

## Application for Building Permits, Sewer Use and Drainage Permits (SUDP), and Health Plan Review for Food/Beverage, Marijuana Kitchens, and Dispensaries

Because all work at these locations must have a health review and inspections, all applications for building and SUDP permits must be logged in for review and cannot be reviewed at the permit counter. Plan reviewers may request additional information as necessary to complete the review.

### Where to submit this application:

- 1) Fill out the included forms and compile the items listed on the checklist on either page 2 or 3.
- 2) **Electronic Signatures.** Apply seals and a valid electronic signature to any document (plans, reports, surveys, letters) prepared by an architect, engineer, or surveyor. Commercial building plans must be prepared by licensed architects and engineers. Ensure all documents are unlocked for editing so they can be reviewed.
  - Unsigned, unstamped, or invalidated electronic signatures cannot be accepted.
  - Download a guide with screenshots on how to create a valid electronic signature at [www.denvergov.org/buildingcode](http://www.denvergov.org/buildingcode).
- 3) Save all files as PDFs and name them:  
DocumentName\_Address\_Date.pdf (e.g., SitePlan\_201WColfax\_11-1-2017.pdf).
- 4) Email all materials to [PlanReview@denvergov.org](mailto:PlanReview@denvergov.org).
  - For large files that cannot be sent as attachments, email a link to Dropbox, Google Drive, etc. where staff can download the files. The documents must be available to download without a password.

### After submission:

Once the project is assigned a Log number, use [www.denvergov.org/epermits](http://www.denvergov.org/epermits) to check review status and pay fees.

Email resubmittals during the review process to [PlanReview@denvergov.org](mailto:PlanReview@denvergov.org) using the same instructions as above.

#### Web Resource:

Visit the “Restaurants” webpage at [www.denvergov.org/DS](http://www.denvergov.org/DS) to learn more about what work needs reviews and building permits.

Or, click here:

[Common Projects Needing Permits](#)

### Forms included in this application packet:

- Page 2 Submittal checklists (New buildings/additions/change of occupancy and tenant finish/remodel)
- Page 4 Plan review contact list
- Page 5 Health plan review application
- Page 13 Statement of valuation
- Page 14 Asbestos inspection acknowledgment (existing buildings only)
- Page 15 Simultaneous zoning/building review request form
- Page 16 Affordable housing fee application

**Submittal Checklist for New Buildings, Additions & Change of Occupancy**

All documents must be original; copies will NOT be accepted.

