

BASEMENT FINISH PERMIT APPLICATION



PERMIT#: _____

PERMIT FEE: _____

ELBERT COUNTY BUILDING DEPARTMENT
PO BOX 7 - 215 COMANCHE STREET
KIOWA, CO 80117
TELEPHONE: 303-621-3172 FAX: 303-621-3165
INSPECTION LINE: 303-621-3140

Project Address: _____ City: _____ Zip: _____

Subdivision/Project Name: _____

Contractor: _____ Phone: _____

Mailing Address: _____ Fax: _____

Owner Name: _____ Phone: _____

Owner mailing address: _____

City: _____ State: _____ Zip: _____

Email Address contractor: _____

TYPE OF WORK YOU WILL BE DOING:

Sq feet of unfinished area: _____ Sq feet of finished area: _____

2 Drawing of complete basement are required drawn to scale with scale indicated on your plans. To include the following:

- ◆ **Location and sizes of all windows. At least one window in all bedrooms must meet egress requirements.**
- ◆ Any door to the outside if applicable.
- ◆ **Location of stairs.**
- ◆ Dimensions of all rooms.
- ◆ **Use of each room (bedroom, family room, storage etc.)**
- ◆ Location of furnace and water heater.
- ◆ **Total square footage of basement, then broken out into finished and unfinished.**
- ◆ Location of fireplaces or wood, pellets and gas burning stoves.

We will not accept incomplete plans under any circumstances

Electrical permits issued by the State of Colorado, all rough and or final inspections by the State must be approved before you call the County for your rough or your final building inspection. To obtain a state electrical permit call 303-894-2300 or go the State Electrical web site:

www.dora.state.co.us/electrical

I certify that I have read and understand the above: _____

SIGNATURE AND DATE

OFFICE USE ONLY

Sq Ft: BSMU _____ Sq Ft: BSMF _____

Group _____ Division _____ Type _____

Special Notes: _____

BP _____ PR _____ ST _____ FD _____ UT _____

Approved : Month _____ Day _____ Year _____ Expires: Month _____ Day _____ Year _____

Six Month Extension: \$150.00 New Expiration Month: _____ Day _____ Year _____

Building Department Signature and Date