



BUILDING PERMIT APPLICATION

3200 Diana Dr., • 817-616-3770

Type of Permit: Building Electrical Plumbing Mechanical

Job Address:		Date:
Lot:	Block:	Phase or Section Number:
Owner:	Address:	Phone #:
Contractor:	E-mail Address:	Phone #:
<input checked="" type="checkbox"/> <i>Type of Work:</i> <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition Description of Work to be Done (Number and type of fixtures, equipment, etc.):		
Area of Building in Square Feet First Floor _____ Garage _____ Second Floor _____ Other _____		
* <i>Value of Work to be Performed</i> _____		
GRAY AREA FOR OFFICE USE ONLY		
Signature of Contractor or Authorized Agent _____ Print Name _____		Permit Fee: _____
This permit becomes null and void if work or construction authorized is not commenced within 180 days, or construction on work is suspended or abandoned for a period of 180 days at any time after work is commenced.		Receipt Number: _____
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 federal, state or local law regulating construction or the performance of construction.		Zoning District: _____
		Occupancy Classification: _____
		Received By: _____
		Date: _____
		Comments: _____
NO WORK TO BE PERFORMED UNTIL PERMIT HAS BEEN APPROVED.		

Call when ready for inspection 817 616 3770