

**CITY OF GLENWOOD SPRINGS** 101 W. 8<sup>th</sup> Street, Glenwood Springs, CO 81601

Department of Community Development (970) 384-6411 • FAX (970) 945-8582

Project Number \_\_\_\_\_

Amount Paid \_\_\_\_\_

Date \_\_\_\_\_

Bldg. Permit # \_\_\_\_\_

**NON-RESIDENTIAL  
CHANGE OF LAND USE / BUSINESS OCCUPANCY APPLICATION  
\$94.00 BUILDING INSPECTION FEE**

APPLICANT NAME: \_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

BUSINESS ADDRESS: SUITE # \_\_\_\_\_

BUSINESS DAYTIME PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME OF PROPERTY OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

DESCRIPTION OF BUSINESS ACTIVITY: \_\_\_\_\_

ZONING: \_\_\_\_\_ ASSESSOR'S PARCEL NUMBER(S): \_\_\_\_\_

1. IS THIS ONLY A CHANGE IN BUSINESS OWNERSHIP, NOT A CHANGE IN BUSINESS OR BUSINESS NAME?

YES  / NO  Previous Land Use/Business Occupancy # \_\_\_\_\_

2. IS THIS ONLY A CHANGE IN BUSINESS NAME, NOT A CHANGE IN OWNERSHIP?

YES / NO  Previous Land Use/Business Occupancy # \_\_\_\_\_

3. WILL YOUR BUSINESS INVOLVE:

A NEW SIGN (Sign Permit will be required),

CHANGE OF LETTERING ON PRESENT SIGN STRUCTURE (Sign Permit may be required),

NO SIGN CHANGE

4. WILL CHEMICAL(S) BE UTILIZED OR STORED? YES  / NO  PLEASE LIST:

a) What room will they be utilized? \_\_\_\_\_

b) What room will they be stored? \_\_\_\_\_

5. HOW MANY PERSONS WILL BE EMPLOYED ON THE LARGEST SHIFT? \_\_\_\_\_

6. IS THIS A FIRST TIME USE OF THE BUILDING? YES  / NO

7. WILL THERE BE ANY IMPROVEMENTS OR MODIFICATIONS TO THE SITE OR BUILDING (I.E. NEW INTERIOR WALLS, OPENINGS, ELECTRICAL, PLUMBING, HEATING)?

YES  / NO  IF YOU ANSWERED "YES", BUILDING PERMITS SHALL BE REQUIRED.  
BUILDING DEPARTMENT BUSINESS HOURS: 8AM - 5PM MON - FRI

8. WILL THERE BE ANY USE OF UTILITIES OR COMMUNITY FACILITIES BEYOND WHAT WAS USED BY THE PREVIOUS BUSINESS OWNER FOR COMMERCIAL PURPOSES?

9. WHAT TYPE OF MECHANICAL DEVICES WILL BE USED IN YOUR OCCUPANCY?

10. WILL YOUR BUSINESS INVOLVE A SERVICE OR PRODUCING A PRODUCT? PLEASE EXPLAIN:

11. IF PRODUCING PRODUCTS FOR SALE, WHERE WILL THE PRODUCTS BE SOLD?

12. WHAT TYPE AND HOW MANY SUPPLIES OR MATERIALS WILL BE STORED? IN WHAT ROOM WILL THEY BE STORED?

\*\*\*\*\*PLEASE READ AND SIGN\*\*\*\*\*

THE PROJECT SITE MAY BE SUBJECT TO INSPECTION BY THE FIRE DEPARTMENT FOR VERIFICATION OF A REQUIRED FIRE EXTINGUISHERS. (Minimum (2) 2A-10BC required)

THE PROJECT SITE WILL ALSO BE SUBJECT TO AN INSPECTION BY THE BUILDING DEPARTMENT. PLEASE CONTACT THE BUILDING DEPARTMENT TO SCHEDULE A SITE INSPECTION AT (970) 384-6432.

I UNDERSTAND THAT, SUBJECT TO THE CITY OF GLENWOOD SPRINGS MUNICIPAL CODE TITLE 050 "BUSINESS LICENSE AND REGULATIONS," I AGREE TO PAY THE REQUIRED BUSINESS LICENSE FEES AS DETERMINED BY THE FINANCE DEPARTMENT.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
PROPERTY OWNER'S OR  
MANAGER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

WITHIN ONE-YEAR OF THE DATE OF APPROVAL, THE OPERATIONS OF THE BUSINESS SHALL COMMENCE OR THE PERMIT WILL BECOME VOID.  
EXPIRATION DATE \_\_\_\_\_

APPROVED BY CITY OF GLENWOOD SPRINGS  
COMMUNITY DEVELOPMENT DEPARTMENT

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Approved as complying with applicable City Standards and providing evidence of required permits.  
APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Building and Safety Division \_\_\_\_\_  
 Planning \_\_\_\_\_

cc: Finance Department