



PERMIT APPLICATION CITY OF SELMA, TEXAS

**NO PERMIT
REFUNDS**

BUILDING SITE WORK ELECTRICAL HVAC PLUMBING SPRINKLER FENCE OTHER _____

JOB ADDRESS			
1. LEGAL DESCR.	LOT	BLK	SUBDIVISION
2. OWNER		MAIL ADDRESS	PHONE EMAIL
3. CONTRACTOR		MAIL ADDRESS	PHONE EMAIL
4. ARCHITECT OR DESIGNER		MAIL ADDRESS	PHONE EMAIL
5. ENGINEER		MAIL ADDRESS	PHONE EMAIL
6. LENDER		MAIL ADDRESS	EMAIL
7. USE OF BUILDING			
8. Class of Work: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input type="checkbox"/> REMOVE			
9. Describe work:			ADDITIONAL MECHANICAL INFO REQUIRED
			BRAND:
10. Change of use from			SEER:
Change of use to			SIZE:
11. Valuation: \$		PLAN CHECK FEE	PERMIT FEE
SPECIAL CONDITIONS:		\$	\$
		Const. Type	Occupancy Group
		Size of Bldg. (Total) SqFt.	No. of Stories
APPLICATION ACCEPTED BY	PLANS CHECKED BY	APPROVED FOR INSURANCE BY	Building Code
			Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No
		No of Dwelling Units	OFFSTREET PARKING SPACES: Covered
			Uncovered
NOTICE			
SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATING OR AIR CONDITIONING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 1 YEAR AT ANY TIME AFTER WORK IS COMMENCED.			
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.			
		Special Approvals	Required Received Not Required
		CIVIL REVIEW	
		ZONING	
		PLAT	
		OTHER (SPECIFY)	
		SEPTIC PERMIT	
		SEPTIC DOC.	
		LOT MAINT.	
		RES CHECK	
WATER & SEWER FEES			
SIGNATURE OF CONTRACTOR, AUTHORITY AGENT, OR OWNER		DATE	PERMIT #

PLAN CHECK VALIDATION CK NO. _____, CASH, OR CC PERMIT VALIDATION CK NO. _____, CASH, OR CC

DATE: _____ DATE: _____