

Planning Division 135 N. Animas Street Trinidad, CO 81082 Phone 719-846-9843 ext. 146 Fax 719-846-4140 sky.tallman@trinidad.co.gov

Mural Permit Application

REQUIRED DOCUMENTATION

A rendering, sketch or copy of the mural depicting the location of the mural on the building, including the size and total surface area, elevation and placement information must be submitted with the application. Description of materials and colors used as well as the means of application must be included.

Date:	PERMIT#:				Permit Fee: \$350.00	
PROPERTY OWNER/	LANDLORD:					
Address:						
City:		State:			_ Zip:	
Phone #:	one #:Email Address:					
RESPONSIBLE PART	Y FOR COMMISSIONIN	IG MURALIS	ST AND FOR	R MAINTEI	NANCE:	
Phone #:	Email Address:					
MURALIST:						
Phone #:	one #:Email Address:					
Is Muralist reserving a	ny rights with respect to	maintenanc	e or preserv	ation of mu	ıral: Yes	No
ADDRESS/LOCATION	N OF PROPOSED MUR.	AL:				
Rear of building	Side of building	North	South	East	West	
Measurement of buildi	ing façade (mural may not	exceed 50% o	of façade or 20	o sf, which	ever is less): _	
Property Zoning:						
SIGNATURE OF APPLICANT:		Date:				
	CHECKLIST	OF REQUIR	ED SUBMIT	TALS		
☐ Rendering, ske	tch or copy of the mural					
_	ketch of the location of t		the building	, including	size and total	surface area
☐ Elevation and p	placement information		_			
☐ Means of application, ie. painted, glued, or otherwise affixed to the building						
□ Description of materials						
□ Description of	□ Description of colors					

OFFICIAL USE ONLY							
Legal Description Parcel#Zoning (circle one) CC HP LDR MDR HDR I RE NS PUD							
DEPARTMENT	APPROVAL SIGNATURE DATE		COMMENTS				
Planning Dept.							
Building Inspector							
Planning Commission							
Arts & Culture Board							
HP Commission							
City Council							