Date Received	TENANT FINISH / COMMERCIAL REMODEL PERMIT APPLICATION	Permit Number	

Address of Proposed Construction	Subdivision	Lot	Block

Property Owner	Owner Email Address (required)	Owner Phone Number

Owner's Address (if different from above)		City, State, Zip

Contractor	Contractor Phone Number	Contractor License Number

Contractor Address		City, State, Zip

Job Contact Name	Contact Office Phone Number	Contact Mobile Phone Number

Job Contact E-Mail Address		Job Contact Title

Project Valuation (Including total value of work, materials, labor, overhead and profit.) BMC §15-03-100

Trade	Valuation	Name of Subcontractor
General:	$	
Electrical:	$	
HVAC:	$	
Plumbing:	$	
Fire Sprinkler:	$	
TOTAL:	$	

All signs, construction trailers, grading, landscape irrigation, and fences require separate permits!

Description of Construction (be specific and complete all lines below)

Building Height:	Number of Stories:	IBC Construction Type:	IBC Occupancy Class:
Fire Sprinklers? ☐		Sq. ft.	Used as:
Health Dept contacted? ☐		Sq. ft.	Used as:
Fire Dept contacted? ☐		Sq. ft.	Used as:
Is this a new business/location? ☐		Sq. ft.	Used as:
Existing bldg use:	TOTAL AREA:		
Hazardous Materials stored or used? Yes ☐ No ☐	If yes, provide list and maximum quantities		

It is the owner's responsibility to obtain any Architectural Control Committee approvals that may be applicable. I hereby state that the above is correct. I recognize that the approval of plans, issuance of a permit, or subsequent inspection approvals shall not be construed to allow violations of the code or other ordinances or laws enforced by the City and County of Broomfield. I consent to provide entry to inspectors as set forth in the building code and to request inspections as required. I consent to pay the use tax based upon the purchase price of all building and construction materials, as required by ordinance. I understand records are subject to audit and verification for 3 years following final inspection or C.O. Broomfield Municipal Code requires taxpayers to maintain building use tax records for 3 years. **All materials, drawings, plans, or documents submitted for this permit become public record and may be released to the public.** *By signature below the signatory certifies and declares that he/she is either the Owner or the Authorized Agent of the owner of the property.*

Signature:	Print Name Legibly:	Date:

↓ ↓ ↓ **Office Use Only** ↓ ↓ ↓

Building Dept. Approval:		Date: