

TOWN OF HOTCHKISS
BUILDING PERMIT APPLICATION

DATE _____ **PERMIT #** _____

OWNER: _____ PHONE: _____

ADDRESS: _____

CONTRACTOR (if applicable): _____

ADDRESS: _____ PHONE _____

WORK TO BE DONE AT: _____

LOT SIZE _____ ZONING DISTRICT _____ OCCUPANCY _____ CLASS _____

DESCRIPTION OF WORK (**Blue Prints or Details Plans Attached**):

NEW CONSTRUCTION _____ ADDITION _____ REPAIR _____
CONVERSION _____ MOVE _____ DEMOLITION _____
REROOF _____ (Requires inspection before permit is issued.)
OTHER _____

SIZE: HEIGHT _____ WIDTH _____ LENGTH _____

NUMBER OF STORIES _____ TOTAL FLOOR AREA _____

SETBACKS: FRONT _____ REAR _____ SIDES _____

CONSTRUCTION VALUE: \$ _____ (**Total value of completed structure and work**)

NUMBER OF RESIDENTIAL UNITS _____

TYPE OF CONSTRUCTION _____

NOTICE:

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 the 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.

No building material or rubbish will be allowed on any street, avenue or sidewalk without special permission from the Hotchkiss Building Inspector.

FEES PAID HEREUNDER ARE NON-REFUNDABLE UPON ISSUANCE OF PERMIT

SIGNATURE: _____ **DATE** _____ Owner _____
Contractor _____ Authorized Agent _____

Application will be approved or disapproved within 5 working days. No work shall be started until a valid permit is issued. Building Official is available on Mondays and Thursdays. For required inspections, arrange by calling the Town Hall, 872-3663. Allow 48 hours notice, please! Inspector will try to inspect within 24 hours.

*****Do Not Fill Out Below*****

Depending upon the type of construction, the following inspections are required:

Site Inspection _____ Footer/slab _____ Foundation/Stemwall _____ Framing _____
Roof Covering _____ Insulation _____ Sheetrock Nailing _____
Final _____ Other _____

INSPECTOR ONLY: Occupancy Class _____

Comments _____

Plans Checked by: _____

Application Approved Yes _____ No _____ Comments _____

Inspector: _____ Date: _____

BUILDING PERMIT FEE \$ _____