

Phone: (830) 367-5115

230 Hwy 39 Fax: (830) 367-3175 Ingram, Texas 78025

BV Project #

Commercial Building Permit Application

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Building Permit Number:			Valuation:	
Project Name:			Square Foot:	
Project Address:			Legal Desc:	
Project Description:	New ☐ Addition	Remodel		Finishout
Sign 🗆 Plu	umbing	☐ Electrical		Fencing
Moving/Temporary	Foundation/Driveway/Flatwork	Other:		
Scope of Work:				
Is property located in an ide	entified flood hazard area:	Yes□ No □ (If yes	, a Development Pern	nit Appplication is required)
Owner Information:				
Name:	Contact Person:			
Address:	Phone Number:			
Email:	Fax Number:		Mobile Number:	
Engineer	Contact Person	Phone Numb	per	Fax Number
Architect	Contact Person	Phone Numb	per	Fax Number
General Contractor	Contact Person	Phone Number	er	Contractor License Number
Mechanical Contractor	Contact Person	Phone Number	er	Contractor License Number
Electrical Contractor	Contact Person	Phone Number	er	Contractor License Number
Plumbing Contractor	Contact Person	Phone Number	er	Contractor License Number
-	f work or construction authorized is nandoned for a period of 180 days at a		-	
•	te of occupancy must be	-	· ·	·
	ad and examined this application and	•	•	•
governing this type of work will be	e complied with whether specified or other state or local law regulating con	not. The granting of a perm	nit does not presun	ne to give authority to violate or
	of City Ordinance and/or Codes ado			
Signature of Applicant:			Date:	
OFFICE USE ONLY:				
Approved by:		Date approved:		
911 Address Verification	n Yes/No			
TXDOT Permit #			Permit Fee:	
KCEH Permit #		Chec	ck # or Cash:	
Insurance Information			Issued By:	
			Issued Date:	