

\$25 Fee

City of Arapahoe

Phone#

ZONING PERMIT APPLICATION and Improvement Information Statement

OWNER OF PROPERTY

Name and mailing address

PERSON MAKING STATEMENT

Name and Address

CONTRACTOR FOR PROJECT

Name and Address

LEGALS OF PROPERTY TO BE IMPROVED OR ALTERED

DESCRIPTION AND INTENDED USE

LOCATION ADDRESS

PROJECT COST

ESTIMATED TIME OF COMPLETION

SIGNATURE OF PERSON MAKING STATEMENT

BUILDING PERMIT APPROVED THIS _____ DAY OF _____, 2025

BUILDING PERMIT DISAPPROVED THIS _____ DAY OF _____, 2025

CITY CLERK

CITY OF ARAPAHOE

SERVICES REQUIRED

WATER -

SEWER -

ELECTRIC-

GAS -

TELEPHONE -

UPON APPROVAL, COPIES WILL BE DISTRIBUTED AS FOLLOWS:

1. RETAINED BY CITY
2. APPLICANT
3. COUNTY ASSESSOR

PLEASE CONTACT THE CITY OFFICE IF THIS PERMIT HAS BEEN DENIED AND YOU WISH TO HAVE A MEETING WITH THE BOARD OF ADJUSTMENTS