK(S)	SUBDIVISION
PROPERTY OWNER	OWNERS MAILING ADDRESS			PHONE (DAY)	
CONTRACTOR	NAME OF FIRM	CONTACT	EMAIL ADDRESS		TELEPHONE NUMBER
Building					
Electrical					
Plumbing					
Mechanical					

PERMIT TYPE \_\_\_\_\_ OCCUPANCY CLASS(ES) \_\_\_\_\_ TYPE OF CONST \_\_\_\_\_ BUILDING USE: EXISTING \_\_\_\_\_ PROPOSED \_\_\_\_\_  
 \_\_\_\_\_ SPRINKLERED? YES \_\_\_\_\_ NO \_\_\_\_\_

Bedrooms	Baths	Crawl Space	Deck	Porch	Garage Area	Living Area (finished)
Setbacks (In Feet)	North	South	East	West	Basement (Finished)	Basement (Unfinished)
No. of Stories	Bldg. Height	Mezzanine	Warehouse	Office	Other	Water Tap Size

**DESCRIPTION OF WORK** \_\_\_\_\_ **MODEL NO.** \_\_\_\_\_

OPTIONS USED: \_\_\_\_\_

ELECTRICAL VALUATION (COMM. ONLY) \_\_\_\_\_

TOTAL JOB COST ESTIMATE: \$ \_\_\_\_\_ MATERIAL COST ESTIMATE: \$ \_\_\_\_\_  
 (CONTRACTOR VALUE)

**NOTICE TO ALL APPLICANTS: TO SCHEDULE AN INSPECTION, CALL (720) 382-5620. THE PERMIT EXPIRES 180 DAYS FROM THE DATE OF ISSUE UNLESS WORK IS STARTED AND INSPECTIONS HAVE BEEN DONE. BUILDING AND IMPROVEMENTS MUST CONFORM TO THE PLANS SUBMITTED TO THE TOWN. ANY CHANGES MUST BE APPROVED PRIOR TO CHANGES BEING MADE.**

We agree to perform the work described herein in accordance with the plans and/or specifications submitted. All work done shall be in compliance with all applicable codes and regulations of the Town of Frederick, I/we agree that no work would be initiated without this application being approved. I/we are aware that any violation of applicable codes and regulations can cause revocation of this permit

**X**

\_\_\_\_\_  
 SIGNATURE OF APPLICANT

**PAID**  
 \_\_\_\_\_

**CHECK #**  
 \_\_\_\_\_

**REC'D BY**  
 \_\_\_\_\_

<b>For Office Use only FEES</b>	
Valuation \$ _____	
Permit Fee _____	
Plan Review _____	
Administrative Fee _____	
Construction Meter _____	
Electrical _____	
Water Tap Fees:	
CWWC Capital Impr. _____	
Frederick Capital Impr. _____	
CBT Water Share _____	
Tap Installation _____	
Impact Fees:	
General Capital _____	
Park Improvement _____	
Open Space _____	
Transportation _____	
Drainage _____	
Public Safety Impact _____	
Sales & Use Tax (1.0%) _____	
Sales & Use Tax (2.5%) _____	
<b>TOTAL FEES</b>	<b>\$ _____</b>

Attach plans, specifications, drawings and other supporting documents. Plot plans must be fully dimensional.

TOWN APPROVAL \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF OFFICIAL

Plan Review Notes: \_\_\_\_\_

\_\_\_\_\_  
 Date: \_\_\_\_\_

\_\_\_\_\_  
 Planning Sign Off