



**Loveland Rural Fire District Application**  
**Community Safety Division**  
**Building or Fire Protection Permit Application**



Counter                       E-Mail                       Fax                       Mail

<b>Job Name &amp; Site Address:</b> _____		<b>Date:</b> _____
<b>Valuation (total cost of materials &amp; labor): \$</b> _____		<b>Sq. Ft.</b> _____
<b>Contractor/Applicant:</b> _____		<b>Phone:</b> _____
<b>Email:</b> _____		<b>Fax No:</b> _____
<b>CONTACT NAME:</b> _____		
<input type="checkbox"/> Tenant Finish or Improvement <input type="checkbox"/> New Building or Building Addition <input type="checkbox"/> Commercial Wet Fire Sprinkler System <input type="checkbox"/> Commercial Wet Chemical System <input type="checkbox"/> Commercial Dry Chemical System <input type="checkbox"/> Commercial Fire Alarm System <input type="checkbox"/> Residential Fire Sprinkler System (1 and 2 family) <input type="checkbox"/> Residential Fire Alarm System (1 or 2 family) <input type="checkbox"/> Sprinkler Backflow, Non-residential <input type="checkbox"/> Other _____		
<small>Do Not Write Below This Line</small>		
<b>Staff Notes:</b>  	<b>Permit Information</b>  <b>Permit Fee:</b> <b>Plan Check:</b> <b>Use Tax:</b> <b>Fire Insp:</b> _____  <b>TOTAL:</b>	
<b>Inspection Date:</b> _____ <b>AM</b> <b>PM</b>	<b>Permit #</b> _____	
<b>Inspection Comments:</b>  	<b>Recd. By:</b> _____	
	<b>Date:</b> _____	

**Additional Information** \_\_\_\_\_