Code References*	Items								
	<input type="checkbox"/> Zoning permit (if required) or SDP approval to log in (Project Master #: _____) <b>Or, for a simultaneous zoning and building code review...</b> (not for SDP, landmark, design, or administrative reviews) <input type="checkbox"/> Signed request form for a simultaneous review <input type="checkbox"/> Zoning application and plans, including site plans, floor plans with mezzanines, elevations (if exterior improvements are proposed), and roof plans, as applicable. Find zoning applications at <a href="http://www.denvergov.org/commercialzoning">www.denvergov.org/commercialzoning</a> .								
DRMC 27-153	<input type="checkbox"/> Affordable Housing Fee Application <input type="checkbox"/> Plan Review Contact List								
DBC Admin 133	<input type="checkbox"/> An official assigned address by Public Works (Include this address on all pages/documents submitted)								
DBC Admin 133.2	<input type="checkbox"/> Construction drawings bearing the seal and valid electronic signature of the architect or engineer of record. <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Architectural/structural drawings</td> <td><input type="checkbox"/> Energy code compliance sheets</td> </tr> <tr> <td><input type="checkbox"/> Mechanical/plumbing drawings</td> <td><input type="checkbox"/> Plot plan locating all buildings relative to each other and to property lines</td> </tr> <tr> <td><input type="checkbox"/> Electrical drawings</td> <td></td> </tr> </table>	<input type="checkbox"/> Architectural/structural drawings	<input type="checkbox"/> Energy code compliance sheets	<input type="checkbox"/> Mechanical/plumbing drawings	<input type="checkbox"/> Plot plan locating all buildings relative to each other and to property lines	<input type="checkbox"/> Electrical drawings			
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<input type="checkbox"/> Mechanical/plumbing drawings	<input type="checkbox"/> Plot plan locating all buildings relative to each other and to property lines								
<input type="checkbox"/> Electrical drawings									
DBC Admin 133.2	<input type="checkbox"/> A complete 2015 IBC and 2016 DBC Code Analysis on the architectural plan that lists the following: <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Scope of Work</td> <td><input type="checkbox"/> IECC Compliance Method</td> </tr> <tr> <td><input type="checkbox"/> Construction Type of Building</td> <td><input type="checkbox"/> For Mixed Occupancy: Occupant load for each use</td> </tr> <tr> <td><input type="checkbox"/> Occupancy Classification</td> <td><input type="checkbox"/> Fire Alarm &amp; Detection</td> </tr> <tr> <td><input type="checkbox"/> Height of Building &amp; Number of Stories</td> <td><input type="checkbox"/> Gross Area in Sq. Ft. for Each Occupant</td> </tr> </table>	<input type="checkbox"/> Scope of Work	<input type="checkbox"/> IECC Compliance Method	<input type="checkbox"/> Construction Type of Building	<input type="checkbox"/> For Mixed Occupancy: Occupant load for each use	<input type="checkbox"/> Occupancy Classification	<input type="checkbox"/> Fire Alarm & Detection	<input type="checkbox"/> Height of Building & Number of Stories	<input type="checkbox"/> Gross Area in Sq. Ft. for Each Occupant
<input type="checkbox"/> Scope of Work	<input type="checkbox"/> IECC Compliance Method								
<input type="checkbox"/> Construction Type of Building	<input type="checkbox"/> For Mixed Occupancy: Occupant load for each use								
<input type="checkbox"/> Occupancy Classification	<input type="checkbox"/> Fire Alarm & Detection								
<input type="checkbox"/> Height of Building & Number of Stories	<input type="checkbox"/> Gross Area in Sq. Ft. for Each Occupant								
	<input type="checkbox"/> <b>For SUDP:</b> A Utility Site Plan showing the size, type, and location of water, storm sewer, and sanitary sewer lines								
DBC Admin 133.4	<input type="checkbox"/> Survey, signed, dated, and with the seal of a registered land surveyor for New Buildings and Additions (Boundary survey including legal description and location of utilities.)								
DBC Admin 133.2	<input type="checkbox"/> Project Specifications/Project Manual with architect and engineer seals, signatures & date of anyone of who helped with the design parameters								
DBC Admin 133.2	<input type="checkbox"/> Structural Engineering Calculations, including a summary of design parameters with engineer's seal, signature, and date; a Table of Contents; and page numbers on calculations (required when structural sheets are submitted)								
DBC Admin 133.2	<input type="checkbox"/> Soils Report, signed, sealed, and dated (see building code policy Admin 130.2A for reports older than 2 years)								
DBC Admin 138	<input type="checkbox"/> Statement of Valuation Form								
	<input type="checkbox"/> Asbestos Inspection Acknowledgement form to comply with state law (not required for new buildings)								
DRMC 10-301	<input type="checkbox"/> Green Roof Declaration Form (only required for buildings over, or becoming over, 25,000 square feet in gross floor area). This is available to download at <a href="http://www.denvergov.org/greenroofs">www.denvergov.org/greenroofs</a> .								
<b>Additional items for restaurants, other food/ice</b>	<input type="checkbox"/> Food and Beverage Menu, including all garnishes and desserts (or product list for marijuana facilities) <input type="checkbox"/> Equipment Specifications for all food service equipment that identify the specific make/model to be used <input type="checkbox"/> Floor Plan identifying the location, purpose, and size of kitchen equipment, food prep areas, and service areas <input type="checkbox"/> Health Plan Review Application (starts on page 5)								

**Plans must be submitted separately by the applicant to the following, if applicable:**

- |   |              |
|---|--------------|
| <input type="checkbox"/> Shoring & excavation – A separate log in submittal of shoring and excavation plans is required and a separate permit will be issued. |              |
| <input type="checkbox"/> Landmark Commission  | 720-865-2709 |
| <input type="checkbox"/> Zoning permit (if not applying with a building submittal) or project coordinator (PC) approval to log in                             | 720-865-3000 |
| <input type="checkbox"/> ROW Encroachment Permit, if a building encroachment into the ROW is proposed   | 720-865-3003 |

\*DBC Admin is the Administrative Section of the 2016 Denver Building and Fire Code available at [www.denvergov.org/buildingcode](http://www.denvergov.org/buildingcode).

**Submittal Checklist for Tenant Finishes & Remodels**

All documents must be original; copies will NOT be accepted.

