

CITY OF CRYSTAL CITY
APPLICATION FOR BUILDING PERMIT
PERMIT # _____

ADDRESS _____

SUBDIVISION _____ LOT/BLOCK _____

OWNER (NAME & ADDRESS) _____

BUILDER/CONTRACTOR (NAME & ADDRESS) _____

SUB-CONTRACTOR _____

PHONE NUMBER _____ FAX NUMBER _____

PROPOSED USE: ☐ RESIDENTIAL ☐ COMMERCIAL ☐ OTHER ☐ NEW CONSTRUCTION ☐ ALTERATION ☐ REPAIR TDLR# _____

VALUE \$ _____

BASE FEE _____

FOUNDATION _____

WALL _____

ROOF _____

STORIES _____ HEIGHT _____

FENCE _____

SQUARE FOOTAGE _____

CERTIFICATE OF OCCUPANCY (CO) _____

FEE _____

INSPECTIONS (ROUGH IN, RE-INSPECTIONS, FINAL) _____

FEE _____

TOTAL FEES _____

****The undersigned applicant hereby declares that the above facts are true and correct and that the construction proposed herein will be performed in conformity with existing regulations as pertain to building and zoning as passed by the City Council of the City of Crystal City, Texas. MUST MEET CODES. SUBJECT TO FIELD INSPECTIONS.****

APPLICANT SIGNATURE _____ DATE _____

APPROVED _____ PLAN REVIEW DATE _____

INSPECTOR'S STAMP