



City of Torrington
 Engineering & Planning
 PO Box 250
 Torrington, WY 82240

City Engineer (307) 532-4815
 Building Official (307) 532-4213
 FAX (307) 532-2010
www.torringtonwy.gov

Building Permit

<input type="checkbox"/> New Construction		<input type="checkbox"/> Addition/Alteration/replacement	
Category of Construction			
<input type="checkbox"/> 1 -2 Family Dwelling		<input type="checkbox"/> Commercial/Industrial	
<input type="checkbox"/> Accessory Building >200sf		<input type="checkbox"/> Multi-Family	
<input type="checkbox"/> Garage		<input type="checkbox"/> Detached	
<input type="checkbox"/> Attached		<input type="checkbox"/> Patio Cover/Carport	
Job Site Location and Information			
Project Name:		Project Address:	
City:		State:	Zip:
Suite/Bldg./Apt. #:	Subdivision:		Lot #
	Blk #		
<input type="checkbox"/> Property Owner <input type="checkbox"/> Tenant			
Name:			
Address:			
City:		State:	Zip:
Phone: () - -			
Email:			
Owner Signature:			Date:
Fees		Total Fees:	
Building Permit Fee:		Electric Service:	Amp: Phase:
System Development:		Storm Drain Fee: (\$.10 per sq ft. onetime fee)	
Rmt. Water Meter:	Size:	Plan review Fee: (67% of Building Permit Fee)	
Sewer Tap:	Size:	Other:	
Water Tap:	Size:		
Contractor:			
Business Name:			
Contact Name:			
Address:			
City:		State:	Zip:
Phone: () - -			
Email:			Cell Phone: () - -
City Of Torrington Contractors License #		Date Issued:	
This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if work is or construction is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and all information give is true and correct. All provisions of laws and ordinances governing this type of work shall be complied with whether specified herein or not, the granting of this permit does not presume or give authority to violate or cancel the provisions of any state law or local laws regulating construction or the performance of construction.			
Authorized Signature:			
Print Name:			Date:
Total Project Value:		Total Permit Cost:	
Permit Number:			