Town of Bayside, Texas

909 1st Street City Hall Building

Bayside, Texas 78340

PH. (361) 529-6520 FAX (361) 529-6409

MECHANICAL PERMIT APPLICATION

APPLICANTS ARE REQUESTED TO PROVIDE A CURRENT DRIVER'S LICENSE AS PROOF OF IDENTIFICATION ALONG WITH A COPY OF STATE PLUMBER'S LICENSE.

				Email			
Building	Permit #		Owner	rs Name			
PERMI	T APPLICATI	ON FOR: (A	ddress)			1000000	
Block	Lot(s)			Zoning co	de (R-C-I)	A	
Name o	of Property	Owner	- The second sec	}			
Address	OLL AND THE STATE OF THE STATE			City		State	
Zip code	***************************************		Telephon	e Number	I.	-	
•		**************************************		1			Administration of the Control of the
Mechar	nical Contra	actor's Fir	m Name				
Lice	nsed Cont	ractors Na	ame				
Address		Q.238.1111		City		State	
Zip code			Telephon	e Number		3	
State	License Nu	ımber			Expiration Date		
	111111111111111111111111111111111111111		1	/			
Mark (X)	in the box	or boxes	that best o	describe the	e electrical	installatio	n:
Residential Commercial							
Describe v	vork:						
Has a	Building Pe	ermit beei	n obtained	for this pro	oject?		Yes
	Not Required Note Permit # Above				No		

FEE: INCLUDES ONE (1) INSPECTION---\$100.00. \$100.00 FOR EACH RE-INSPECTION. NO FEE WHEN INCLUDED IN BUILDING PERMIT.

- ** This application does not constitute permission to begin work. If work is begun prior to the issuance of a permit, a penalty fee in addition to the permit fee shall be assessed. The penalty fee shall be equal to the permit fee.
- ** All mechanical work must comply with the Town of Bayside mechanical code.
- ** The applicant shall be responsible for informing the City Secretary and the City Building Inspector for inspections. Inspection requests may be made by calling 361-529-6520.
- ** This permit will expire and become Null and Void if work does not commence Within 180 days or if work is discontinued at anytime for 180 days.
- ** Permit fees must be paid prior to inspection(s). No refund after the City Building Inspector has made a field inspection. There shall be no refunding of any fee paid except on written application filed by the original permit-tee not later than 180 days after the date of fee payment. No refund shall be made of an amount less Than \$25.00.
- ** I AGREE TO ALLOW NO WORK ON WHICH SEPARATE PERMITS ARE REQUIRED. I HAVE CAREFULLY EXAMINED AND READ THE COMPLETED APPLICATION AND KNOW THE SAME IS TRUE AND CORRECT, AND HEREBY AGREE THAT IF A PERMIT IS ISSUED, ALL PROVISIONS OF THE CITY ORDINANCES AND STATE LAWS WILL BE COMPLIED WITH, WHETHER HEREIN SPECIFIED OR NOT.
- ** I, THE UNDERSIGNED, DO HEREBY CERTIFY THAT I AM THE AUTHORIZED AGENT / BUILDER / OWNER OF THE PROPERTY ABOVE DESCRIBED AND THAT I AM APPLYING FOR THIS PERMIT AT THE REQUEST AND WITH THE PERMISSION OF THE SAME.
- ** I AUTHORIZE THE BUILDING INSPECTOR TO ENTER ON MY PROPERTY TO COM-PLETE ANY INSPECTIONS NECESSARY IN CONJUNCTION WITH THE ISSUANCE OF THIS BUILDING PERMIT, TO PERFORM INSPECTIONS IN CONNECTION WITH THE ISSUED PERMIT, AND TO INVESTIGATE CODE ENFORCEMENT ISSUES TO THIS PROPERTY.
- ** I, THE APPLICANT FOR THIS PERMIT, WARRANT THE TRUTHFULNESS OF ALL OF THE INFORMATION PROVIDED IN THIS APPLICATION AND UNDERSTAND THAT IF ANY OF THE INFORMATION PROVIDED IS INCORRECT, THE PERMIT MAY BE REVOKED BY THE BUILDING OFFICIAL.

APPLICANTS SIGNATURE	DATE	
LICENSE HOLDERS SIGNATURE	DATE	

IS NOT RENTAL PROPERTY WHICH IS OCCUPIED OR IS TO BE OCCUPIED BY TENANTS FOR LODGING, EITHER TRANSIENT OR PERMANENT; AND IS NOT GENERALLY OPEN TO THE PUBLIC. 2) THE PLUMBING WILL BE INSPECTED PRIOR TO COVERING, I.E., INSULATION, DRYWALL, ETC., AND UPON COMPLETION OF THE SYSTEM PRIOR TO OCCUPANCY AND PERMANENT POWER RELEASE. 3) ALL PLUMBING WORK WILL BE DONE IN ACCORDANCE WITH THE TOWN OF BAYSIDE PLUMBING CODE.

HOMEOWNER AFFIDAVIT: I HEREBY CERTIFY THAT THE PLUMBING WORK DESCRIBED ON THIS PERMIT SHALL BE INSTALLED BY MYSELF IN MY OWN HOME IN WHICH I AM LIVING OR ABOUT TO OCCUPY. ALL WORK SHALL BE INSTALLED IN ACCORDANCE WITH THE TOWN OF BAYSIDE PLUMBING CODE AND SHALL NOT BE ENCLOSED, COVERED UP, OR PUT INTO OPERATION UNTIL IT HAS BEEN INSPECTED AND APPROVED BY THE BUILDING INSPECTOR. I WILL COOPERATE WITH THE BUILDING INSPECTOR AND ASSUME ALL RESPONSIBILITY TO ARRANGE FOR ALL NECESSARY INSPECTIONS AND CORRECTIONS REQUIRED.

OWNER SIGNATURE	 DATE			
*OFFICE LICE ONLY		T		

OFFICE USE ONLY	PLAN REVIEW FEE		BUILDING I	PERMIT FEE
Building Permit #		EXPIRATI	ON DATE	
1ST EXTENSION DATE 2ND EXTER		ISION DATE		

CHECKLIST/PERMIT	APPROVED	DENIED
CITY OFFICIAL SIGNATURE		DATE
CHECKLIST/PERMIT	APPROVED	DENIED
CITY OFFICIAL SIGNATURE		DATE

Paid Plan Fee	Check #	Amount	Receipt #
Difference owed	Check #	Amount	Receipt #
Total Permit Fee	Check #	Amount	Receipt #