

PERMIT
TOWN OF CALLAHAN
 Land Use, Building, and Water/Sewer Service

Date _____

APPLICATION # **Ne**

Name _____		Phone No. _____	
Address _____			
Location _____			
Legal Description	Lot	Block	Tract (See attached <input type="checkbox"/>)
PROPOSED STRUCTURE;	CHECK ONE: <input type="checkbox"/> Residential <input type="checkbox"/> Mobile Home <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Rezoning	CHECK ALL THAT APPLY: <input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Detached Structure <input type="checkbox"/> Change of Use <input type="checkbox"/> Alteration	
Description: _____		<input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Remove <input type="checkbox"/> Electrical <input type="checkbox"/> Other _____	
VALUATION / CONSTRUCTION COST: _____		ZONING CLASSIFICATION: _____	
\$ _____		Use of Building: _____	
		If Change of Use, From What? _____	
Contractor _____			
Address _____			
Phone _____		License No. _____	
Subcontractors			
Name _____		License No. _____	
Architect/Engineer _____			
Other _____			
<p>PRIOR TO ANY CONSTRUCTION, this permit application if applicable must be approved by the Zoning Board, Water/Sewer Department, the Building Inspector, and the Fire Marshall. The purpose of this application is to assure the property owner and the Town of Callahan that all regulations and requirements of the Town's Ordinances are being met.</p> <p>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 herein or not. The granting of a permit does not presume to give authority to violate or cancel the provision of any other state or local law regulating construction or the performance of construction.</p>			
Property Owner's Signature _____		Applicant's Signature _____	
(Date) _____		(Date) _____	

FOR OFFICIAL USE

ZONING BOARD

- Application Review Only
- Site Inspection Performed
- Surveyor's Plat Required

- APPROVED
- REFUSED
- See Special Conditions Below

WATER DEPARTMENT

- Water Available
- Water Not Available
- Sewer Available
- Sewer Not Available

BUILDING DEPARTMENT

Permit Fee \$ _____

This application is in compliance with
 Zoning Ordinance

Comprehensive Plan

Public Works Director _____

Fire Marshall _____

Building Inspector _____

RADON FEE \$ _____

Signature _____ Date _____

Type of Const.	Occupancy Group	
Size of Bldg. Sq. