

www.townofeagle.org

200 BROADWAY, P.O. BOX 609  
EAGLE CO 81631

970-328-9622 PHONE  
970-328-9626 INSPECTION LINE

# TOWN OF EAGLE BUILDING PERMIT APPLICATION

BUILDING PERMIT NO. \_\_\_\_\_

JOB ADDRESS

LOT NO.	BLOCK	FILING	SUBDIVISION	PARCEL # - This can be found on Eagle County GIS
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HOMEOWNER	MAILING ADDRESS - ADDRESS, CITY, ST, ZIP	EMAIL	PHONE #
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CONTRACTOR & CONTACT / HOMEOWNER	MAILING ADDRESS - ADDRESS, CITY, ST, ZIP	EMAIL	PHONE #
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ARCHITECT OR DESIGNER	MAILING ADDRESS - ADDRESS, CITY, ST, ZIP	EMAIL	PHONE #
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ENGINEER	MAILING ADDRESS - ADDRESS, CITY, ST, ZIP	EMAIL	PHONE #
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USE OF BUILDING (PLEASE CHECK ALL THAT APPLY)	RESIDENTIAL	COMMERCIAL
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CLASS OF WORK (PLEASE CHECK ALL THAT APPLY)	NEW	ADDITION	REMODEL	REPAIR	MOVE	REMOVE
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DESCRPTION OF WORK / SPECIAL CONDITIONS

VALUATION OF WORK	SQUARE FOOTAGE OF LIVING SPACE:
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TYPE OF HEATING (PLEASE CIRCLE APPROPRIATE CATEGORY)	SQUARE FOOTAGE OF GARAGE/UTILITY:
GAS      ELECTRIC      OTHER	

ACREAGE OR SQUARE FOOTAGE OF LOT	LOT COVERAGE -Includes Overhangs	SQUARE FOOTAGE OF IRRIGATED LANDSCAPED AREA (DO NOT INCLUDE DRIP IRRIGATION):
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IMPERVIOUS COVERAGE OF LOT	TOTAL FLOOR AREA OF STRUCTURE (SQ. FT.)	SQUARE FOOTAGE OF LANDSCAPED AREA DRIP IRRIGATION AREA:
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NUMBER OF STORIES	HEIGHT OF STRUCTURE ABOVE GRADE	APPLICATION ACCEPTED BY	DATE
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NUMBER OF DWELLING UNITS	NUMBER OF OFF STREET PARKING SPACES	PLANS CHECKED BY	DATE
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DESIGN REVIEW APPROVAL DATE	DESIGN REVIEW BOARD LETTER AND STAMPED PLANS MUST BE SUBMITTED WITH THIS APPLICATION	APPROVED FOR ISSUANCE BY	DATE
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### NOTICE!! READ BEFORE SIGNING

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

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.

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 HOMEOWNER (IF OWNER BUILDER) \_\_\_\_\_ / DATE \_\_\_\_\_

### FEES

#### OFFICE USE ONLY

PERMIT APP.	USE TAX	WATER TAP	
PERMIT	CHECK NO.	SEWER TAP	
PLAN CHECK	PAYMENT DATE	METER	
TOTAL		TOTAL TAP	
CHECK NO.		CHECK NO.	
PAYMENT DATE		PAYMENT DATE	

### SITE PLAN MUST BE INCLUDED WITH THIS APPLICATION

Fee Total:

Complete application and email to [permits@townofeagle.org](mailto:permits@townofeagle.org) with supporting documents in PDF format.