

Town of Keystone Development Permit:

Admin Only Please Leave Blank



Permit Class _____

Date of Approval: _____

Fee Paid: _____

Receipt: _____

Please complete:

Property Type: _____

Project Address: _____

Lot/Block/Subdivision: _____

Applicant Name & Phone _____

Business Owner: _____

Owner Name: _____

This development permit will serve to advise you that your request for the above address was reviewed and approved by the Town of Keystone Planning Department on _____ . This Permit authorizes the development of this project with conditions. Upon Signature, this Building Permit shall be valid for a period of 6 months from the date of approval of the project, at which time if a Building Permit has not been issued, the permit shall become null and void.

Conditions of Approval:

1. The applicant acknowledges and agrees that the Town's issuance of a Development Permit for the project does not authorize construction of the development. The Development Permit authorizes the applicant to proceed to permitting with the Summit County Building Inspection Department ("Building Department") Lake Dillon Fire Rescue branch of the Summit Fire & EMS Fire Protection District ("Fire Authority"), who serve as the Town's Building Department and Fire Authority, respectively.
2. It is the applicant's sole responsibility to determine the applicable requirements of and obtain all required permits from the Building Department and the Fire Authority prior to commencing construction. Following permit issuance, it is the applicant's responsibility to ensure the project is constructed in accordance with plans approved by the Town, the Building Department, and the Fire Authority. Failure to do so may delay or result in the project being denied certificate of occupancy.
3. During and following construction of the development, it is the applicant's responsibility to coordinate all required inspections with the Building Department and the Fire Authority in

order to achieve certificate of occupancy. Further, the applicant shall comply with all official orders of the Town, the Building Department, and the Fire Authority to ensure the project's continued compliance with applicable requirements entity.

4. The applicant acknowledges that the Town's review and approval of the application and any plans, drawings, and other materials submitted by the applicant for the development is done in furtherance of the general public's health, safety, and welfare and that no immunity is waived and no specific relationship with, or duty for care to, the applicant or third parties is assumed by such review and approvals.
5. Any revised drawings shall be provided to the Town.
6. Upon issuance, a copy of the **Certificate of Occupancy** issued by the Summit County Building Inspection Department shall be provided to the Town.
7. The staging of equipment and materials in the Town right of way is prohibited.

Please sign this development permit acknowledging your acceptance of the conditions of approval and return a signed original copy to the Town of Keystone prior to the issuance of a building permit.

I agree to the terms and conditions of the Town of Keystone Planning Department's approval, and agree to meet them, as well as all applicable development regulations of the Town that may apply to the project.

Applicant

Date

Town of Keystone Action

The permit indicates approval by the Town of Keystone Planning Department of the project listed upon signature.

Town of Keystone

Date

Lindsay Hirsh

Community Development Director

970-450-3500