Permit Cost $ _____
Penalty $ _____
Issued _____
Approved _____
Faxed CCAD _____

Port Bldg **No-Human Occupancy** 8-21

CITY OF SEADRIFT
No-Human Occ Portable Bldg
PLACEMENT PERMIT

Tracking Number

PERMIT Number

Fees determined from Appendix IRC-R or IBC-L

P.O. BOX 159, SEADRIFT, TEXAS 77983 TEL: 361-785-2251 FAX: 361-785-2208

- **PORTABLE BUILDINGS OLDER THAN 10 YEARS CANNOT BE PLACED IN THE CITY.**
- **THIS PERMIT APPLIES ONLY TO PORTABLE BLDG'S MOVED INTO CITY AND NOT USED FOR HUMAN OCCUPANCY AND MUST BE COMPLETED BY EITHER MOVER/SELLER OR PROPERTY OWNER.**
- **PORTABLE BUILDINGS SHALL NOT BE MOVED IN BEFORE PRELIMINARY PERMIT IS COMPLETED, OTHERWISE THE MOVER AND THE OWNER CAN BE CITED AND MAY INCUR FINES AND PENALTIES FOR NON-COMPLIANCE.**
- **THIS PERMIT DOES NOT APPLY TO STRUCTURES CONSTRUCTED FROM SCRATCH, COMMONLY REFERRED TO AS "STICK BUILT" AND IT DOES NOT APPLY TO MANUFACTURED HOUSING.**
- **PORTABLE BUILDINGS USED ONLY FOR STORAGE, SHOPS OR SIMILAR USE MUST BE ANCHORED BY CITY APPROVED METHODS AND A NON-OCCUPANCY CERTIFICATE MUST BE COMPLETED AND SIGNED BY OWNER. THIS ONLY APPLIES TO PORTABLE BUILDINGS NOT USED FOR LIVING QTRS.**
- **PORTABLE BUILDINGS TO BE USED FOR HUMAN OCCUPANCY, SUCH AS RESIDENTIAL OR OFFICES MUST MEET INLAND 1 WINDSTORM REQUIREMENTS, AND REQUIRE A DIFFERENT PERMIT.**
- **PORTABLE BUILDINGS ORIGINALLY MOVED IN UNDER THIS PERMITTING SYSTEM FOR STORAGE, SHOPS, VEHICLE SHELTER OR SIMILAR USE SHALL NOT BE CONVERTED TO RESIDENTIAL OR FOR OFFICE SPACE.**

1. HAS PLACEMENT ALREADY BEGUN? ☐-YES: *A Penalty WILL be assessed* ☐-NO

   ☞ IF YES, WHAT HAS BEEN DONE? _____

2. BUILDING LOCATION: BLOCK:_____ LOT(S):_____

3. SUBDIVISION NAME: (If applicable)_____

4. PHYSICAL 911 ADDRESS: _____ SEADRIFT, TX

5. LOT SIZE: _____ IF MULTIPLE LOTS, TOTAL SIZE: _____

6. STRUCTURE TYPE ☐-PORTABLE BLDG

7. PORTABLE BLDG OLDER THAN 10 YEARS? ☐-NO ☐-YES: *Permit will not be issued*

   YEAR BUILT: _____ SIZE: _____

   ESTIMATED MOVE DATE? _____

8. CALCULATED COST/VALUATION OF PORTABLE BUILDING: $ _____

   Copy of contract submitted? ☐-YES ☐-NO: *Valuation will be determined by city*

9. OWNERS NAME:_____ PHONE:_____

10. OWNERS MAILING ADDRESS:_____

    CITY _____ STATE _____ ZIP _____

11. INSTALLER/MOVER NAME:_____ PHONE:_____

12. INSTALLER/MOVER ADDRESS:_____

    CITY _____ STATE _____ ZIP _____

13. PRELIMINARY 8½ x 11 SITE PLATS ARE REQUIRED FOR ALL PLACEMENTS:

    Preliminary Plat Attached? ☐-YES ☐-NO - *Permit will not be issued until received*

Permit expires 180 days after issue if no work has been performed or if work has ceased. Renewal may or may not require additional fees and depends on whether there have been changes to work scope.

To be completed BY BUILDING OFFICIAL BEFORE PERMIT ISSUANCE – Applicant Do Not Complete!

14. FLOOD ZONE LOCATION: ☐-VE(NOT ALLOWED) ☐-AE(Special Requirement) ☐-X ☐-OTHER

Portable Buildings are not allowed to be placed in Zone VE
Zone AE Special Requirement:

15. WETLANDS: DOES PROPERTY CONTAIN WETLANDS? ☐-YES ☐-NO

If it appears wetlands are present and no delineation has been performed, a study may be required.

16. SETBACKS: *Setbacks are determined from Appendixes of the IRC or IBC:*

- ARE PROPERTY LINES IDENTIFIED? ☐-YES ☐-NO
- IS THIS AN INTERIOR LOT? ☐-YES ☐-NO
- IS THIS A CORNER LOT? ☐-YES ☐-NO
- DOES THIS LOT HAVE AN ODD SHAPE? ☐-YES ☐-NO

IF YES, DESCRIBE: _____

SURVEY REQUIRED? Yes/No? _____

17. SETBACKS FOR THIS PROJECT AND LOCATION: *Measured from any overhangs, extensions, porches, etc.*

A) _____ FROM FRONT STREET SURVEYED *PROPERTY LINE – NOT STREET LOCATION*

B) _____ FROM SIDE STREET *SURVEYED PROPERTY LINE - IF CORNER LOT*

C) _____ FROM ADJACENT *SURVEYED PROPERTY LINES - SIDES AND REAR*

18. VARIANCE? ☐ YES ☐ NO VARIANCE REASON: _____

_____

18. FOUNDATION TYPE: ☐-SLAB ☐-PIER&BEAM PILE: ☐-WOOD ☐-CEMENT

19. EXTERIOR WALLS: ☐-FRAME ☐-METAL ☐-HARDI ☐-WOOD

20. ROOF: ☐-COMPOSITION ☐-METAL ☐-OTHER: _____

ROOF SHAPE: ☐-FLAT ☐-GABLE ☐-HIP ☐-LEANTO ☐-OTHER_____

21. WILL THIS BE A COMMERCIAL LOCATION? ☐-YES ☐-NO

IF YES, TYPE OF COMMERCIAL USE: _____

22. DESCRIPTION OF WORK AND COMMENTS: _____

_____

I hereby certify I have read this permit. I further certify all provisions of laws and ordinances governing this work will be complied with whether specified herein or not. The granting of this permit does not presume to give authority to violate or cancel the provisions of any other state or local law regarding construction, repairs, placements or the performance of such construction, repairs or placements.

SIGNATURE _____ DATE _____

INSPECTOR NOTES: _____

_____

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