



# CITY OF CAÑON CITY

## Building Department

P.O. Box 1460 • 128 Main Street  
Cañon City, CO 81215-1460  
(719) 276-5253 • [www.canoncity.org](http://www.canoncity.org)

### FOUNDATION ONLY FOR MANUFACTURED HOME

Please provide the following documents:

1. Building permit application.
2. Routing (top portion filled out)
3. Site Plan with details.
4. Soils Investigation & Lab Analysis by a Geotech Engineer.
5. Engineer stamped foundation plan. (site specific)

If you have questions, please contact the Building Department at 719-276-5253.



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## BUILDING PERMIT APPLICATION

### ALL INFORMATION REQUIRED

OWNER'S NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OWNERS TELEPHONE NUMBER: (      ) \_\_\_\_\_

JOB SITE ADDRESS: \_\_\_\_\_

PARCEL NUMBER: (CONTACT FREMONT COUNTY ASSESSOR AT 719.276.7310) \_\_\_\_\_

LEGAL DESCRIPTION: \_\_\_\_\_

CONTRACTOR'S BUSINESS NAME: \_\_\_\_\_

CONTRACTOR'S LICENSE # \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

VALUATION OF WORK (INCLUDE LABOR AND MATERIALS): \$ \_\_\_\_\_

DETAILED DESCRIPTION OF WORK: \_\_\_\_\_

\_\_\_\_\_

### PROVIDE THE FOLLOWING INFORMATION IF SUBMITTING A SITE PLAN WITH APPLICATION:

1. LOCATION OF PROPOSED CONSTRUCTION AND EXISTING STRUCTURES.
2. SQUARE FOOTAGE AREA OF EACH BUILDING (INCLUDE SHEDS, CARPORTS, PATIOS, ETC.).
3. SET BACK DIMENSIONS FROM PROPERTY LINE FOR ALL STRUCTURES.
4. LOT DIMENSIONS / LOT SQUARE FOOTAGE.
5. STREETS, ALLEYS, EASEMENTS AND ANY OTHER "RIGHT OF WAY".
6. LOCATION OF WATER, SEWER, GAS AND ANY OTHER UNDERGROUND UTILITIES (IF KNOWN).
7. PLANS TO CONTROL DRAINAGE ON PROPERTY DURING CONSTRUCTION.

### OWNER / CONTRACTOR

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

#### **FOR OFFICE USE ONLY**

ZONE DISTRICT: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

LICENSED: (YES) \_\_\_\_\_ (NO) \_\_\_\_\_

URBAN RENEWAL: (YES) \_\_\_\_\_ (NO) \_\_\_\_\_

## **RESIDENTIAL SITE PLAN**

Indicate North

I/WE HEREBY CERTIFY THAT THE PROPOSED CONSTRUCTION WILL CONFORM TO THE DIMENSIONS AND USES SHOWN ABOVE AND THAT NO CHANGES WILL BE MADE WITHOUT PRIOR APPROVAL FROM THE CANON CITY BUILDING DEPARTMENT.

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PRINT NAME

SIGNATURE OF OWNER/CONTRACTOR

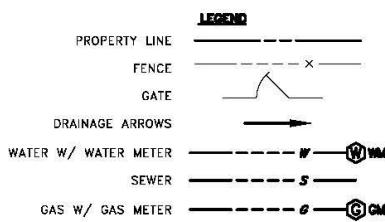
# RESIDENTIAL SITE PLAN (EXAMPLE)



ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 OWNERS: \_\_\_\_\_  
 \_\_\_\_\_

