

Building Permit Application

Construction, Maintenance & Repair

BP# _____

City of Flatonia

125 E. South Main Street - PO Box 329 - Flatonia, TX 78941

Phone (361) 865-3548 - Fax (361) 865-2817

Please complete form by printing legibly.

Date: _____

Applicant's Name: _____ Phone: _____

I am the: Property Owner Contractor Agent

Project Address: _____

Property Owner: _____ Phone: _____

Project is RESIDENTIAL Is this the property owner's HOMESTEAD? Yes No

If yes, will you be acting as your own Contractor? Yes No

Project is COMMERCIAL/PUBLIC TDLR EAB Project Registration# _____

Tell us about your project:

Demolition

Minor repairs/upgrades: Electrical Plumbing Mechanical
 Re-roof (without structural alterations), new roof material is: _____
 Irrigation

Construction type: New Construction Remodel Addition Fence
 Carport- with electricity with water without electricity OR water
 Deck- with electricity with water without electricity OR water
 Accessory Building- with electricity with water without electricity OR water

A project plan must be submitted for all construction projects.

Dimensions: _____

Total Sq Ft: _____

Valuation of project: \$ _____

Description of work to be done: _____

Date to start work on project: _____ Estimated date of work completion: _____

Complete this section for new construction, remodels and additions:

Square Feet: Living _____ Garage _____ Covered Porch _____ Total: _____

Number of: Stories _____ Bedrooms _____ Bathrooms _____

This project involves: Electrical Plumbing Mechanical Irrigation Demolition

For remodels and additions, will the current use of this building change? Yes No

If yes, current use is: _____

change of use to: _____

ALL contractors used for this project must be listed on this application. If you change contractors for any reason at any time on this project you must notify the Building Department of the replacement for that trade. The Building Department will verify that your contractors are registered with the City of Flatonia. Registration must be completed before permits can be issued.

LIST ALL CONTRACTORS:

Engineer: _____ Contact Person: _____
Phone: _____ Email: _____

Architect: _____ Contact Person: _____
Phone: _____ Email: _____

General: _____ Contact Person: _____
Phone: _____ Email: _____

Framing: _____ Contact Person: _____
Phone: _____ Email: _____





Roofing: _____ Contact Person: _____
Phone: _____ Email: _____

Electrical: _____ Contact Person: _____
Phone: _____ Email: _____

Plumbing: _____ Contact Person: _____
Phone: _____ Email: _____

Mechanical: _____ Contact Person: _____
Phone: _____ Email: _____

Irrigation: _____ Contact Person: _____
Phone: _____ Email: _____

-  **Double fees will be charged for starting work prior to issuance of permits.**
-  **All permits become invalid if the work authorized by a permit has not commenced within 180 days after its issuance or if the work is suspended or abandoned for a period of 180 days after the time the work is commenced.**
-  **The permit holder is responsible for requesting all inspections.**
-  **24-hour notice is required to schedule all inspections.**

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.

SIGNATURE: _____

PRINT: _____

EMAIL: _____

The City of Flatonia’s Building Department has reviewed and approved the following items submitted for this project:

- Site Plan
- Property setbacks
- Easement for City utility lines