City of Fort Collins

GAS/WOOD BURNING APPLIANCES PERMIT APPLICATION

Community Development and Neighborhood Services

281 N College
Fort Collins, CO 80524

buildingservices@fcgov.com
970-416-2740

Application # _____

Date Received _____

ALL information is REQUIRED. Incomplete applications will not be accepted.

Job Site Address

Address _____ City/State/Zip _____

Property Owner Information

Name _____ Phone Number _____

Address _____ City/State/Zip _____

◯ **RESIDENTIAL**	◯ Single Family Detached	◯ Townhome (attached)	◯ Duplex	◯ Apartment/Condo	◯ Garage/Other		
◯ **COMMERCIAL**	◯ Bank	◯ Bar	◯ Church	◯ Hotel/Motel	◯ Medical Office	◯ Office	◯ Retail	◯ Restaurant

Value of Work

Labor and Materials $ _____

Scope of Work

◯ Wood/Pellet stove (required to be EPA approved) Model Name _____

Manufacturer _____

◯ Gas Fireplace Length of extensions of gas line (if necessary) _____

Please list plumber if not completing _____

◯ Fire Pit

Additional Information
(if applicable)

Contractor

Name _____

Address _____ City/State/Zip _____

Phone Number _____ Email _____

License Number _____ Certificate Number _____

Subcontractor License (if applicable) _____ Subcontractor Name (if applicable) _____

I hereby acknowledge that I have read this application and state that the above information is complete and correct. I agree to comply with all requirements contained herein and city ordinances and state laws regulating building construction. **I know that a permit is not valid until it has been paid and issued.**

Print Name	*Signature*	*Date*