Code References*	Items
	<input type="checkbox"/> Zoning permit (if required) or SDP approval to log in <b>Or, for a simultaneous zoning and building code review...</b> (not for SDP, landmark, design, or administrative reviews) <ul style="list-style-type: none"> <li><input type="checkbox"/> Signed request form for a simultaneous review</li> <li><input type="checkbox"/> Zoning application and plans, including site plans, floor plans with mezzanines, elevations (if exterior improvements are proposed), and roof plans, as applicable. Find zoning applications at <a href="http://www.denvergov.org/commercialzoning">www.denvergov.org/commercialzoning</a>.</li> </ul>
DRMC 27-153	<input type="checkbox"/> Affordable Housing Fee Application <input type="checkbox"/> Plan Review Contact List
DBC Admin 133	<input type="checkbox"/> Building Address (must be provided on all pages of all plans and documents)
DBC Admin 133	<input type="checkbox"/> Construction drawings bearing the seal and valid electronic signature of the architect or engineer of record. <ul style="list-style-type: none"> <li><input type="checkbox"/> Architectural/structural drawings      <input type="checkbox"/> Electrical drawings</li> <li><input type="checkbox"/> Mechanical/plumbing drawings      <input type="checkbox"/> Plot plan locating all buildings relative to each other and to property lines</li> </ul>
DBC Admin 133.2	<input type="checkbox"/> A complete 2015 IBC and 2016 DBC Code Analysis on the architectural plan that lists the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> Scope of Work</li> <li><input type="checkbox"/> Construction Type of Building</li> <li><input type="checkbox"/> Number of Stories</li> <li><input type="checkbox"/> Gross Area in Sq. Ft. for Each Occupancy</li> <li><input type="checkbox"/> Allowable Area for Each Occupancy / Mixed Occupancy</li> <li><input type="checkbox"/> IECC Compliance Method</li> <li><input type="checkbox"/> Occupancy Classification</li> <li><input type="checkbox"/> Automatic Sprinkler Systems</li> <li><input type="checkbox"/> Occupant Load for Each Use</li> <li><input type="checkbox"/> Fire Alarm &amp; Detection</li> </ul>
	<input type="checkbox"/> <b>For SUDP:</b> A Utility Site Plan showing the size, type, and location of water, storm sewer, and sanitary sewer lines
DBC Admin 133.2	<input type="checkbox"/> Project Specifications/Project Manual including a cover, title page, and table of contents, and it must be signed, sealed, and dated.
DBC Admin 133	<input type="checkbox"/> Structural Calculations with a summary of design parameters for structural changes including live load changes. It must be signed, sealed, and dated with a table of contents and page numbers on calculations.
DBC Admin 138	<input type="checkbox"/> Statement of Valuation form <input type="checkbox"/> Asbestos Inspection Acknowledgement form to comply with state law
<b>Additional items for restaurants, other food/ice</b>	<input type="checkbox"/> Food and Beverage Menu, including all garnishes and desserts (or product list for marijuana facilities) <input type="checkbox"/> Equipment Specifications for all food service equipment that identify the specific make/model to be used <input type="checkbox"/> Floor Plan identifying the location, purpose, and size of kitchen equipment, food prep areas, and service areas <input type="checkbox"/> Health Plan Review Application (starts on page 5)

**Plans must also be submitted separately by the applicant to the following, if applicable:**

- Landmark Commission 720-865-2709
- Zoning permit (if not applying with a building submittal) or project coordinator (PC) approval to log in 720-865-3000

\*DBC Admin is the Administrative Section of the 2016 Denver Building and Fire Code available at [www.denvergov.org/buildingcode](http://www.denvergov.org/buildingcode).

**Date:**

**Project address and zip code:**

Establishment Information	
Name of establishment:	Phone:
Email:	Cell:

Owner Information	
Individuals or corporate name:	Phone:
Email:	Cell:
Mailing address:	

Plan review comments will be sent to the email addresses listed below, so please write legibly and accurately.

Contact Information	
Name of <b>primary contact</b> :	Phone:
Company name:	Cell:
Email:	
Mailing address:	
Name of <b>architect or engineer of record</b> :	Phone:
Company name:	Cell:
Email:	
Mailing address:	
Name of <b>contractor</b> :	License #:
Company name:	Phone:
Email:	Cell:
Mailing address:	

**Construction start date:**

**Date of planned opening:**

- By submitting this application, supporting documentation, and required plans, I certify that I am the property owner or authorized representative, that all statements on this submittal are true and accurate, and I agree to comply with all applicable laws and regulations of the City and County of Denver.

Please fill out this application in its entirety. If referring to “see plans” anywhere on this form, please specify the location on the plans where the related information can be found. A notation of “existing” will not be accepted and could delay plan review and/or approval.

