



## MULTI-FAMILY AND NON-RESIDENTIAL BUILDING PERMIT APPLICATION

### ► PROJECT INFORMATION

Project Address		Lot	Is this project for a tax exempt entity? <input type="checkbox"/> Yes <input type="checkbox"/> No
Project Address <i>(continued)</i>		Block	Is there an enforcement case or stop work order? <input type="checkbox"/> Yes <input type="checkbox"/> No
Unit or Suite Number		Subdivision	Is there an associated previous review? <i>(HIS/ADR/AUR/LUR/TEC)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
City	Zip Code	Legal Description <i>(not required if providing Lot, Block, and Subdivision above)</i>	Zone District

### ► PERMIT DETAILS

<b>Permit Type:</b> <i>(check only one)</i>	<input type="checkbox"/> Multi-Family Dwellings No. of Dwelling Units: _____	<input type="checkbox"/> Mixed Use No. of Dwelling Units: _____	<input type="checkbox"/> Non-Residential / Commercial	<input type="checkbox"/> Non-Residential Accessory structure
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<b>Scope of Work:</b> <i>(check only one)</i>	<input type="checkbox"/> New Construction <input type="checkbox"/> First-time Tenant Finish <input type="checkbox"/> Core and Shell <input type="checkbox"/> White Box Alteration <input type="checkbox"/> Alteration / Tenant Improvement <input type="checkbox"/> Addition <input type="checkbox"/> Addition and Alteration <input type="checkbox"/> Repair
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Review and complete the [Multi-Family and Non-Residential Building Permit Checklist](#). This is an application requirement.

Description of Scope of Work *(Identify all scopes of work and square footages associated with each scope):*

**Building Uses and Work Scope** *(the following will be used to calculate building permit fees and development excise taxes)*

**Use Type (check all that apply)**

<input type="checkbox"/> Amusement/Recreational	<input type="checkbox"/> Liquor Related Business	<input type="checkbox"/> Parking Garage	<input type="checkbox"/> Service Industrial
<input type="checkbox"/> Carport - Attached	<input type="checkbox"/> Manufactured/Mobile Home	<input type="checkbox"/> Patio Cover	<input type="checkbox"/> Service Station
<input type="checkbox"/> Carport - Detached	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Personal Service	<input type="checkbox"/> SF Attached Dwelling
<input type="checkbox"/> Commercial/Retail	<input type="checkbox"/> Marijuana/Hemp related	<input type="checkbox"/> Porch	<input type="checkbox"/> Shed
<input type="checkbox"/> Deck	<input type="checkbox"/> Medical & Dental Clinics	<input type="checkbox"/> Public Works/Utilities	<input type="checkbox"/> Shop
<input type="checkbox"/> Financial Institution	<input type="checkbox"/> Motel/Hotel/B & B	<input type="checkbox"/> Religious Assembly	<input type="checkbox"/> Swimming Pool
<input type="checkbox"/> Garage - Attached	<input type="checkbox"/> Multi-Family Dwellings	<input type="checkbox"/> Research and Development	<input type="checkbox"/> Telecommunications
<input type="checkbox"/> Garage - Detached	<input type="checkbox"/> Office - Administrative	<input type="checkbox"/> Restaurant	<input type="checkbox"/> Warehousing
<input type="checkbox"/> Government Uses	<input type="checkbox"/> Office - Professional	<input type="checkbox"/> School/Educational	<input type="checkbox"/> Wholesale
<input type="checkbox"/> Hospital/Institutional	<input type="checkbox"/> Office - Technical		<input type="checkbox"/> Other (describe): _____



**▶ PERMIT DETAILS (continued)**

*Type of Work: Complete one section for each occupancy/construction type included in the scope of work (this information is used to calculate building permit fees/development excise taxes). If more than three occupancies/construction types are included in the scope of work, complete and attach additional copies of this page.*

