



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 # B0902024
For office use only

Date 04/13/2009

Job Site Address (required) <u>125 W. CRESTRIDGE DR</u>	Value of Construction (labor, materials, profit) <u>\$ 14,000.00</u>
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Property Owner Name <u>LARIMER CENTER FOR MENTAL HEALTH</u>	Address	City/State <u>LOVELAND, CO</u>	Zip <u>80538</u>	Phone	
Applicant Name <u>DEREK COHEN</u>	Address <u>4700 INNOVATION DR</u>	City/State <u>FT. COLLINS, CO</u>	Zip <u>80525</u>	Phone <u>970-204-0100</u>	
Contractor <u>DRAHOTA</u>	Lic #	Address <u>4700 INNOVATION DR</u>	City/State <u>FT. COLLINS, CO</u>	Zip <u>80525</u>	Phone <u>970 204-0100</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? 1950's
If prior to 1975, you will need an asbestos assessment to submit with this application.

Description of work DEMOLITION OF INTERIOR NON-STRUCTURAL PARTITIONS
1974
 *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 CIRCLE G Plumber LIND'S P&H Mechanical BALANCE PRINT Roofer _____ Other _____

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: DEREK COHEN Signature [Signature] Date 4/13/2009