**Type of Establishment (Check all that apply)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Animal Concept Facility | <input type="checkbox"/> Fast Food                      | <input type="checkbox"/> Marijuana-infused Product |
| <input type="checkbox"/> Bar                     | <input type="checkbox"/> Fish Market                    | <input type="checkbox"/> Market (Grocery)          |
| <input type="checkbox"/> Catering Operation      | <input type="checkbox"/> Full-service Restaurant        | <input type="checkbox"/> Meat Market               |
| <input type="checkbox"/> Coffee Shop             | <input type="checkbox"/> Manufacturer with Retail Sales | <input type="checkbox"/> School Food Program       |
| <input type="checkbox"/> Concession              | <input type="checkbox"/> Marijuana Dispensary/Retailer  | <input type="checkbox"/> Specialty Shop            |
| <input type="checkbox"/> Convenience Store       |   | <input type="checkbox"/> Other:                    |
| <input type="checkbox"/> Deli                    |   |  |

**Scope of Work (Check all that apply)**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Addition of seating                      | <input type="checkbox"/> Pretreatment device    | <input type="checkbox"/> Sump ejector        |
| <input type="checkbox"/> Addition of equipment                    | <input type="checkbox"/> Property in floodplain | <input type="checkbox"/> Upsizing water line |
| <input type="checkbox"/> Change of use -<br>From: _____ To: _____ | <input type="checkbox"/> Sewer re-route         |  |

If not addressed by the options above, use the space below to provide a detailed project description:

**Grease Interceptor (GI) Sizing**

Before installing or replacing a GI, refer to Public Works’ GI sizing worksheet available at [www.denvergov.org/SUDP](http://www.denvergov.org/SUDP).

<b>Cooking Equipment</b>	<b>Quantity</b>	<b>Drainage Fixtures</b>	<b>Quantity</b>
Stoves/griddles:	_____	3-comp or 2-comp sinks:	_____
Ovens:	_____	Pot sinks:	_____
Broilers:	_____	Mop sinks:	_____
Fryers:	_____	Other floor drains/sinks in the food prep area (not associated with a 3-comp/2-comp sink):	_____
Woks:	_____	Hand sinks:	_____
		Garbage disposals:	_____
		Dishwashers:	_____



**FOOD OPERATION INFORMATION**

Max. number of employees per shift: \_\_\_\_\_

Hours/days of operation	Restaurant seating capacity	Type of service (check all that apply)	Max. # of meals								
Sun.: ____ to ____ Mon.: ____ to ____ Tu.: ____ to ____ Wed.: ____ to ____ Th.: ____ to ____ Fri.: ____ to ____ Sat.: ____ to ____	# of indoor seats: _____ # of outdoor seats: _____  Total square feet of facility: _____	<input type="checkbox"/> On-site consumption <input type="checkbox"/> Off-site consumption <input type="checkbox"/> Catering <input type="checkbox"/> Single-use utensils <input type="checkbox"/> Multi-use utensils <input type="checkbox"/> Other: _____	<input type="checkbox"/> Breakfast _____ <input type="checkbox"/> Lunch _____ <input type="checkbox"/> Dinner _____  Total/day: _____ Max/hour: _____ % that are carry-out: _____								
<b>For seasonal operations, check all that apply:</b>											
<input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sept	<input type="checkbox"/> Oct	<input type="checkbox"/> Nov	<input type="checkbox"/> Dec
Add additional information (if necessary):  											

**FOOD HANDLING PROCEDURES**

	Yes	No
Will food be held cold? (e.g., refrigeration, ice baths, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Will food be held hot? (e.g., steam tables)	<input type="checkbox"/>	<input type="checkbox"/>
Will fresh produce (including garnishes) be required for the menu?	<input type="checkbox"/>	<input type="checkbox"/>
Will food be cooled after cooking?	<input type="checkbox"/>	<input type="checkbox"/>
Will food be reheated after cooling?	<input type="checkbox"/>	<input type="checkbox"/>
Will food that is frozen need to be thawed?	<input type="checkbox"/>	<input type="checkbox"/>
Will proteins or vegetable foods be fully cooked from a raw state?	<input type="checkbox"/>	<input type="checkbox"/>
Will foods be prepared that will be sold to other establishments?	<input type="checkbox"/>	<input type="checkbox"/>
Will catering be conducted?	<input type="checkbox"/>	<input type="checkbox"/>
Will self-service foods (buffets, salad bars, etc.) be provided?	<input type="checkbox"/>	<input type="checkbox"/>
Will food items be sold in bulk to the public?	<input type="checkbox"/>	<input type="checkbox"/>
Will another facility, such as a commissary, be used to prepare food that is served here?	<input type="checkbox"/>	<input type="checkbox"/>

If applicable, how will you rapidly cool cooked food? Check all that apply:

<input type="checkbox"/> Refrigeration	<input type="checkbox"/> Shallow pans	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Ice water bath	<input type="checkbox"/> Separating food into smaller portions	_____
<input type="checkbox"/> Adding ice as an ingredient		_____
<input type="checkbox"/> Rapid cooling equipment		_____

If applicable, how will you thaw frozen foods? Check all that apply:

- |  |   |                                       |
|--|---|---------------------------------------|
| <input type="checkbox"/> Refrigeration       | <input type="checkbox"/> In a microwave                 | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Under running water | <input type="checkbox"/> As part of the cooking process |                                       |

If applicable, indicate which specialized processes\* will take place in the facility. Check all that apply:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Curing                   | <input type="checkbox"/> Sprouting                    | <input type="checkbox"/> Reduce oxygen packaging<br>(includes vacuum packaging,<br>sous vide, cook chill) |
| <input type="checkbox"/> Acidification            | <input type="checkbox"/> Curing                       |   |
| <input type="checkbox"/> Live Molluscan shellfish | <input type="checkbox"/> Custom processing of animals |   |
| <input type="checkbox"/> Smoking                  |   |   |

\* For each specialized process, submit Standard Operating Procedures with this application.

