www.townofeagle.org
P.O. BOX 609, 200 BROADWAY
EAGLE, CO 81631

Phone: (970) 328-9622
Inspection Line: (970) 328-9626

TOWN OF EAGLE
BUILDING DEPARTMENT

MECHANICAL PERMIT APPLICATION

BP #_____

JOB ADDRESS:				
LOT #	BLOCK #	FILING #	SUBDIVISION:	PARCEL #:
OWNER:		MAILING ADDRESS:		PHONE/CELL PHONE:
OWNER EMAIL ADDRESS:				
CONTRACTOR/CONTACT NAME:		MAILING ADDRESS:		PHONE/CELL PHONE:
EMAIL ADDRESS:				

USE: [ ] RESIDENTIAL [ ] COMMERCIAL

CLASS: [ ] NEW [ ] ADDITION [ ] REMODEL [ ] REPAIR [ ] MOVE

TYPE OF HEATING: [ ] NATURAL GAS [ ] ELECTRICAL [ ] PROPANE

TOTAL VALUATION:	INPUT BTU RATING OF APPLIANCE:	

HEAT LOSS CALCULATIONS ARE REQUIRED FOR ALL RESIDENCES AT THE TIME OF SUBMITTAL OF PERMIT. NO EXCEPTIONS!

NOTICE!! READ BEFORE SIGNING:

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, MECHANICAL (HEATING, VENTILATION OR AIR CONDITIONING).

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER WORK IS COMMENCED.

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 VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

_____
SIGNATURE OF CONTRACTOR (Date)

_____
SIGNATURE OF OWNER (IF OWNER BUILDER) (Date)

Complete application and email to permits@townofeagle.org with supporting documents in PDF format.

DESCRIPTION OF WORK/SPECIAL CONDITIONS:

FEES

APPLICATION RECEIVED BY:	DATE:	APPLICATION FEE	$
PLANS CHECKED BY:	DATE:	PERMIT FEES	$
APPROVED ISSUANCE:	DATE:	TOTAL FEES	$

CASH	CHECK NO.	OTHER	DATE PAID

White: Town Copy Pink: Applicant Copy