THE CITY OF ALAMOSA

APPLICATION FOR BUILDING PERMIT & CERTIFICATE OF OCCUPANCY

Site Address (if assigned)	Owner: Address
	City/State
Parcel Number	Name
	Phone Email

Contractor		Architect Engineer	
Name		Name	
Address		Address	
City/State		City/State	License #
City License #	Phone	Phone	
Email		Email	

Sub Contractor	
Name	City/State
Address	
Phone	Email

Description of Alteration or Repair

Construction Information

- ☐ New Commercial
- ☐ New Single Family
- ☐ New Multifamily
- ☐ Addition
- ☐ Other
- ☐ Remodel
- ☐ Utility
- ☐ Garage/Carport

Construction Type

- ☐ I
- ☐ II
- ☐ III
- ☐ IV
- ☐ V

Occupancy Group

- ☐ A
- ☐ B
- ☐ E
- ☐ F
- ☐ H
- ☐ I
- ☐ M
- ☐ R
- ☐ S
- ☐ U

Land Use Information

Land Use Zone	Land Use	
Total Floor Area	Height	Stories
Front/ Side/ Street Side/ Rear Setbacks	/ / /	

Project Cost $ **Remarks:**

NOTICE: READ BEFORE SIGNING

I hereby acknoledge that I have read this application and state that the above is correct and hereby agree to construct, alter or repair the proposed structure in strict accordance with the codes and ordinances of the City of Alamosa and plans and specifications submitted. By granting this permit, the City makes no endorsment or confirmation as to whether or not the applicant owns the property rights sufficient for the permitted scope of work. The Applicant acknowledges that any non-compliant public sidewalks will be required to be upgraded should construction valuation exceed $80,000 pursuant to Sec. 16-42 of city ordinances. The Applicant acknowledges that Applicant is responsible to ensure that the regulations governing asbestos found in Regulation No. 8, Part B of the Air Quality Commission of the Colorado Department of Public Health and Environment are complied with in this project.

- ☐ I understand that I am responsible for scheduling all required inspections.
- ☐ I understand that Final Inspection must be scheduled within 10 working days of job completion.

_____ Date

_____ Applicant Signature

Floodplan Elevation at this address is

Fee Paid $

APPLICATION ☐ **APPROVED** ☐ **DENIED**

COMMENTS: _____

_____ Date

_____ Building Inspector