



Planning, Development & Transportation

281 N. College Ave P.O. Box 580
 Fort Collins, CO 80524
 Phone 970-416-2740 Fax 224-6134

OVER-THE-COUNTER PERMITS ONLY

This application is to be used to apply for the following permits only (check all that apply). Air Conditioning
 Demolition (interior non-structural) Electrical Alteration (not service change) Gas Lighter Gas Log
 Heating Unit Lawn Sprinkler Mobile Home replacement Roofing Sewer Line Photo-voltaic
 Ventilation Water Heater Water Line Wood/Pellet Stove (must be EPA certified, provide make, model and manufacturer).

Complete all applicable information on the application. Incomplete applications will not be accepted.

Application # 00901124 Date _____
For office use only

Job Site Address (required) <u>259 S COLLEGE</u>	Value of Construction (labor, materials, profit) \$ <u>5000.00</u>
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Property Owner Name <u>STEVE LEVINGER</u>	Address <u>511 MADISON ST</u>	City/State <u>FORT COLLINS CO</u>	Zip <u>80524</u>	Phone <u>930-0907</u>	
Applicant Name <u>STEVE JOSEPHS</u>	Address <u>319 E MADISON</u>	City/State <u>FT COLLINS CO</u>	Zip <u>80524</u>	Phone <u>218-6905</u>	
Contractor <u>CHRISTOPHER BUTTERS</u>	Lic #	Address <u>319 E MADISON</u>	City/State <u>FT COLLINS CO</u>	Zip <u>80524</u>	Phone <u>916-9300</u>
Contractor City of Ft. Collins Sales Tax # <i>Sales tax number is required by all contractors.</i>	Are you paying taxes here or by report? <input type="checkbox"/> Here <input type="checkbox"/> Report Are you paying with your trust account? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Is this a residential or commercial project? Residential Commercial
 If residential, is it: Single Family Detached Condo/townhome (single family attached) Duplex
 Multifamily (apartment) Garage
 If commercial, is it: Bank Bar Church Hotel/Motel Medical office Office Retail
 Restaurant Other (explain) _____
 Is this building **50 years of age** or more? Yes No *If yes, you may need to contact Historic Preservation*
 If this is for a **demolition permit**, what year was the building constructed? _____
If prior to 1975, you will need an asbestos assessment to submit with this application.

Description of work CURBING OF FOUNDATION WALLS TO START SERVICE
IN BASEMENT OF HOTEL (1) BASEMENT ENTRANCE AT N/E CORN,
(2) CONST. ACCESS TO BASEMENT FROM (W) SIDE PARKING LOT.
 *If lawn sprinkler/backflow preventer, must list licensed plumber. If first-time A/C, must list licensed electrician.
Subcontractors: List the company name or City of Ft Collins license #
 Electrician PAULIE Plumber ELMANN SELIGER Mechanical FERRELLS Roofer _____ Other _____
HEATING + PIP

I hereby acknowledge that I have read this application and state that the above information is complete and correct. I agree to comply with all requirements contained herein and city ordinances and state laws regulating building construction. **I know that a permit is not valid until it has been paid and issued.**

Applicant:
 Print Name: STEVE JOSEPHS Signature [Signature] Date 3/2/09