



200 South Spruce, Grand Junction, CO 81501 Office: 970.244.1631

Date: _____

Email: mccomdev@mesacounty.us Website: www.mesacounty.us/building

Time: _____

Subject Property Information:

Project Address: _____ City: _____ State: _____ Zip Code: _____

Project Parcel No. _____ Acreage: _____

Project Name: _____

Current Parcel Hazard CWRC Map Classification: Low Moderate High

Request: Ground Truthing (Map Hazard Reclassification)

Third Party Site Assessment Report Review (Ground Truthing or Site Assessment)

Fire Department Clearance for Building Permit

Applicant Name (Owner/Representative): _____

Representative Company (if applicable): _____

Contact Number: _____ Contact Email: _____

Property Owner Information:

Owner Name: _____

Owner Address: _____

Owner Email: _____ Owner Telephone: _____

Basis for Request: (Note: If request is for Map Ground Truthing, provide a detailed explanation of why the existing hazard classification is believed to be inaccurate. Include reference to fuels, topography, vegetation modification, access, water supply and other site-specific conditions).

Supporting Documentation Submittal Checklist: (Note: May be submitted in one report where applicable)

* Site Plan (to scale)

* Vegetation /Fuels Assessment

* Photographs of Site Conditions

* Third Party Wildfire Mitigation Site Assessment Report

* Completed Owner Acknowledgement and Declaration

* Topographic Information

* Description of Previous Mitigation Efforts (If applicable)

* Description of Proposed Mitigation Efforts

* Third Party Wildfire Mitigation Reviewer Credentials

Important Note - All submitted documents above must contain direct information specific to applicable code sections found in the Colorado Wildfire Resiliency Code (Class 1 and 2 structure hardening and site/area requirements) based on project location within the CWRC Map (High, Moderate, and Low Intensity Classifications). Incomplete applications and supplemental documents may delay the review process.

Colorado Wildfire Resiliency Code - Owner Acknowledgements and Declarations:

Property Access Authorization

I authorize the applicable representatives from Authorities Having Jurisdiction (county, municipality, or fire district) who have jurisdiction to enter the property for purposes of ground truthing, site assessment, and/or permit/plan reviews.

Initials: _____

Fee Acknowledgment

I acknowledge that all applicable fees associated with this Site Assessment Review must be paid in full prior to scheduling and/or completion of the review process. I understand that failure to pay required fees may result in denial or delay of this application.

Initials: _____

Defensible Space Responsibility Acknowledgment

I acknowledge and understand that:

- Any determination made through this ground truthing process does not eliminate the requirement to comply with the Colorado Wildfire Resiliency Code now or in the future.
- The property owner is solely responsible for the installation, implementation, and ongoing maintenance of defensible space and vegetation management as approved by the code official.
- Failure to maintain required defensible space may result in enforcement action by the Authority Having Jurisdiction.

Initials: _____

Certification & Self Attestation of Compliance

I hereby certify that:

- All information provided in this application and associated documents are true and correct to the best of my knowledge.
- I have read and understand the requirements of the Colorado Wildfire Resiliency Code as adopted locally.
- I agree to comply with all applicable codes, standards, and conditions of approval issued by the Authority Having Jurisdiction.
- I understand that this application constitutes a formal request for review and does not guarantee a change in hazard classification.
- Additional information and materials may be required as a part of the review process
- My signature below, in addition to the initials above, grants authorization to access the property, acknowledges required fees, and agreement to the defensible space requirements.

Applicant Signature

Owner Name (Printed): _____

Owner Signature: _____

Date: _____

Office Use:

Plan Review By: _____ Date Approved: _____ Review Fee: _____

Agency: _____ Disposition: _____