



1199 Bayfield Parkway • PO Box 80 • Bayfield, CO 81122 • 970.884.9544
Community Development Department
www.bayfieldgov.org/building

TINY HOME SUPPLEMENTAL FORM

Name of Unit Owner

In order to determine if your Tiny Home meets life safety requirements for you to live in it in the Town of Bayfield limits, you need to meet one of the two options below and provide the following information to the Town for that option:

Option 1. – Tiny Home constructed on a permanent chassis, placed on a permanent or temporary foundation and connected to utilities similar to a modular or mobile home must provide the following information to the Town:

- State of Colorado Department of Local Affairs (DOLA) Division of Housing (DOH) Plan Reviews, Inspections and Metal Plate Insignia on the Unit
- State of Colorado Electrical Inspection Report
- Town of Bayfield Foundation Inspection
- Town Issues Certificate of Occupation (CO) after all the State Approvals and Inspections are Complete

OR

Option 2. – Tiny Home Recreational Vehicle constructed on a trailer, not required to be on a permanent foundation and connected to utilities similar to an RV must provide the following information to the Town:

- Third Party Inspection Report Including Electrical Inspection
- Manufacturer Specifications for Roof Snow Load – Town of Bayfield Requires a Roof Snow Load of 51 Pounds per Square Foot
- Trailer Registration with La Plata County Clerk/Recorders Office
- Exterior Water & Sewer Connection Inspections by Town of Bayfield
- Town Issues Certificate of Occupation (CO) after all Inspections are Complete

TINY HOME INFORMATION

Year Constructed _____ Trailer VIN _____

Registered with La Plata County (Y/N) _____ License Plate _____

CURRENT LOCATION OF TINY HOME

City _____ State _____

PROPOSED LOCATION OF TINY HOME

Address _____



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BUILDING PERMIT APPLICATION

Property Owner(s)	Mailing Address
Phone	Email
Contractor (if other than owner)	Mailing Address
Phone	Email
Contractor Bayfield Business License #	
Architect (Commercial/Multi-Family Projects)	Mailing Address
Phone	Email

CURRENT INFORMATION	
Project Address _____	Zoning _____
Subdivision _____	Parcel Number _____
Parcel Size (sq. ft.) _____	Current Building Size (sq. ft.) _____ Current # Floors _____
PROPOSED INFORMATION	
Proposed Total Building Size (sq. ft.) _____	# Units (multi-family) _____ 1 st Floor sq. ft. _____
2 nd Floor sq. ft. _____	Basement sq. ft. _____ Garage/Carport sq. ft. _____ Water Tap Size _____
Total Cost of Improvements \$ _____	Construction Type _____

USE TYPE (*See Supplemental Forms Needed for Specific Permits)

- | | | |
|---|---|---|
| <input type="checkbox"/> Single-Family Residential* | <input type="checkbox"/> Multi-Family (3+ Units)* | <input type="checkbox"/> Commercial* |
| <input type="checkbox"/> Duplex Residential* | <input type="checkbox"/> Mobile Home* | <input type="checkbox"/> Hotel/Lodging* |
| <input type="checkbox"/> Accessory Dwelling Unit* | <input type="checkbox"/> Tiny Home* | |

PERMIT TYPE (*See Supplemental Forms Needed for Specific Permits)

- | | | |
|--|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Detached Outbuilding/Garage | <input type="checkbox"/> Solar* |
| <input type="checkbox"/> Remodel | <input type="checkbox"/> Window Replacement | <input type="checkbox"/> Demolition (Need State Permit)* |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Plumbing/Mechanical | <input type="checkbox"/> Foundation |
| <input type="checkbox"/> Attached Outbuilding/Garage | <input type="checkbox"/> Roof Repair/Replacement | <input type="checkbox"/> Other-Please describe below |

Summary of Proposed Work _____

The plan review process takes up to 21 days if no corrections to the plans are required. The applicant will be notified when the building permit is ready.

ACKNOWLEDGEMENT AND AUTHORIZATION:

If other than Owner, permission is hereby granted to _____, as Owner's Legal Representative for the property noted above, to construct the structure as detailed on plans and specifications submitted to and reviewed by the Town of Bayfield. In consideration of the issuance of this permit, the undersigned hereby agrees to comply with all building codes and land use regulations adopted by the Town of Bayfield. The undersigned further agrees that if the above said regulations are not fully complied with in the location, erection, construction and use of the above referenced structure, the permit may then be revoked by notice from the Town of Bayfield thereby rendering it null and void. The Town does not engineer for drainage, this is the individual property owner's responsibility. Property must be in compliance with the Town Land Use Code and with other appropriate codes for drainage. The issuance of a permit based upon plans, specifications and other data shall not prevent the building inspector from thereafter requiring the correction of errors in said plans, specifications and other data or from preventing building operations from being carried on thereunder when in violation of this Code or any other ordinance or regulations of this jurisdiction. The review of the submitted plans and specifications and the inspections conducted thereafter do not constitute an acceptance of any responsibilities or liabilities by the Town of Bayfield for errors, omissions or discrepancies. The responsibility for these items and implementation during construction rests specifically with the architect, designer, builder and owner and comments are intended to be constructive and in support of the owners interest.

I hereby certify that I have read and examined this application and know the same to be true and correct, that all provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, and that the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction and that I make this statement under penalty of perjury.

Owner Signature: _____ Date: _____

Applicant Signature (if other than Owner): _____ Date: _____