

TOWN OF NEDERLAND PERMIT APPLICATION

Permit #:

PROPERTY OWNER	PHONE		
MAILING ADDRESS			
CONTRACTOR / CONTACT PERSON	PHONE		
CONTRACTOR ADDRESS City, State, and Zip	LICENSE NUMBER/Expiration Date		
CONTRACTOR EMAIL CONTACT	PREFERRED FORM OF CONTACT		
LICENSED PLUMBER	LICENSE NUMBER/Expiration Date		
LICENSED ELECTRICIAN	LICENSE NUMBER/Expiration Date		
MECHANICAL CONTRACTOR	LICENSE NUMBER/Expiration Date		
JOB ADDRESS			
PLEASE PROVIDE HOMEOWNER INFORMATION AND APPROPRIATE CONTRACTOR INFORMATION FOR SAFEbuilt INSPECTORS TO CONTACT AS NEEDED			
Description of work:			
IMPORTANT – COMPLETE ALL ITEMS AND MARK ALL APPLICABLE BOXES			
A. FEES: <input type="checkbox"/> Permit Fee: _____ <input type="checkbox"/> Electrical Fee: _____ <input type="checkbox"/> Plan Review: _____ <input type="checkbox"/> Use Tax: _____ <input type="checkbox"/> County Tax: _____ <input type="checkbox"/> Water Tap: _____ <input type="checkbox"/> Sewer Tap: _____ <input type="checkbox"/> Other: _____ Total Fees: _____ <input type="checkbox"/> Non-profit Tax Exemption (Please provide certificate)	B. ONE STOP JOB DESCRIPTION <input type="checkbox"/> Electrical Service Change <input type="checkbox"/> Fence > 6ft (NMC 16-89 (a) (b)) <input type="checkbox"/> Furnace Replacement <input type="checkbox"/> Lawn Sprinkler <input type="checkbox"/> Misc. Mechanical, Plumbing or Electrical <input type="checkbox"/> Replacement Windows/Doors <input type="checkbox"/> Reroof <input type="checkbox"/> Siding <input type="checkbox"/> Water Heater <input type="checkbox"/> Air Conditioner <input type="checkbox"/> AC/Furnace Combination HEATING FUEL TYPE <input type="checkbox"/> Gas LP or NG <input type="checkbox"/> Electricity <input type="checkbox"/> Solar Other _____	C. MISCELLANEOUS Must be accompanied by any associated documentation. These projects will require a plan review and will <u>not</u> be issued same-day. <input type="checkbox"/> Demolition (Asbestos Lab Results) <input type="checkbox"/> Pool/Hot Tub (Manufacturer Specs.) <input type="checkbox"/> Retaining Wall (Engineering Letter) <input type="checkbox"/> Temporary or Accessory Structure Exceeding 120sf (Site Plan) A. TOTAL VALUE Project Valuation \$ _____ Electrical Valuation \$ _____ of Total Valuation	
<p>The applicant, his agents and employees shall comply with all the rules, restrictions and requirements of the Town and Building Codes governing location, construction and erection of the above proposed work for which the permit is granted. The Town or its agents are authorized to order the immediate cessation of construction at anytime a violation of the codes or regulations appears to have occurred. Violation of any of the codes or regulations applicable may result in the revocation of this permit.</p> <p>Buildings MUST conform with plans, as submitted to the Town. Any changes of plans or layout must be approved prior to the changes being made. Any change in the use or occupancy of the building or structure must be approved prior to proceeding with construction.</p> <p>The applicant is required to call for inspections at various stages of the construction, and in accordance with the aforesaid rule, the applicant shall give the building inspector not less than one day's notice to perform such activities. The applicant shall provide access to and means for inspection of such work.</p> <p>In the event construction is not commenced within 180 days of issuance of this permit, then the same is automatically void. Cessation of work for a period of 180 continuous days shall also cause this permit to be void. Permits are not transferable.</p>			
SIGNATURE OF APPLICANT	DATE	APPROVED TOWN STAFF	DATE