TOWN OF THERMOPOLIS
MECHANICAL PERMIT APPLICATION

APPLICATION DATE _____ PERMIT NUMBER _____

Applicant to complete numbered spaces only.

JOB ADDRESS						
1	LEGAL DESCR.	LOT NO.	BLOCK	SUBDIVISION		
2	OWNER	ADDRESS	ZIP	PHONE		
3	CONTRACTOR	ADDRESS	PHONE			
4	ARCHITECT OR DESIGNER	ADDRESS	PHONE			
5	ENGINEER	ADDRESS	PHONE			
6	USE OF BUILDING					
7	CLASS OF WORK	NEW	ADDITION	ALTERATION	REPAIR	MOVE	REMOVE
8	DESCRIBE WORK					

PERMIT NO.

JOB ADDRESS

TYPE OF FUEL: OIL☐ SOLID☐ NAT.GAS☐ LPG☐

NO.	TYPE OF EQUIPMENT	FEE

SPECIAL CONDITIONS:

NOTICE

TIES PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS OR ORDINANCES GOVERNING THIS TYPE OF WORK WELL 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 OWNER OR AUTHORIZED AGENT _____ DATE _____

TITLE _____ DATE _____

TOTAL FEE

WHEN PROPERLY VALIDATED (IN THIS SPACE), THIS IS YOUR PERMIT

TOWN OFFICIAL_____ DATE_____