

Environmental Health Services Division 645 Parfet Street, Lakewood, CO 80215  
(303) 232-6301 FAX (303) 271-5760 [jeffco.us/public-health](http://jeffco.us/public-health)

**APPLICATION TO RENEW A USE PERMIT  
Instructions and Application Forms**

**USE THIS APPLICATION PACKET TO RENEW A PREVIOUSLY ISSUED USE PERMIT  
PRIOR TO ITS EXPIRATION DATE.**

Use Permits are valid for six months after the date of issuance and if the sale for the property has not closed within that time period, the Use Permit must be renewed. Use Permits may be renewed ONE TIME under the following conditions:

- The property is still owned by the same owner as shown on the original permit (there may be a new applicant, however), and
- The property has been vacant since the original permit was issued, or
- The original inspector states that there have been no changes in site conditions from the time of their original permit.

**TO RENEW A USE PERMIT:**

- **COMPLETE** page 1 of this form
- **SUBMIT** to the Department for processing **PRIOR** to the date the permit expires.

**FEE:** Attached a check or Money Order payable to “Jefferson County Treasurer.” Cash and credit cards can be accepted in person only.

A Use Permit may be renewed only one time. If the renewed permit expires you must re-apply using FORM 700, including all the required inspections.

Allow approximately five (5) working days to renew the permit.

**DEPARTMENT CONTACTS:** Linda Jones [jonelj@jeffco.us](mailto:jonelj@jeffco.us)  
303 271-5756

**APPLICATION TO RENEW A USE PERMIT – FEE: \$25.00 (CASH) or \$25.44 (Credit Card)**

**CLOSING OR RESOLUTION DATE :** \_\_\_\_\_

Agent and contact phone number: \_\_\_\_\_

**PROPERTY ADDRESS:** \_\_\_\_\_

**ORIGINAL USE PERMIT NUMBER:** \_\_\_\_\_

**Applicant:** NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY STATE ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ email \_\_\_\_\_

**RENEWAL CRITERIA (check only one)**

**PROPERTY VACANT**

The property has been vacant since the date of the original Use Permit and, to the best of my knowledge there have been no physical or operational changes in the status of the existing individual sewage disposal system since the original permit was approved.

\_\_\_\_\_  
**OWNER** **DATE**

**RE-INSPECTION – no change in conditions**

A re-inspection of the property showed no changes from my original inspection.

\_\_\_\_\_  
**USE PERMIT INSPECTOR NAME** **DATE**

**WHEN ISSUED, THE PERMIT WILL BE SENT TO THE EMAIL LISTED ABOVE. TO MAKE ALTERNATE ARRANGEMENTS CONTACT LINDA JONES @ 303 271-5756 or [jonelj@jeffco.us](mailto:jonelj@jeffco.us) .**