<u>Occupancy Classification</u> (Mark only one)	<u>Construction Type</u> (Mark only one)	<u>Scope</u> (Mark and provide square footage for all that apply)	<u>Fire Suppression</u> (Mark all that apply)
<input type="checkbox"/> A1 <input type="checkbox"/> F1 <input type="checkbox"/> I1 <input type="checkbox"/> R3 <input type="checkbox"/> A2 <input type="checkbox"/> F2 <input type="checkbox"/> I2 <input type="checkbox"/> R4 <input type="checkbox"/> A3 <input type="checkbox"/> H1 <input type="checkbox"/> I3 <input type="checkbox"/> S1 <input type="checkbox"/> A4 <input type="checkbox"/> H2 <input type="checkbox"/> I4 <input type="checkbox"/> S2 <input type="checkbox"/> A5 <input type="checkbox"/> H3 <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> B <input type="checkbox"/> H4 <input type="checkbox"/> R1 <input type="checkbox"/> E <input type="checkbox"/> H5 <input type="checkbox"/> R2	<input type="checkbox"/> I-A <input type="checkbox"/> III-B <input type="checkbox"/> I-B <input type="checkbox"/> IV <input type="checkbox"/> II-A <input type="checkbox"/> V-A <input type="checkbox"/> II-B <input type="checkbox"/> V-B <input type="checkbox"/> III-A	<input type="checkbox"/> New SF: _____ <input type="checkbox"/> Addition SF: _____ <input type="checkbox"/> Core and Shell SF: _____ <input type="checkbox"/> Alteration/ Remodel SF: _____ <input type="checkbox"/> Repair SF: _____ <input type="checkbox"/> Tenant Finish/ Improvement SF: _____	<input type="checkbox"/> Automatic Fire Extinguishing System  <input type="checkbox"/> Automatic Fire Alarm System  <input type="checkbox"/> Sprinkler System <input type="checkbox"/> NFPA 13 <input type="checkbox"/> 13-R <input type="checkbox"/> 13-D
<input type="checkbox"/> A1 <input type="checkbox"/> F1 <input type="checkbox"/> I1 <input type="checkbox"/> R3 <input type="checkbox"/> A2 <input type="checkbox"/> F2 <input type="checkbox"/> I2 <input type="checkbox"/> R4 <input type="checkbox"/> A3 <input type="checkbox"/> H1 <input type="checkbox"/> I3 <input type="checkbox"/> S1 <input type="checkbox"/> A4 <input type="checkbox"/> H2 <input type="checkbox"/> I4 <input type="checkbox"/> S2 <input type="checkbox"/> A5 <input type="checkbox"/> H3 <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> B <input type="checkbox"/> H4 <input type="checkbox"/> R1 <input type="checkbox"/> E <input type="checkbox"/> H5 <input type="checkbox"/> R2	<input type="checkbox"/> I-A <input type="checkbox"/> III-B <input type="checkbox"/> I-B <input type="checkbox"/> IV <input type="checkbox"/> II-A <input type="checkbox"/> V-A <input type="checkbox"/> II-B <input type="checkbox"/> V-B <input type="checkbox"/> III-A	<input type="checkbox"/> New SF: _____ <input type="checkbox"/> Addition SF: _____ <input type="checkbox"/> Core and Shell SF: _____ <input type="checkbox"/> Alteration/ Remodel SF: _____ <input type="checkbox"/> Repair SF: _____ <input type="checkbox"/> Tenant Finish/ Improvement SF: _____	<input type="checkbox"/> Automatic Fire Extinguishing System  <input type="checkbox"/> Automatic Fire Alarm System  <input type="checkbox"/> Sprinkler System <input type="checkbox"/> NFPA 13 <input type="checkbox"/> 13-R <input type="checkbox"/> 13-D
<input type="checkbox"/> A1 <input type="checkbox"/> F1 <input type="checkbox"/> I1 <input type="checkbox"/> R3 <input type="checkbox"/> A2 <input type="checkbox"/> F2 <input type="checkbox"/> I2 <input type="checkbox"/> R4 <input type="checkbox"/> A3 <input type="checkbox"/> H1 <input type="checkbox"/> I3 <input type="checkbox"/> S1 <input type="checkbox"/> A4 <input type="checkbox"/> H2 <input type="checkbox"/> I4 <input type="checkbox"/> S2 <input type="checkbox"/> A5 <input type="checkbox"/> H3 <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> B <input type="checkbox"/> H4 <input type="checkbox"/> R1 <input type="checkbox"/> E <input type="checkbox"/> H5 <input type="checkbox"/> R2	<input type="checkbox"/> I-A <input type="checkbox"/> III-B <input type="checkbox"/> I-B <input type="checkbox"/> IV <input type="checkbox"/> II-A <input type="checkbox"/> V-A <input type="checkbox"/> II-B <input type="checkbox"/> V-B <input type="checkbox"/> III-A	<input type="checkbox"/> New SF: _____ <input type="checkbox"/> Addition SF: _____ <input type="checkbox"/> Core and Shell SF: _____ <input type="checkbox"/> Alteration/ Remodel SF: _____ <input type="checkbox"/> Repair SF: _____ <input type="checkbox"/> Tenant Finish/ Improvement SF: _____	<input type="checkbox"/> Automatic Fire Extinguishing System  <input type="checkbox"/> Automatic Fire Alarm System  <input type="checkbox"/> Sprinkler System <input type="checkbox"/> NFPA 13 <input type="checkbox"/> 13-R <input type="checkbox"/> 13-D



