



CITY OF SOUR LAKE REPAIR / ALTERATION CONSTRUCTION PERMIT APPLICATION

APPLICANT INFORMATION

NAME

MAILING ADDRESS

PHONE NUMBER

EMAIL

PROPERTY INFORMATION

LEGAL DESCRIPTION

DIMENSIONS

AREA (acres/square feet)

911 ADDRESS

IS THIS LOCATED ON A CITY-MAINTAINED STREET? ☐ YES ☐ NO ☐ UNSURE

WHICH DISTRICT/ZONE IS THE PROPERTY LOCATED IN?

- | | |
|---|--|
| ☐ AG - Agricultural | ☐ C - Commercial |
| ☐ R - Residential Single-Family Dwelling | ☐ NR - Neighborhood Retail |
| ☐ M-1 - Manufactured Dwelling | ☐ M-2 - Manufactured Homes Park |

FOR PLANS EXAMINER: REASONS FOR REJECTION BELOW



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CONSTRUCTION INFORMATION

THIS BUILDING WAS USED FOR:

RESIDENTIAL _____ COMMERCIAL _____

THIS BUILDINGS PROPOSED USE IS:

RESIDENTIAL _____ COMMERCIAL _____

IS THIS A COMPLETE GUT:

SQ. FT. OF BUILDING

SQ. FT. OF WORK AREA

YES _____ NO _____

ARE YOU CHANGING THE FLOOR PLAN IN ANY WAY: (THIS INCLUDES ADDING/DELETING OPENINGS)

YES _____ NO _____

DESCRIPTION OF PROPOSED PROJECT

CHECKLIST

DO YOU HAVE A \$50,000 BOND? ☐ YES ☐ NO

DO YOU KNOW HOW TO LOCATE THE INTERNATIONAL EXISTING BUILDING CODE? ☐ YES ☐ NO

IS YOUR HVAC TECHNICIAN LICENSED? (N/A IF NOT TOUCHING) ☐ YES ☐ NO

HVAC COMPANY AND LICENSE NUMBER: _____

IS YOUR ELECTRICIAN LICENSED? (N/A IF NOT TOUCHING) ☐ YES ☐ NO

ELECTRICAL COMPANY AND LICENSE NUMBER: _____

IS YOUR PLUMBER LICENSED? (N/A IF NOT TOUCHING) ☐ YES ☐ NO

PLUMBING COMPANY AND LICENSE NUMBER: _____

WHO IS PERFORMING YOUR ENERGY INSPECTIONS AND TESTING? (N/A IF NOT GUTTED ENTIRELY)

ENERGY INSPECTOR AND CERTIFICATION NUMBER: _____

I AGREE TO CONTACT THE CITY FOR THE FOLLOWING INSPECTIONS AS NEEDED: ☐ YES ☐ NO

-PLUMBING ROUGH

-FOUNDATION (STEEL)

-FRAMING (AFTER MEP'S ARE INSTALLED, BEFORE INSULATION AND SHEETROCK)

-FINAL / GRADING



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APPLICANT WILL PROVIDE ONE FULL COPY OF PLANS AND SPECIFICATIONS ON THE PROPOSED CONSTRUCTION.

ATTACHMENTS INCLUDED WITH APPLICATION

AS BUILT: If plans change, please submit a new set of as-built drawings to the city for our records.

FOR MODULAR HOMES: A copy of the approved decal/insignia as required by the Texas Department of Licensing and Regulation must be provided.

FOR MANUFACTURED HOMES: Only HUD-code Manufactured Homes are permitted within the city limits. Installation of HUD-Code Manufactured Homes are restricted to their respective zones. A copy of the HUD certificate must be included with the permit.

FLOODPLAIN INFORMATION

The flood boundary maps and other flood data used by the city in evaluating flood hazards to proposed development are considered reasonable and accurate for regulatory purposes. They are based on the best available scientific and engineering data. On rare occasions, greater floods can and will occur, and man-made or natural causes may increase flood heights. Construction standards required by the City of Sour Lake Flood Plain Management Regulations are the minimum standards deemed necessary to minimize or eliminate flood damage. Still, reliance on these minimum standards shall not create liability on the part of the City of Sour Lake, City Manager, or any other officer or employee of the City of Sour Lake in the event flooding or flood damage occurs.

IS THE PROPERTY LOCATED IN AN IDENTIFIED FLOOD HAZARD AREA?

☐ YES ☐ NO

ELEVATION CERTIFICATE REQUIRED? (IF YES TO ABOVE)

☐ YES ☐ NO



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I, the undersigned applicant, do hereby (Please Initial)

- _____ acknowledge the warning and disclaimer of liability of the City;
- _____ agree with the conditions or permit approval;
- _____ agree to construct my development in strict compliance with the specified conditions once a permit has been issued;
- _____ agree to provide certifications of work as may be required;

The above information provided by me is true and accurate and per the written standards provided to me by the City of Sour Lake.

_____ PRINTED NAME	_____ SIGNATURE	_____ DATE
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NOTE: All applications must be reviewed and approved by the city manager and a city official. This may take up to 3 business days. The City reserves the right to request additional review by the planning and zoning commission. Applicants will be notified if their application requires additional review.

REVIEWED BY

_____ PRINTED NAME	_____ TITLE	_____ SIGNATURE	_____ DATE
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THIS APPLICATION HAS BEEN ☐ **APPROVED** ☐ **CONDITIONALLY APPROVED** ☐ **REJECTED**

CONDITIONS OF APPROVAL (REASONS FOR REJECTION ON PAGE 1 IF APPLICABLE)

CITY MANAGER

_____ SIGNATURE	_____ DATE
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