



**SHUMS CODA  
ASSOCIATES**

Colorado Regional Office  
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**PLEASE CALL PAONIA TOWN HALL WITH QUESTIONS 970-527-4101**

## PAONIA MECHANICAL PERMIT APPLICATION

Project Address:		Suite	Application Date		
<b>CONTRACTOR (APPLICANT)</b>	Name		<input type="checkbox"/> Owner <input type="checkbox"/> Contractor		
	Address	City/State	Zip      Phone		
<b>PROPERTY OWNER</b>	Name: Address		City/State      Zip      Phone		
<b>ARCHITECT</b>	Name: Address		City/State      Zip      Phone		
<b>MECHANICAL ENGINEER</b>	Name: Address		City/State      Zip      Phone		
<b>PROJECT INFORMATION</b>	<input type="checkbox"/> Commercial <input type="checkbox"/> Residential	Project Description:  Use:			
<b>PROJECT VALUATION</b>	\$				
<p>I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions 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 of performance of construction.</p>					
<p>_____</p> <p>Print Name of Applicant</p>		<p>_____</p> <p>Print Name of Owner</p>			
<p>_____</p> <p>Signature of Contractor or Authorized Agent</p>		<p>_____</p> <p>Signature of Owner</p>			
<b>DO NOT WRITE BELOW THIS LINE</b>					
<b>Occupancy Classification(s)</b>	<b>Type of Const.</b>	<b>Floor Area</b>	<b>Height</b>		
<b>Occ. Load</b>	<b>PERMIT NO.</b>				
<b>Required Approvals</b>					
<b>ZONE</b> _____ <b>Setbacks: Front</b> _____ <b>Rear</b> _____ <b>Sides</b> _____  <b>Project Comments:</b>		N/A	Req'd	Date/By	
		Building			
		Structural			
		Mechanical			
		Plumbing			
		Electrical			
<b>Fees</b>		Fire Dept.			
Mechanical Permit	\$	Zoning			
Plan Review Fee	\$				
Total Fees	\$				