

Application for Zoning and Building Permit

Office of Zoning and Building Administrator, Town of Coal Creek, CO

Date: _____ Start Date: _____ Permit # _____

Property Owner: _____ Address: _____

Applicant: _____ Address: _____

Owner's Telephone #: _____ Applicant's Telephone #: _____

Address of Construction: _____

Legal Description: Lot _____ Block _____ Subdivision _____

Work to Consist of: _____

Construction Cost: \$ _____

Lot Dimensions: _____ X _____ ; _____ Acres or _____ Sq Ft.

Setbacks: Front Yard _____ One Side Yard _____

Rear Yard _____ Other Side Yard _____

New Construction Only:

Water Source: _____ Sanitation Source: Contact Fremont County

I hereby certify that all answers contained in this application are true and correct to the best of my knowledge and belief & further agree to comply with all laws and regulations of the State of Colorado, Building and Zoning Regulations of the Town of Coal Creek. **ANY VIOLATION OF THE BEFORE MENTIONED CODES, RULES AND REGULATIONS SHALL RESULT IN AN IMMEDIATE REVOCATION OF THIS PERMIT.**

Signature of Applicant

Date of Application

This Space for Department Use ONLY

This application has been reviewed by an authorized representative of the Town of Coal Creek Planning & Zoning Department and is hereby:

Date: _____

Fee: \$ _____ Paid:

() Approved

() Disapproved

Property is Zoned: _____

If Disapproved, state reason why:

() Variance from Board

() Special Use Permit # _____

() Other _____

Authorized Representative