### MARIJUANA HANDLING PROCEDURES

All marijuana facilities must submit with this application a detailed product list of all products that can be consumed orally, including extracted oils, candies, beverages, supplements, tinctures, etc.  Attached

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| Will marijuana-infused products (MIPs) be manufactured, stored, or sold?                       | <input type="checkbox"/> | <input type="checkbox"/> |
| Will extractions be conducted onsite to produce infused edibles?                               | <input type="checkbox"/> | <input type="checkbox"/> |
| Will extracted oil be sold wholesale to other marijuana facilities?                            | <input type="checkbox"/> | <input type="checkbox"/> |
| Is trim from the facility (grinding, bagging, etc.) intended for use in any edible production? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is commercial refrigeration** provided onsite?   | <input type="checkbox"/> | <input type="checkbox"/> |

Describe the tasks to occur in each extraction, processing, dishwashing, manufacturing, and packaging room:

\*\* Commercial refrigeration is required onsite for any edible product needing time/temperature safety controls to limit the growth or formation of pathogenic microorganisms or toxins ("potentially hazardous"). If refrigeration is not provided, please submit either shelf-stability documentation from the Department of Public Health and Environment or a letter from the owner verifying that no potentially hazardous edibles will be provided onsite.



Complete the finish schedule in the table below to indicate interior finishes for ALL areas within the establishment.  
 Notations of “existing” will not be accepted.

ROOM FINISH SCHEDULE								
Room Name or Number	Floors		Wall Finishes				Ceiling	
	Finish Material	Type of Base	North	East	South	West	Material	Finish
<i>Example row: Kitchen</i>	<i>Quarry Tile</i>	<i>Quarry Tile</i>	<i>FRP</i>	<i>FRP</i>	<i>FRP</i>	<i>Stainless</i>	<i>Vinyl Acoustical Tile</i>	<i>Smooth</i>



Complete the table below OR attach an equipment schedule. **Notations of "existing" are not accepted.**

EQUIPMENT INSTALLATION LIST					Installation Method <i>(check all that apply)</i>				
ID # on plan	Equipment	Make/model	New (N) or Used (U)	Plumbing required (Y/N)	Floor-mount			Counter/table- mount	
					Casters	Legs: 6"	Sealed in place	Port- able	Legs: 4"

**PLUMBING INFORMATION**

Indicate whether the following plumbing fixtures/equipment will be directly connected to the sewer or indirectly drained (e.g., floor sink or air gap). Notations of "existing" will not be accepted.

ID # on plans	# of Fixtures	Fixture or Equipment	Direct or Indirect Drainage

Are any of the following fixtures located onsite and equipped with hot water?

	Yes	No	# of Fixtures
Hose Bibbs	<input type="checkbox"/>	<input type="checkbox"/>	_____
Shower	<input type="checkbox"/>	<input type="checkbox"/>	_____
Clothes Washer	<input type="checkbox"/>	<input type="checkbox"/>	_____

Is a garbage disposal provided?  Yes  No

If yes, please indicate the location(s):

Complete the following table for each food preparation sink provided in the facility.

Food Prep Sinks				
ID # on plans	Length of drainboard	Dimensions of sink compartments (L x W x D in inches)		

**Warewashing Information**

Complete the following table for each *manual* warewashing sink. Warewashing sinks must be large enough to accommodate the largest equipment or utensils used.

Manual Warewashing Sinks						
ID # on plans	Length of soiled drainboard	Dimensions of sink compartment (L x W x D in inches)			Length of clean drainboard	Pre-rinse sprayer? (Y/N)

Soiled and clean drainboards for primary warewashing sinks must be at least 24". Drainboards for bar sinks must be at least 18". If these dimensions cannot be met, please detail what alternate equipment/methods will be used in place of traditional drainboards and include specification sheets with this application:

Complete the following table for each *mechanical* dish machine.

Mechanical Warewashing								
ID # on plans	Make	Model #	Heat/chemical sanitizing?	Drainboard length	Pre-rinse? (Y/N)	Utensil soak sink dimensions (L x W x D in inches)		

**Booster Heater**

If a booster heater is provided, complete the following table.

