



BUILDING PERMIT APPLICATION

City of Gunnison Building Office
 201 W. Virginia Ave., PO Box 239, Gunnison, CO 81230
 Phone # (970) 641-8151 Fax # (970) 641-8156

CONTACT INFORMATION	APPLICANT	Name _____		CONTRACTOR	Name _____	
		Address _____			License # _____	
		City _____	State/Zip _____		Address _____	
		Phone # _____			City _____	State/Zip _____
		Email _____			Phone # _____	
	JOBSITE	Street address: _____		ARCH/ENG	Email _____	
Legal Description		Name _____				
Lot(s) _____		Block _____	Address _____			
Addition _____		City _____	State/Zip _____			
Subdivision _____		State License # _____				
PERMIT TYPE	<input type="checkbox"/> Single Family Residential <input type="checkbox"/> Duplex		<input type="checkbox"/> Multi-Family Residential <input type="checkbox"/> Accessory Dwelling Unit			
	<input type="checkbox"/> Residential Addition <input type="checkbox"/> Garage		<input type="checkbox"/> Deck/Porch <input type="checkbox"/> Remodel			
	<input type="checkbox"/> New Commercial Bldg <input type="checkbox"/> Commercial Storage		<input type="checkbox"/> Commercial Addition <input type="checkbox"/> Commercial Remodel			
	<input type="checkbox"/> Change of Occupancy <input type="checkbox"/> Certificate of Occupancy		<input type="checkbox"/> Utility/Misc <input type="checkbox"/> Other			
BUILDING TYPE	Brief description of project: _____			Construction Type:		
				<input type="checkbox"/> Standard wood framing, trusses, concrete foundation <input type="checkbox"/> Metal framing, concrete foundation <input type="checkbox"/> Block building <input type="checkbox"/> Manufactured <input type="checkbox"/> Alternative (describe) _____		
PLANNING & ZONING	LANDSCAPING REQUIREMENTS			Zone District: R-1 R1M R-2 R2M R3 RMU C CBD I B-1		
	A landscaping plan shall be submitted for all new building projects demonstrating compliance with the requirements of the City of Gunnison Land Development Code. All approved landscaping shall be completed prior to issuance of a final Certificate of Occupancy.			Front Setback: _____		Bldg Height: _____
				Side Setback: _____		Lot Size: _____
				Rear Setback: _____		
				Landscaping Plan Submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is the property governed by a Homeowner's Association (HOA)?						
<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes please provide a copy of architectural review approval)						
COST/SIZE	Estimated cost of the project: \$ _____		Total square footage (SF) of structure*:			
	Building Office Valuation: \$ _____		Residential SF*		Porch/Deck SF	
	For manufactured buildings, include cost of foundation and cost of unit: \$ _____		Garage SF		Commercial SF*	
*exterior dimensions of building (excluding garage and porches) for each floor						
SIGNATURE	Notice: Separate State issued permits are required for electrical and plumbing work. From the date of building permit issuance, the applicant has 180 days to commence work before the permit expires. By signing this application the applicant(s) acknowledges that the information provided above is true and correct and hereby agrees to comply with all provisions of laws, codes and ordinances governing this type of work and assumes responsibility for compliance with the approved plans.					
	Applicant Name(print) _____		Applicant Signature _____		Date _____	
(LETTER OF AUTHORIZATION REQUIRED IF APPLICANT IS NOT THE OWNER)						
OFFICE USE ONLY	Building Code Construction Type: _____				Application Date Received: _____	
	Occupancy Classification: _____					
	Flood Plain: No Yes If yes - provide Elevation Certificate					
	Plan Review Complete: _____					
	Building Office Approval: _____					
BUILDING PERMIT # _____						
Date Paid/Issued: _____						