

**Northwest Colorado Council of Governments
CONVEYANCE PERMIT APPLICATION**

Permit # _____	Jurisdiction _____	Building Official _____
Total Fee _____	Date Paid _____	Receipt # _____
Permit Approved by _____	Date Issued _____	
This box to be completed by NWCCOG		Permit Expiration Date _____

**** Permits expire in one year for new installations and six months for alterations ****

A separate Permit Application is required for each conveyance.

Job Address _____
Job Name _____
Job Mailing Address _____
Job Phone # _____ Email _____

Elevator Company _____	State License Number _____
Mailing Address _____	
Phone # _____	Email _____

NEW INSTALLATION (ALL items in this box required)

___ Conveyance Unit/Serial #: _____ (N/A for residential)
___ State of Colorado Registration ID# CP ___ - ___ - ___ - ___ (N/A for residential)
___ Jurisdiction Building Permit # _____
___ Is this for Passenger or Freight? _____
___ Is this for Commercial or Residential? _____
___ Circle one: Hydraulic - Roped Hydraulic – Traction/Electric – Lift – Other _____
___ Plans/Drawings submitted with this Permit Application Elevator Status Panel Yes No

ALTERATION – Detailed Scope of Work must be submitted with this Permit Application

Unit # _____ State of Colorado Registration ID# CP ___ - ___ - ___ - ___

The conveyance cannot be returned to service until inspected & approved by NWCCOG. No TCO's issued for major alterations.

NOTICE

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. 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 or the performance of construction.

Licensed Contractor Signature Date

NEW INSTALLATION FEES

Passenger or freight elevator, Lift, LULA, escalator, moving walk: Up to and including \$50,000 of valuation = \$750
Valuation \$50,000-\$199,999=\$750 plus \$20 for each \$1,000 or fraction thereof over \$50,000
Valuation \$200,000 & up=\$3,500 plus \$10 for each \$1,000 or fraction thereof over \$200,000
Private residence elevator:
Flat Fee = \$750.00

ALTERATION OR MODIFICATION FEES

Up to & including \$25,000 of valuation = \$750
Total valuation \$25,001 & up = \$750 plus \$20 for each \$1,000 or fraction thereof over \$25,001.

PAYMENT

Check: Make payable to NWCCOG.
Credit Card or Electronic Check - pay online at www.nwccog.org/programs/elevator-inspection-program

Revised 12/14/2022

VALUATION per contract with owner _____

TOTAL FEE _____

Conveyance plan review and field inspections will be conducted by NWCCOG Elevator Inspection Program. **Schedule acceptance inspections by emailing NWCCOG at Elevator@NWCCOG.org.** An approved Permit does not constitute approval on final inspection.