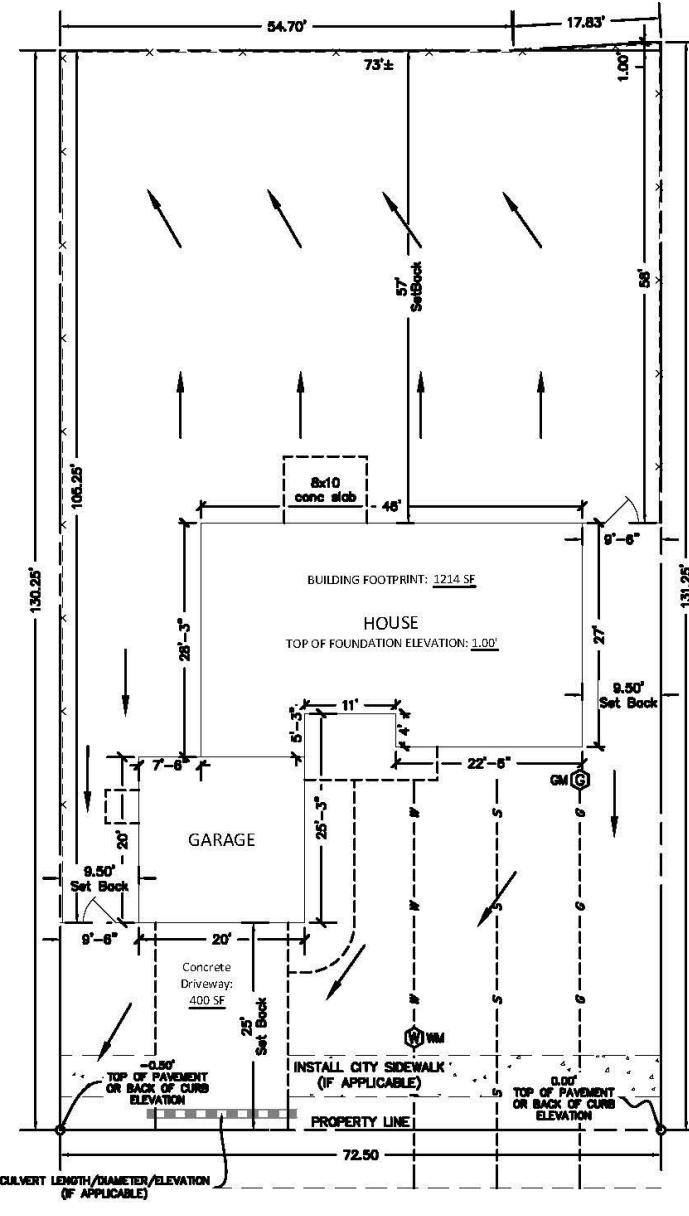
**LEGAL DESCRIPTION:  
(EXAMPLE)**

LOT 1, BLOCK 2, SOUTH SUBDIVISION.



NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SCALE:**



STREET NAME: \_\_\_\_\_



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## REQUIRED APPROVALS ROUTING SHEET

Project: \_\_\_\_\_ Permit #: \_\_\_\_\_

Address: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Owner: \_\_\_\_\_ Contractor: \_\_\_\_\_

Comments: \_\_\_\_\_

*RESIDENTIAL WILL TAKE APPROXIMATELY 14 BUSINESS DAYS TO COMPLETE PRIOR TO ISSUANCE OF A BUILDING PERMIT. COMMERCIAL PLANS TYPICALLY TAKE APPROXIMATELY 24-30 WORKING DAYS FOR INITIAL REVIEW AND ROUTING. LARGE COMMERCIAL PROJECTS MAY REQUIRE A LONGER TIME TO PLAN REVIEW.*

It is the responsibility of the building permit APPLICANT to secure the required approvals from the indicated departments. This must be accomplished prior to issuance of the building permit and for commercial projects again at the completion of the project prior to final inspection and/or issuance of the Certificate of Occupancy.

**THE PROPERTY MAY NOT BE OCCUPIED UNTIL A FINAL INSPECTION IS DONE AND A CERTIFICATE OF OCCUPANCY IS ISSUED.** FAILURE TO COMPLY COULD RESULT IN YOUR BEING CITED WITH A MISDEMEANOR IN ACCORDANCE WITH 15.02.040 OF THE CAÑON CITY MUNICIPAL CODE.

### **CORE APPLICATION ROUTING NECESSARY**

Below are the primary routing approval signoff's. Please contact the Building Department to see if any can be eliminated. 719-276-5253

**NOTE: PLANS SHOULD ACCOMPANY THIS ROUTING SLIP AND ADEQUATE TIME SHOULD BE AFFORDED TO THOSE ENTITIES FROM WHICH APPROVAL IS REQUESTED TO REVIEW THE PLANS.**

<b><u>DEPARTMENT</u></b>	<b><u>APPROVAL PRIOR TO ISSUANCE OF PERMIT</u></b> Approval Date: Authorized	<b><u>APPROVAL PRIOR TO FINAL OR C/O</u></b> Approval Date: Authorized
Public Works	_____	*See attached final checklist _____
City Planning & Zoning	_____	_____
County Health Department*	_____	_____
Fire District	_____	_____
Water Department*	_____	_____

*\*for commercial applications only*

<b>Public Works</b>	Leo Evans	719.276.5291	Fax 719.269.9017	128 Main Street, Cañon City, CO 81212
<b>Planning &amp; Zoning</b>	Patrick Mulready	719.276.5294	Fax 719.269.9017	128 Main Street, Cañon City, CO 81212
<b>County Health</b>	Amy Jamison	719.276.7450	Fax 719.276.7451	201 N. 6 <sup>th</sup> Street, Cañon City, CO 81212
<b>Fire District</b>	David DelVecchio	719.275.8666	Fax 719.275.1486	1475 N. 15 <sup>th</sup> Street, Cañon City, CO 81212
<b>Water Department</b>	Travis Payne	719.276.5344	Fax 719.269.9017	1525 S. 9 <sup>th</sup> Street, Cañon City, CO 81212