

**Eagle River Fire Protection District**  
 P.O. Box 7980  
 Avon, CO 81620  
 Phone: 970.748.4739  
 Fax: 970.748.4747



**Building Permit #  
 (Required)**

- Town of Avon
- Eagle County
- \_\_\_\_\_

**Permit Application**

Job Address		Project Name		
Owner	Mailing Address	Phone		
General Contractor	Mailing Address	Phone	License No.	
Fire Alarm Contractor	Mailing Address	Phone	License No.	
Fire Sprinkler Contractor	Mailing Address	Phone	License No.	
Standpipe Contractor	Mailing Address	Phone	License No.	
Other Contractor	Mailing Address	Phone	License No.	
Type of Permit Requested: <input type="checkbox"/> New <input type="checkbox"/> Remodel <input type="checkbox"/> Addition <input type="checkbox"/> Tenant Finish				
Valuation of Work				
Special Conditions:				

**Notice!! Read Before Signing**

This permit becomes null and void if work or construction authorized is not commenced within 180 days or if construction or work is suspended or abandoned for a period of 190 days at any time after work is commenced.

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 violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor	Date
Signature of Owner	Date

**Form of Payment**

Permit Fee	Receipt No.	
Plan Check Fee	Check No.	
Total Fee	Other	
Application Accepted By:	Plans Checked By:	Approved for Issuance By:
Date	Date	Date
White Copy: Eagle River FPD      Canary Copy: Building Dept.      Pink Copy: Applicant		