

MECHANICAL PERMIT APPLICATION

Town of Minturn 302 Pine Street, P.O. Box 309 Minturn, CO 81645
 Minturn Phone 827-5645 Fax, 827-5545 / Inspector, Phone 1-888-220-2464

Permit No: _____

LEGAL DESCRIPTION/ ADDRESS:			
LOT NO.	BLK.	FILING	SUBDIVISION

OWNER:	Phone No.	
Mailing Address:		
CONTRACTOR:	Phone No.	Lic. No.
Type of Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration/Remodel <input type="checkbox"/> Remove <input type="checkbox"/> Other		
Describe:		

NOTICE!!! READ BEFORE SIGNING: I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor	Signature of Owner
Date	Date

***** Do not write below this line - Office use only*****

Valuation:	Permit Fee:	Other:	Total Due
Application accepted by:		Approved for issuance By:	