Make	Model #	kW/BTU rating	Distance from machine (in feet)

**Water Heaters**

How many water heaters service this facility? \_\_\_\_\_

For facilities with multiple water heaters, please list which heaters serve which plumbing fixtures:

Use the tables below to indicate the type of water heaters and heating systems in use.

Standard Tank Type Heater			
Make	Model #	kW/BTU rating	Recovery rate (GPH) @ 100°F rise

Heat Reclaim System		
Make	Model #	kW/BTU rating

Instantaneous/Tankless Systems				
Make	Model #	BTU rating	Flow rate (GPM) @ 80°F or 100°F rise	Storage tank capacity (gallons), if applicable

*Notes for Instantaneous Water Heaters*

If a dishwashing machine is to be installed on an instantaneous water heater system, a storage tank is required. The storage tank size must be at least 20% of the gallons per hour (GPH) demand of the dishwashing machine(s), with a minimum tank size of 20 gallons. The storage tank must be installed in the hot water supply line located between the heater(s) and the hot water distribution line. It must have a recirculation line and aquastat (water thermostat) to ensure that the water in the tank remains at the appropriate temperature (120° F - 140° F). The line must connect between the tank and the cold-water supply line to the heater(s).

High-temperature, heat-sanitizing dishwashing machines must have a separate booster heater. An instantaneous unit cannot be used as a booster heater.

Electric units will only be approved as a dedicated supply to hand sinks.

**Statement of Valuation (Building Permits)**

**Be Advised:** Valuation shall be based on the total replacement cost to the owner (including labor, profit, overhead, materials, equipment and installation). The provided valuation will be checked against current construction costs provided by the International Code Council, Engineering News Records or other means available to determine if the valuation is in line with current market costs.

\_\_\_\_\_  
Signed by \_\_\_\_\_ Date

Address of Work \_\_\_\_\_

Type of Work	Permit	Amount	Type of Work	Permit	Amount
Construction	COMMCON or RESCON		Oil Burner / A/C & Refrigeration	BoilerAC	
Retaining Wall	COMMCON		Steam / Water Htg / Cooling Tower	BoilerAC	
Demo / Prep Work	DEMO		Ventilating / Warm Air Heating	MECH	
Electrical	ELEC		Gas Piping (if done by H & V Contractor)	MECH	
Plumbing / Gas Piping (if done by plumbing contractor)	PLUMB		Shoring (if applicable)		
Green Roof (if applicable)	COMMCON		Green Roof Irrigation (if applicable)	PLUMB	

Subtotal \$ \_\_\_\_\_

Project Gross Square Footage \_\_\_\_\_

**SEPARATE LOG-INS:**

Fire Alarm (ELEC permit) \$ \_\_\_\_\_

Access Control (COMMCON permit) \$ \_\_\_\_\_

Fire Protection (FIRE permit) \$ \_\_\_\_\_

Grand Total \$ \_\_\_\_\_

**NO REFUND WILL BE GIVEN FOR ANY PLAN REVIEW FEE COLLECTED BASED ON THE AMOUNTS SHOWN ABOVE.**

**Asbestos Inspection Acknowledgement**

When renovating a property, the customer making a building permit application must disclose whether the property owner knows if the project has been inspected for asbestos-containing building materials. For more information about asbestos requirements and inspections, please contact the Colorado Department of Public Health and Environment at 303-692-3100 or [cdphe.asbestos@state.co.us](mailto:cdphe.asbestos@state.co.us), and review the Asbestos - Renovation and Demolition handout available at [www.colorado.gov/cdphe/asbestos](http://www.colorado.gov/cdphe/asbestos).

Please check all that apply.

I do not know if an asbestos inspection has been conducted on the building materials that will be disturbed by this project. Colorado Regulation No. 8, Part B, requires that prior to renovation a facility must be inspected by a Colorado certified Asbestos Building Inspector to determine if abatement is required. Failure to have the inspection may result in an asbestos spill which puts building occupants and workers at risk. It may also be a violation of Colorado’s asbestos regulation and may initiate an enforcement action pursuant to 25-7-508, C.R.S.