**▶ PERMIT VALUATIONS**

<b>TOTAL PROJECT VALUATION</b> <i>(include MEP valuations)</i>	\$ _____
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MECHANICAL SCOPE AND VALUATION						Residential /Multi-Family Valuation	Non-Residential Valuation	
Identify all types of systems to be installed (new and/or replacement).						\$ _____	\$ _____	
Water Heating System	New	Replace	Building Heating System	New	Replace	Gas System	New	Replace
<input type="checkbox"/> Low Pressure Boiler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Duct Furnace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Fireplace Insert	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Water Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Forced Air Furnace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Gas Fireplace	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> Heating and Cooling Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Gas Logs	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> High Pressure Boiler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Gas Meter Move	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> Low Pressure Boiler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Gas Piping	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> Sealed Combustion Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Gas Piping and Fireplace	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> Space Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> Unit Heater	<input type="checkbox"/>	<input type="checkbox"/>	Describe: _____		
Cooling System	New	Replace				Hood	New	Replace
<input type="checkbox"/> Comfort Cooling	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/> Type I Vent and Fan Hood	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Refrigeration	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/> Type II Vent and Fan Hood	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Ventilation Equipment	<input type="checkbox"/>	<input type="checkbox"/>						

ELECTRICAL SCOPE AND VALUATION					Residential/Multi-Family Valuation	Non-Residential Valuation
Check and complete all that apply.					\$ _____	\$ _____
Type of Service	Add	New	Replace	Residential/Multi-Family Only		
<input type="checkbox"/> Non-Residential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> New Wiring	Sq. ft: _____	
<input type="checkbox"/> Residential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Rewiring	Sq. ft: _____	
<input type="checkbox"/> Temporary Construction Power						
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Size of Existing Service: _____				Size of Proposed Service: _____		



**▶ PERMIT VALUATIONS (continued)**

PLUMBING SCOPE AND VALUATION	Residential/Multi-Family Valuation	Non-Residential Valuation
Check and complete all that apply.	\$	\$
<b>Plumbing System</b>	<b>Backflow Preventors</b>	
<input type="checkbox"/> Fixture Relocate Only <input type="checkbox"/> Interceptor <input type="checkbox"/> Water Piping <input type="checkbox"/> Fixture Replacement Only <input type="checkbox"/> Sewer                                      (in existing locations)	<input type="checkbox"/> Fire Line      Quantity: _____ <input type="checkbox"/> Irrigation      Quantity: _____ <input type="checkbox"/> Domestic      Quantity: _____	

SITework	Residential/Multi-Family Valuation	Non-Residential Valuation
Check and complete all that apply.	\$	\$
<input type="checkbox"/> Landscaping <input type="checkbox"/> Shoring <input type="checkbox"/> Street Trees <input type="checkbox"/> Grading – Cubic yards: <input type="checkbox"/> Irrigation System(s)              _____ <input type="checkbox"/> Other: _____	<b>Stormwater Management</b> <input type="checkbox"/> Detention Pond / Stormwater Quality Facility <input type="checkbox"/> Erosion Control / Stormwater Management Plan (SWMP*) Dates Erosion Control will be in Place: From _____ To: _____ <i>*SWMP is required for all projects disturbing 1 acre or more of land.</i>	

**▶ CONTACT INFORMATION**

Property Owner		Licensed General Contractor	
Name		Company Name	
Phone Number		Phone Number	
Email Address		Email Address	
Mailing Address		Mailing Address	
City	Zip Code	City	Zip Code
Property Owner Signature		Contact Person	

***The general contractor is responsible for hiring sub-contractors that are licensed by the City of Boulder.***



► **CONTACT INFORMATION (continued)**

Primary Contact for Permit		Applicant	
Name		Name	
Phone Number		Phone Number	
Email Address		Email Address	
Mailing Address		Mailing Address	
City	Zip Code	City	Zip Code

**FEES**

Fees are set by the Boulder City Council and are included in Title 4 Chapter 20 of the Boulder Revised Code. A plan check fee is required at time of application.

**NOTICE**

Contractors and subcontractors are required to have an active license with the City of Boulder. This application expires after 180 days if the permit is not obtained.

**AFFORDABLE HOUSING REQUIREMENTS**

Developments that include housing units must meet the requirements of B.R.C. 9-13, Inclusionary Housing which requires a percentage of all residential development be permanently affordable. **Program compliance must be verified before submitting for a building permit.** Prior to building permit submittal please contact a housing planner to discuss options for meeting the requirements. Contact and program information may be found at [www.boulderaffordablehomes.com](http://www.boulderaffordablehomes.com).

**SIGNATURE OF APPLICANT/OWNER/AUTHORIZED AGENT FOR OWNER**

I agree to perform the work described herein, in accordance with the plans and/or specifications submitted and with all provisions of the Building Code, Land Use Code, and Health Regulations of the City of Boulder as enumerated in the Boulder Revised Code, 1981.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date