

DATE: _____
APPLICATION TYPE
REGULAR <input type="radio"/> EXPRESS <input type="radio"/>

PERMIT APPLICATION

PLEASE TYPE OR PRINT CLEARLY



Permit Number: _____

(Official Use Only)

STREET ADDRESS OF PROPOSED PROJECT			SUITE/BLDG/FLOOR NO		USE OF PROPERTY		
APPLICANT		ADDRESS		CITY		STATE	ZIP CODE
DBA (IF APPLICABLE)			PHONE NO		E-MAIL ADDRESS (MAY BE USED FOR OFFICIAL COMMUNICATION)		
CONTRACTOR-INDIVIDUAL		CONTRACTOR NUMBER		PIN		COMPANY NAME	
CURRENT PROFESSIONAL LICENSE ON FILE?		IF YES, LIST NUMBER		PHONE NO		E-MAIL ADDRESS (MAY BE USED FOR OFFICIAL COMMUNICATION)	
PROPERTY OWNER (INDIVIDUAL CONTACT)		ADDRESS		CITY		STATE	ZIP CODE
PROPERTY OWNER (COMPANY NAME)			PHONE NO		E-MAIL ADDRESS (MAY BE USED FOR OFFICIAL COMMUNICATION)		

DESCRIPTION OF PROPOSED PROJECT				VALUATION (\$)		CONST AREA (sq ft)	
				NEW CONST		NEW CONST	
				MFD OTHER		MFD OTHER	
				REMODEL		REMODEL	
				TOTAL VALUATION		TOTAL AREA	

PLEASE INDICATE ALL TYPES OF WORK THAT WILL BE PART OF THIS PROJECT BY CHECKING THE APPROPRIATE BOX

<input type="checkbox"/> BUILDING	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> FENCE	<input type="checkbox"/> DRIVE APPROACH	<input type="checkbox"/> BACKFLOW	<input type="checkbox"/> BARRICADE	<input type="checkbox"/> PAVING/GRADING
<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> FIRE	<input type="checkbox"/> SIGN	<input type="checkbox"/> SWIMMING POOL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> OTHER
<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> ALARM	<input type="checkbox"/> LANDSCAPE	<input type="checkbox"/> LAWN SPRINKLER	<input type="checkbox"/>	<input type="checkbox"/>	

All food service establishments require a grease interceptor to be installed on site. Is there a grease interceptor on site? ☐ YES ☐ NO

The following is applicable to all applications for building permits that are accepted and routed for any reviews. As required by Texas Local Government Code Section 214.904, the City of Trinidad will grant (Approve) or deny your building permit application to erect or improve a building or other structure no later than the 45th day after this application is submitted. Denial of a permit application in review that requires revisions or corrections may be avoided by agreeing to allow the City the following additional time to review the application:

I hereby agree to a deadline of 30 days to grant or deny the permit after the date of the approval of all of the following reviews, as applicable, where the applicant has provided the plans examiners the requested corrections, plans and actions; and, the contractor has been named on the permit:

If the permit is granted (*Approved*) within this deadline the City will retain and/or assess all fees. If the permit is denied within this deadline, the City will retain all plan review fees and 20 percent of the permit fees. If the permit application is not granted or denied within the agreed additional time of review, the City will refund any permit fees that have been collected and the City may not collect any permit fees associated with the application.

☐ I AGREE. ☐ I DO NOT AGREE.

I UNDERSTAND THAT THIS PERMIT APPLICATION WILL EXPIRE IN _____ DAYS FROM THE APPLICATION DATE. I MAY REQUEST IN WRITING AN ADDITIONAL _____ DAY EXTENSION OF THE PERMIT APPLICATION PRIOR TO THE APPLICATION EXPIRATION. IF THE APPLICATION IS ALLOWED TO EXPIRE, IT MAY ONLY BE REACTIVATED BY THE FILING OF A NEW APPLICATION INCLUDING APPLICABLE PLANS AND FEES

I HAVE CAREFULLY READ THE COMPLETED APPLICATION AND KNOW THE SAME IS TRUE AND CORRECT AND HEREBY AGREE THAT IF A PERMIT IS ISSUED ALL PROVISIONS OF THE CITY ORDINANCES AND STATE LAWS WILL BE COMPLIED WITH WHETHER HEREIN SPECIFIED OR NOT. I AM THE OWNER OF THE PROPERTY OR THE DULY AUTHORIZED AGENT. PERMISSION IS HEREBY GRANTED TO ENTER PREMISES AND MAKE ALL INSPECTIONS. I ALSO AFFIRM THAT THE EMAIL ADDRESS GIVEN ABOVE MAY BE USED FOR OFFICIAL COMMUNICATION CONCERNING THIS APPLICATION AND PERMIT.

APPLICANT'S SIGNATURE	DATE OF APPLICATION SUBMISSION
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