An asbestos inspection has been conducted on the building materials that will be disturbed by this project on or about:

\_\_\_\_\_  
DATE

An asbestos inspection has not been conducted on the building materials that will be disturbed by this project. Colorado Regulation No. 8, Part B, requires that prior to renovation a facility must be inspected by a Colorado certified Asbestos Building Inspector to determine if abatement is required. Failure to have the inspection may result in an asbestos spill which puts building occupants and workers at risk. It may also be a violation of Colorado’s asbestos regulation and may initiate an enforcement action pursuant to 25-7-508, C.R.S.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Property Address

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

**REQUEST FOR SIMULTANEOUS ZONING CODE AND BUILDING CODE REVIEW**

To the Building Official, Community Planning and Development, regarding a project located at

\_\_\_\_\_ with a log number of \_\_\_\_\_  
(Project address) (Log number to be provided by CPD staff)

I certify that to the best of my knowledge, information, and belief, the plans and any calculations or computations accompanying the application for the above log number, are in accordance with the requirements of the Zoning Code of the City of Denver, Denver Building and Fire Code and all other applicable laws and ordinances. I also acknowledge that the owner, developer, architect, engineer and any other responsible representative working on this project understands that any cost above and beyond the normal plan review process will be paid for by the development team. If the project is denied by either the Commercial Zoning review team or the Building Code review team and the project is not able to proceed, I acknowledge that all plan review fees, building permit fees, and zoning permit fees are still due and are the sole responsibility of the development team.

**Projects that are not eligible for simultaneous review**

If any of the below are found to apply to the project after the project is logged in for simultaneous review, a simultaneous review will not be conducted. The project will either go through a standalone review by the Commercial Zoning team or returned if the use is not permitted. Fees will not be refunded.

- The project proposes a use that is not permitted within the subject property's zone district.
- The project does not meet any applicable use limitations according to the subject property's zone district.
- The project is subject to adopted urban design standards and guidelines or is part of a design review district (unless the project is a tenant finish or change of use with no exterior improvements).
- The project is part of a Site Development Plan currently under review (these projects are only allowed to do a simultaneous review upon approval of the Project Coordinator).
- The project is either a designated Denver Landmark or is located with a Landmark/Historic District (unless the project is a tenant finish or change of use with no exterior improvements).
- The project proposes a use that is subject to special review (e.g., Zoning Permit subject to Informational Notice [ZPIN], Zoning Permit subject to Special Exception Review [ZPSE], a variance or administrative review) under either Former Chapter 59 or the Denver Zoning Code.

I acknowledge that I have the authority to submit the information in this application on behalf of the project located at (project address) \_\_\_\_\_, and that the information provided in and attached with this application is true and reliable. By submitting this affidavit, the registered design professional is taking responsibility for having verified that these conditions are in place and the applicable criteria has been met. If it is found that the criteria are not applicable, the building code review shall not progress until the zoning review has been completed.

\_\_\_\_\_  
Registered Design Professional in charge (print name)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
License/Registration Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

LOG #: \_\_\_\_\_

This application is **required for all projects being logged in for review (new construction and existing buildings)**. The purpose of this application is to document the information required for compliance with Denver’s Affordable Housing Linkage Fee, which must be paid at the time of building permit issuance.

I. CONTACT INFORMATION	
Name:	Phone Number:
Email:	
Project Address:	Project Record Number(s) and Type: <small>Indicate record number type (e.g., Project Master, Concept, Zoning)</small>

II. PROJECT TYPE
Which of the following best describes your project? (Select one.)
<input type="checkbox"/> New structure <input type="checkbox"/> Existing building with no new floor area* <input type="checkbox"/> Addition to existing structure <input type="checkbox"/> Shoring and excavation only*
<i>*If existing building with no new floor area or shoring/excavation only, no further information is needed. Skip to the end and sign/date.</i>
Will you be seeking phased building permits (such as foundation and superstructure)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is your project seeking foundation-only permits with a manufactured structure(s) that will be permitted by the State of Colorado? <i>If yes, housing fees must be paid with the foundation permit and information provided below for use and gross floor area.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No

III. USE AND GROSS FLOOR AREA
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**For new structures:** List the gross floor area (as calculated per Denver Zoning Code 13.3) for your project by use type.

- Do not include areas used for parking.
- If your project is mixed-use, provide the gross floor area for each use type.

**For additions to existing buildings:** List the gross floor area (as calculated per Denver Zoning Code 13.3) for your addition by use type.

- Only list the floor area that will be new; do not include the square footage of the existing structure.
- Do not include areas used for parking.
- If your project is mixed-use, provide the gross floor area for each use type.

Use Classification Type	Gross Floor Area (for <u>new</u> area only)
Multi-unit dwellings <sup>†</sup> designed and regulated under the International Building Code	
Single-unit, two-unit or multi-unit dwellings <sup>†</sup> designed and regulated under the International Residential Code, or any primary residential use other than multi-unit dwellings regulated under the International Building Code	
Commercial sales, services and repair	
Civic, public or institutional	
Industrial, manufacturing and wholesale	
Agricultural	

<sup>†</sup>Multi-unit dwellings receiving multiple permits (IRC townhomes) must provide gross floor area **per unit**. Use a separate sheet if necessary.



