## City of Ingram



Phone: (830) 367-5115
Fax: (830) 367-3175

230 Hwy 39 Ingram, Texas 78025

## Residential Building Permit Application

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<b>Building Permit Number</b>	T U				Valuation:		
Project Address:	•				<del>.</del>	:	
Lot:	Block:	Subdivision	•				
Project Description:  FENCE		☐ LAWI	DEL/ADDITION MECHANICAL N IRRIGATION FOUNDATION		DEMOLITION ELECTRICAL SWIMMING POOL FLATWORK		
Description of Work:	01. 0.	·	OUNDATION	<u></u> ·	ILATIVORK		
Area Square Feet:		Covered					
Living:	Garage:	Porch:		Total:		Number of stories	
ls property located in an	identified	flood hazard area:	Yes□ No	☐ (If yo	es, a Development Pern	it Appplication is require	(d)
Owner Information:							
Name:			Cont	act Person:			
Address:	Phone Number:						
Email:	Fax Number:			Mobile Number:			
General Contractor		Contact Person		Phone Num	ber	Contractor License	Number 🔲
Mechanical Contractor		Contact Person		Phone Num	ber	Contractor License	Number
Electrical Contractor	(	Contact Person		Phone Num	ber	Contractor License	Number
Plumber/Irrigator	(	Contact Person		Phone Num	ber	Contractor License	Number
A permit becomes null and void if work or construction authorized is not commenced within 60 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All construction must be completed within 6 months from issuance of permit. All permits require final inspection.  I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Violations of the terms and conditions of City Ordinance and/or Codes adopted by the City can result in a criminal or civil penalty.							
Signature of Applicant:		· .			Date:		
OFFICE USE ONLY:							
Approved by:		:	Date ap	proved:			
911 Address Verifica TXDOT Permit # KCEH Permit # Insurance Information		Yes/No	- - -	Che	eck # or Cash: Issued By: Issued Date:		
BV Project #							