

ELBERT FIRE PROTECTION DISTRICT

P.O. BOX 98, 24310 Main Street Elbert, CO 80106

Phone: (303) 648-3000 Email: <u>elbertfire@hotmail.com</u> <u>elbertfire.org</u>

PLAN REVIEW PERMIT APPLICATION

NOTICE

The plan review process takes a minimum of 10 working days from the date the plans are submitted

Proje	CT INFORMA	TION		
Project Name:		Date:		
Project Address:		Project City, State, Zip:		
Suite #			,	
APPLIC	ANT INFORM	ATION		
Applicant Name:		Applicant Title:		
Applicant Address:		Applicant City, State, Zip:		
Applicant Phone:	Ap	Applicant Fax:		
Applicant Email:				
	ROJECT TYPE			
□ New Building □ Remodel □ Tenant Finish		evelopment	□ Water Plan	☐ County Referral
□ Deferred Submittal □ Revision □ Addendum Project Sq Ft: Project Sq Ft./Floor:		Existing Permit # Number of Stories:		
110,000.041.07	1 1001.	Numbero	Totolics.	
Architect/Engineer/Gi	ENERAL CON	TRACTOR I	NFORMATION	
Project Architect/Engineer/General Contractor N	ame:			
Address:	City, S	y, State, Zip:		
Contact Person Name:				
Phone:	Fax:			
Email:				
I hereby certify that I have read this application and k laws and rules governing this type of work shall be co provide entry to inspectors during normal business h Elbert Fire Protection District plan review fees and pe reinspection fees that may be required.	mplied with whours and to rec	nether specifi quest inspecti	ed herein or not. I ions as needed. I c	consent to consent to pay
Print Name:				