**IV. INCENTIVES FOR AFFORDABLE HOUSING IN CERTAIN ZONE DISTRICTS/OVERLAYS**

Is your project using incentives for affordable housing, such as building to a taller height or greater floor area in exchange for providing or funding affordable housing? (*Currently only available in the 38<sup>th</sup> & Blake Station Area Incentive Overlay District [IO-1]*)

Yes  No

If yes, please skip Section V. (below) of this application, and instead, please fill out and attach the “Incentives for Affordable Housing” supplement available at [www.denvergov.org/AffordableHousingFee](http://www.denvergov.org/AffordableHousingFee).

**V. AFFORDABLE HOUSING LINKAGE FEE EXCEPTIONS**

Does the affordable housing linkage fee apply to your project?  Yes  No\*

\*If you mark “no,” you must check at least one of the following exceptions and submit the requested documentation with this application.

Check here if the exception applies	Exceptions <i>Fill in blanks and note where additional information will need to be submitted.</i>
A	Submitted a concept site development plan prior to 12/30/2016 <b>Date submitted:</b> _____ <b>Concept #:</b> _____ <b>Project Master #:</b> _____
B	Project is part of a property subject to an affordable housing plan or other preexisting contractual commitment or covenant to construct affordable housing <b>Project name:</b> _____ <b>Plan recordation number:</b> _____ <b>Submit a copy</b> of the recorded affordable housing plan, contractual commitment or covenant
C	Project has an affordable housing obligation from zoning <b>Provide zoning ordinance number that contains this obligation:</b> _____
D	Project entails residential dwelling units being built by a charitable, religious or other non-profit entity that are deed-restricted to ensure affordability <b>Submit a copy</b> of the covenant, land use restriction agreement or instrument of affordability, and evidence of 501(c)(3) status.
E	This is an affordable housing project constructed with the support of federal, state or local financial resources. <b>Submit evidence</b> of the federal, state or local financial resources and a copy of one of the following: (a) covenant or land use restriction agreement, (b) instrument of affordability, (c) HUD contract or similar, or (d) evidence that the project is being developed by the Denver Housing Authority.
F	This is a non-residential project by a charitable, religious or other non-profit to be used primarily to provide housing, shelter, housing assistance or related services to low-income households or persons experiencing homelessness. <b>Submit evidence</b> of 501(c)(3) status, the organization’s mission statement, and a description of the project.
G	This is construction by or on behalf of the federal, state or local government, or any department or agency thereof, that will be used solely for a governmental or educational purpose. <b>Submit a description</b> of how the project will be used for a governmental or educational purpose and proof of property ownership via a deed or lease that documents ownership and/or use.
H	This is a reconstruction of a structure that was destroyed due to a natural or manmade involuntary disaster. <b>Submit</b> an insurance report, report from Denver Police, report from Denver Fire or similar.
I	This is an addition of 400 square feet or less to an existing single-family or duplex structure. <b>Plans submitted</b> for building and zoning review must clearly outline the addition with square footage information and dimensions to verify the addition meets this requirement as well as provide evidence that the existing structure is only a single-unit or two-unit dwelling.
J	This project is for an Accessory Dwelling Unit (ADU). <b>Plans submitted</b> for building/zoning review must clearly indicate the structure is an ADU, and <b>submit evidence</b> of the status of the primary structure to ensure what is being built is not an additional primary structure on the lot.

K	This project is meeting the “build alternative,” per the Affordable Housing Linkage Fee Ordinance 2016-0625. <b>Submit a copy</b> of the agreement/affordable housing plan from the Office of Economic Development (OED) to prove the build alternative is being met.
L	OED has granted a waiver or fee reduction for a non-residential project due to proof of lack of employment impact. <b>Submit the approved waiver</b> from OED indicating that the project is subject to either a reduced or waived fee. Be advised that, if the fee is reduced, the reduced fee will still be due at the time of building permit issuance.
M	This submittal is for modified drawings for a project under construction that does not increase square footage. <b>Original log number:</b>

**VI. CUSTOMER ACKNOWLEDGEMENT**

I acknowledge that I have the authority to submit the information in this application on behalf of the project located at (project address) \_\_\_\_\_, and that the information provided in and attached with this application is true and reliable. I am aware that, per the Affordable Housing Linkage Fee Ordinance 2016-0625, the affordable housing linkage fee amount applicable to my project will be assessed alongside standard permit fees and is due in full at the time my building permit(s) is issued. I acknowledge I will be unable to receive a building permit if the fee is not paid.

Print Name	Signature	Date

STAFF USE ONLY	
Use Classification and GFA verified by checking zoning use permit or SDP:	
Verified that the separate “Incentives” application is attached, if “yes” is checked in Section IV.	

Exception Review and Approval (if requested)
Exception request paperwork verified and input into Accela (name of staff and date):
<input type="checkbox"/> Exception Approved <input type="checkbox"/> Exception Denied
Reason: