



CITY OF CORPUS CHRISTI DEVELOPMENT SERVICES

2406 Leopard St. Corpus Christi, TX 78408 | Phone: 361.826.3240

Residential Building Permit Application

Application Type:

**ALL ITEMS MUST BE
FILLED OUT
COMPLETELY.**

- | | | | |
|---|---|--|-----------------------------------|
| ☐ New Construction | ☐ Addition | ☐ Remodel | ☐ Pool/Spa |
| ☐ Driveway/Sidewalk | ☐ Demolition | ☐ Foundation Repair | ☐ Fence |
| ☐ Patio/Carport | ☐ Dock/Deck/Boatlift | ☐ Detached Garage | ☐ Siding |
| ☐ Window Replacement | ☐ Garage | ☐ Solar Panels | |
| ☐ Shed/Storage | | | |

Project Address: _____

Subdivision: _____ LT _____ BLK _____

Property Tax ID _____ - _____ - _____

Platted: ☐ YES ☐ NO **Building Permits **CAN NOT** be Issued on Properties **NOT PLATTED****

Description of work in detail:

Area of Work		City Gas	☐ YES ☐ NO
1 ST Floor Sq. Ft.	Project Cost Required on all remodels if constructed in Special Flood Hazard area	City Water	☐ YES ☐ NO
2 nd Floor Sq. Ft.		City Wastewater	☐ YES ☐ NO
3 rd Floor Sq. Ft.		Demo Needed	☐ YES ☐ NO
Garage Sq. Ft.			
Total Square Footage: (Include additional floors on a separate sheet)	Total Project Cost:		

Names	E-Mail	Address, City, Zip	Phone #
Contractor / Authorized Agent:			
Owner:			
Architect / Engineer / Designer:			
Mechanical Contractor:			
Electrical Contractor:			
Plumbing Contractor:			
Energy Compliance Inspector: (new & additions)			
Energy Compliance Option to be Utilized:	☐ PRESCRIPTIVE ANALYSIS ☐ PERFORMANCE ANALYSIS ☐ ENERGY RATING INDEX ANALYSIS		

I have read the complete application and know the same to be true and correct and hereby agree that if the permit is issued, all provisions of the City Ordinance will be complied with whether herein specified or not. I understand that the permit belongs to the property owner and I am an authorized agent.

	_____		_____	_____
	Print Signature Name		Signature of Contractor or Authorized Agent	Date
	_____		_____	_____
	Signature of Owner (If Owner is Builder)		Date	Phone Number