



A PEACEFUL VILLAGE COMMUNITY

# Town of Log Lane Village Building Permit

Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of Job: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

**Cost of Materials \$** \_\_\_\_\_

**Total Cost of Project \$** \_\_\_\_\_

Permit Type: \_\_\_\_\_ (including unit and foundation if applicable)

Building  Concrete  Electrical  Fence  Gas Appliance  Mechanical

Plumbing  Roofing  Siding  Sign  Window/Glass Door Replacement

Detailed Description of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Information Required by Permit Type:

Roofing: Shingle Type \_\_\_\_\_ Felt# or Underlayment \_\_\_\_\_ No. of Layers \_\_\_\_\_

Fence: Type \_\_\_\_\_ Height \_\_\_\_\_ Length \_\_\_\_\_ Post Depth \_\_\_\_\_ Cement:  Yes  No

Include drawing on back

**\*Property owner responsible for property lines.** (In Post Hole/Mow Strip)

Sign: Type of Sign \_\_\_\_\_ Total Sq. Footage \_\_\_\_\_ Overhang (if projecting) \_\_\_\_\_

Projection over ROW (if any) \_\_\_\_\_ Electrical:  Yes  No

Addition, Garage, or House: Square Footage 1st Floor: \_\_\_\_\_ 2nd Floor: \_\_\_\_\_

Basement: \_\_\_\_\_ Garage: \_\_\_\_\_ New House: \_\_\_\_\_

***If projects are not completed within 90 days,  
you must obtain a new building permit and pay applicable fees.***

OFFICE USE ONLY

Permit Fee:	\$	_____
Use Tax:	\$	_____
Inspector Fee:	\$	_____
TOTAL COST:	\$	_____

Inspection Number	Inspector's Initials	Owner Initials
_____	_____	_____
_____	_____	_____
_____	_____	_____

Approved – Building Inspector/Date

**A project is not deemed completed until signed by the designated building inspector.**

**Sales tax is calculated at 3% on 50% of materials effective 01/01/2020**

**Town Hall: (970) 867-8027**

109 Maine Street • Log Lane Village, CO 80705 • 8:00 a.m. to 5:00 p.m. Monday- Friday

Fee .....

**MOVING, REMOVING OR WRECKING PERMIT APPLICATION**

Permit No. ....

Receipt No. ....

**CITY OF LOG LANE**

City of Log Lane

**BUILDING INSPECTION DIVISION**

Building Address .....

Date of Application .....

Owner Name .....

Owner Mail Address .....

Owner City ..... Phone .....

Contractor Name .....

Contractor Address .....

Contractor City ..... Phone .....

I agree to perform the work described herein in accordance with all provisions of the Zoning Ordinance, Building Code, and health regulations of the City of Log Lane, and at the time specified in this application.

Signature of Applicant

Approved By ..... Date .....

**A BUILDING PERMIT MUST BE ISSUED PRIOR TO REMODELING WORK AT NEW SITE.**

MOVING  WRECKING

BUSINESS  RESIDENCE

NUMBER OF ROOMS.....

GROUND FLOOR AREA.....sq. ft

HEIGHT.....ft.

Disposition of Water & Sewer Service:

**MOVING ONLY**

Address from which moved .....

Address to which moved .....

Lot ..... Block ..... Addition .....

Loaded Height ..... Loaded Width .....

Exact time and date of moving .....

Route to be followed—describe fully .....

**INSPECTION RECORD**

Inspection	Comments	Date	Name