



TRADE PERMIT APPLICATION

- **SUBMIT PERMITS TO PERMITS@OAKRIDGENORTH.COM**
- **ALL IMPROVEMENTS MUST COMPLY WITH THE CODES AND STANDARDS ADOPTED BY THE CITY.**
- **ALL CONTRACTORS MUST BE REGISTERED WITH THE CITY.**
- **ALL INSPECTIONS MUST BE CALLED OR EMAILED IN 24 HOURS IN ADVANCE.**
- **INSPECTION REQUEST LINE. (832)381-3298.**
- **EMAIL: INSPECTIONS@OAKRIDGENORTH.COM**

PROJECT LOCATION			
911 Assigned address:		Existing Permit Number:	
Subdivision:	Lot:	Blk:	Sec:
PROJECT INFORMATION			
Permit type: ☐ Plumbing ☐ Electrical ☐ Mechanical			
Proposed use: ☐ Residential , ☐ Commercial		Valuation of proposed work:	
Nature of work: ☐ Repairs only, ☐ New construction, ☐ Interior remodel, ☐ Building addition, ☐ Other			
TYPE OF PERMIT REQUESTED			
ELECTRICAL (2020 NEC)	MECHANICAL (2018 IRC and IMC)	PLUMBING (2018 IRC and IPC)	
Square footage:	Square footage:	Square footage:	
Service amperage:	# of tons:	Grease trap:	
# of circuits:	# of Exhaust hoods/ fans:	Water heater:	
# of motors: HP:	Duct replacement:	Sewer line:	
# of ranges/ovens:	Other (specify):	Water service line:	
Temp electric pole:	Please check the type of inspections required.	Gas openings:	
Mobile home pole:		Gas test:	
Meter set:		Irrigation heads:	
		Backflow preventers:	
Please check the type of inspections required.		Please check the type of inspections required.	
T-Pole	Underground	Underground	
Underground	Mechanical Rough	Top Out	
Electric Rough	Duct Seal	Wall Cover	
Wall Cover	Ceiling Cover	Ceiling Cover	
Ceiling Cover	Final	Gas Test	
Temporary Cut In	Other:	Shower liner	
Final		Final	
Other:		Other:	

City of Oak Ridge North

27424 Robinson Road • Oak Ridge North, Texas 77385

(832)381-3301 • Fax (281) 367-7729

Description of work being Done:		
PROPERTY OWNER or OWNER'S AGENT INFORMATION		
Home owner permit requests must be accompanied by proof of homestead exemption status		
Name:	Phone:	Fax:
Address:		
Email:		
CONTRACTOR INFORMATION		
Contractor Name:	Phone:	Fax:
Company Name:		
Address:		
Email:		

The undersigned Owner/ Agent/ Contractor, has read all of the information contained in this application, agrees to conform to all applicable Federal, State, and local laws, and certifies the information provided herein is true and correct. **Homeowners may only obtain permits if the work is performed by the homeowner only.**

Signature of Applicant	Printed Name	Date
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How do you prefer to receive correspondence? Check one. Mail, E-Mail, Fax, Pick-up.

OFFICE USE ONLY						
Regulated Floodplain:	In	Out	Zone:	BFE:	LFFE:	Panel #
Zoning District:						
Approved by:		Date:		Issued by:		Date:
Permit Fees:		Plan Review Fees:			Inspection Fees:	
Registration Fees:		Other Fees:				
Total Fees:				Permit Number:		