



CITY OF ARVADA

PERMIT NUMBER

SINGLE FAMILY MISCELLANEOUS

BUILDING INSPECTION

Main Number: 720-898-7620

Inspection Request: www.arvadabuild.org OR 720-898-7630 Fax:720-898-7603

City Website: www.arvada.org

Single Family

Duplex

Townhome/Condo

JOB ADDRESS _____ ZIP _____

OWNER _____ PHONE _____

ADDRESS _____ CITY _____ ZIP _____

CONTRACTOR _____

ADDRESS _____ CITY _____ ZIP _____

ARVADA LICENSE NUMBER _____ PHONE _____

PROPERTY DATA

Lot Width _____ Depth _____ Area (sq. ft.) _____ Lot Coverage (%) _____ Fronts on (circle one): North South East West

Set Backs (in feet) From Property Line: North _____ South _____ East _____ West _____ Corner Lot? (Y/N) _____

Are there any easements? Are they shown on the site plan? Yes No Is there more than one street adjacent to this lot? Yes No

BUILDING DATA

SELECT ANY OF THE FOLLOWING THAT APPLY:

<input type="checkbox"/> REMODEL _____ (SQ FT)	<input type="checkbox"/> BASEMENT FINISH _____ (SQ FT)	<input type="checkbox"/> ADDITION _____ (SQ FT)
<input type="checkbox"/> PATIO COVER/AWNING _____ (SQ FT)	<input type="checkbox"/> SHED _____ (SQ FT)	<input type="checkbox"/> GARAGE _____ (SQ FT)
<input type="checkbox"/> CARPORT _____ (SQ FT)	<input type="checkbox"/> DECK _____ (SQ FT)	<input type="checkbox"/> SUN ROOM _____ (SQ FT)
<input type="checkbox"/> HOT TUB	<input type="checkbox"/> ESSENTIAL HOME REPAIR	<input type="checkbox"/> MISCELLANEOUS

OTHER:

PLEASE DESCRIBE PROJECT (REQUIRED):

TOTAL VALUATION \$ _____.

CODE ENF. APPROVAL BY: _____	DATE: _____	NOTES: _____
PLANNING APPROVAL BY: _____	DATE: _____	NOTES: _____
FLOOD PLAIN APPROVED BY: _____	DATE: _____	NOTES: _____
ENGINEERING APPROVAL BY: _____	DATE: _____	NOTES: _____
PERMIT CONDITIONS: _____		

The issuance of a permit, any inspections made or certificate of occupancy issued shall not be construed to be a permit for, nor an approval of, any violation of the international building codes or any other code or ordinance adopted by the City of Arvada.

By signing below I hereby acknowledge that I have read this application and state that all information is correct and agree not to start this project until this application is approved and the building permit is issued. I also agree to comply with the laws of the State of Colorado, City Municipal Code, the Land Development Code regulations and International Building Codes as adopted by the City of Arvada and as applicable. Any violation of these terms will be cause for immediate revocation of this permit.

PRINT NAME

BUILDING DIVISION APPROVAL

DATE

APPLICANT SIGNATURE

DATE