



Physical address: 401 E Goode / Mailing Address: P.O. Box 1855; Quitman, TX 75783
 Phone: 903-763-2223 / Fax: 903-763-5631

Commercial Building Permit Application

Building Permit Number: _____	Valuation: _____
Project Name: _____	Square Foot: _____
Project Address: _____	
Project Description:	
New <input type="checkbox"/>	Addition <input type="checkbox"/>
Remodel <input type="checkbox"/>	Finishout <input type="checkbox"/>
Sign <input type="checkbox"/>	Plumbing <input type="checkbox"/>
Mechanical <input type="checkbox"/>	Electrical <input type="checkbox"/>
Other <input type="checkbox"/>	
Scope of Work: _____	
Does this project contain Food Services: <input type="checkbox"/> Yes <input type="checkbox"/> No Type: _____	

Owner Information:		
Name: _____		Contact Person: _____
Address: _____		
Phone Number: _____	Fax Number: _____	Mobile Number: _____

Engineer	Contact Person	Phone Number	Fax Number
Architect	Contact Person	Phone Number	Fax Number
General Contractor	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
Mechanical Contractor	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
Electrical Contractor	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
Plumbing Contractor	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>

A permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All construction must be completed within 12 months from issuance of permit. All permits require final inspection.

A certificate of occupancy must be issued before any building is occupied.

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 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 of Applicant: _____ Date: _____

OFFICE USE ONLY:

Approved by: _____	Date approved: _____
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Building Permit Fee: _____	Water Tap Fee: _____	Total Fees: _____
Plan Review Fee: _____	Sewer Tap Fee: _____	Check # or Cash: _____
	Electrical Permit Fee: _____	Received By: _____
	Plumbing Permit Fee: _____	Received Date: _____
	Mechanical Permit Fee: _____	BV Project # _____