



**CITY OF SULPHUR SPRINGS  
 PERMIT APPLICATION  
 COMMUNITY DEVELOPMENT DEPARTMENT  
 Phone: 903-885-7541, ext 732 Fax: 903-439-2092**

Project Address: \_\_\_\_\_  
 Is this address within five (5) miles of the Airport?  Yes  No

Owner of Property	Mailing Address	City	St	Zip	Phone#
_____	_____	_____	_____	_____	_____

Description of Work to be Done:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Describe the Specific Use of this Address:  
 Residence  Business  Other \_\_\_\_\_

<b>Square Footage</b>	Floor Space in New Addition _____ sq. ft.
Floor Space in Garage Areas _____ sq. ft.	Floor Space of Covered Areas _____ sq. ft.
Floor Space in Living Area _____ sq. ft.	Total Enclosed Area _____ sq. ft.

Total Value of Work included in this Permit \$ \_\_\_\_\_

Is this space currently?  Vacant  Occupied

**FOR PUBLIC OR COMMERCIAL BUILDINGS** – I hereby certify that an asbestos survey has been done in accordance with the Texas Asbestos Health Protection Rules (TAHPR) and the National Emissions Standards for Hazardous Air Pollutants (NESHAP) for the area(s) being renovated and/or demolished.  Yes  No

Applicant's Name (Please Print)	Company Title	Email
_____	_____	_____
Company	Mailing Address	City St. Zip Phone
_____	_____	_____
Applicant's Signature _____		
Providing false information on a government document is considered a Class A misdemeanor under Section 37.10 of the Texas Penal Code. Upon conviction, this offense carries a penalty of a fine of up to \$4,000 and possible confinement in Jail for up to one year.		

Contractor/Builder Signature \_\_\_\_\_ Cell Phone# \_\_\_\_\_  
 Texas Driver's License# \_\_\_\_\_ Date of Birth \_\_\_\_\_ Exp. Date \_\_\_\_\_

The granting of a permit does not resume to give authority to violate or cancel the provisions of any state or local law regulating construction. This permit becomes null and void if the authorized work or construction is not commenced, is suspended or abandoned after work is commenced, or if no inspections are obtained within a 6 month period. All permits require final inspections. I agree to abide by all laws and ordinances governing this type of work whether herein specified or not and hereby certify that I have read and examined this application and know the same to be true and correct.

Date Checked \_\_\_\_\_ Checked by \_\_\_\_\_ Valuation \$ \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_  
 Zoning \_\_\_\_\_ Const Type \_\_\_\_\_ Occup. Group \_\_\_\_\_ #of Apt. Units \_\_\_\_\_  
 Date \_\_\_\_\_ Amount \$ \_\_\_\_\_ Rec.# \_\_\_\_\_ Cash/Ck # \_\_\_\_\_ By \_\_\_\_\_