



Applications are accepted at 201 W. Colfax, 2nd floor permit counter from 8am – noon (M-F) or save a trip and submit online.

A complete list of permit types, applications, and instructions can be found at www.denvergov.org/commercialzoning.

Complete applications can be emailed to zoning.review@denvergov.org.

If you have any questions, please leave a detailed message at (720) 865-3000.

Incomplete applications, including missing required plans, may be returned without processing.

Zoning approval does not necessarily mean city approval of your project.

SUBJECT PROPERTY/ZONE LOT			
Property Address:		Zone District (denvergov.org/zoning):	
Legal Description (www.denvergov.org/property):			
Property Owner as defined by DZC 13.3 or FC 59-2 (189)	Owner Name (Last, First):		Phone:
	Address:		Email:
	City:	State:	Zip:
GENERAL ZONING PERMIT TYPE (CHECK ALL THAT APPLY/SEE PROJECT GUIDES FOR DETAILS)			
Zoning Use Permits <input type="checkbox"/> UP-01 New Use/Change of Use (including expanding an existing use) <input type="checkbox"/> UP-02 Marijuana Businesses	Zoning Temporary Use Permits <input type="checkbox"/> TP-01 Special Event Parking <input type="checkbox"/> TP-02 Temporary Uses	Zoning Construction Permits <input type="checkbox"/> CP-01 New Commercial Structures / Commercial Structure Expansions or Additions / Detached Accessory Structures / Exterior Modifications / Site Improvements (e.g., new or expanded surface parking lot, new outdoor lighting, new parking lot landscaping) <input type="checkbox"/> Floor Plan Modifications (no exterior work, for business license renewal)	
CHANGE OF OWNER OR BUSINESS NAME			
Do you have a current use permit on file? (If so, the business name on file must match the current business name.)	<input type="checkbox"/> Yes Permit Number: _____ Business Name on File: _____ <input type="checkbox"/> No (Please fill out the business name information below to apply for a new use permit.)		
A separate use permit application is not required for change of owner or for change of business name only.	<input type="checkbox"/> New Business Name: _____ <input type="checkbox"/> Current Use(s): _____ <input type="checkbox"/> Number of Bicycle and Vehicle Parking Spaces Provided: _____ <input type="checkbox"/> Gross Floor Area of Current Use: _____		
APPLICANT (BUSINESS OWNER)/AGENT CONTACT INFORMATION (IF NOT PROPERTY OWNER)			
Applicant as described in DZC 12.3.3.1 or FC 59-2 (189)	Business Name:		
	Name (Last, First):		Phone:
	Address:		Email:
	City:	State:	Zip:
Agent (if different from applicant)	Business Name:		
	Name (Last, First):		Phone:
	Address:		Email:
	City:	State:	Zip:



PROPOSAL (MAY ALSO BE PROVIDED ON SITE PLAN OR SUBMIT A SEPARATE SHEET)

Provide a detailed description of the full scope, including use(s), and gross floor areas of your project in a narrative below or attached.
Will a ZPIN or ZPSE be required, refer to the *Use and Required Minimum Parking* table found in articles 3-9? (typically related to care facilities, industrial uses, unlisted home occupations, and outdoor eating/serving areas)

Uses to Remain (include gross floor area and indicate if they are enclosed or unenclosed):

Business Name:

Zone Lot Size:	# Existing Structures:	# Structures To Remain:	# Proposed Structures:
Proposed Building Height (Stories):	Proposed Building Height (Feet):		
Transparency Provided (Primary Street):	Transparency Provided (Side Street):		
Standard Parking Spaces Required:	Standard Parking Spaces Provided:		
Compact Parking Spaces Required:	Compact Parking Spaces Provided:		
Accessible Parking Spaces Required:	Accessible Parking Spaces Provided:		
Total Parking Spaces Required:	Total Parking Spaces Provided:		
Bicycle Parking Spaces Required:	Bicycle Parking Spaces Provided:		

SIGNATURES REQUIRED

This project or the applicant accepts full responsibility for compliance with all Denver zoning codes and all other city regulations as applicable. A zoning permit for use or construction will automatically expire 180 days from issue date unless a building permit is issued or the permitted use is legally established. Zoning inspections may be required before occupancy is permitted.

By my signature, I attest to the best of my knowledge and belief that the information stated in this application and in all supporting plans and documents is true and consistent with the standards and limitations of the City and County of Denver.

Signature (Owner or Authorized Agent): _____

Full Name (Print): _____ Date: _____

Visit www.denvergov.org/ds for permit counter hours and information on special zoning processes.

The applicant is responsible for submitting accurate plans that document compliance with all zoning code regulations. Plans must meet the minimum requirements as outlined in the individual guides. The zoning reviewer may request additional information when it is necessary to evaluate an application for compliance with code regulations. It is recommended that plan submittals be completed by a qualified design professional. Visit www.denvergov.org/commercialzoning to view illustrations of sample plans.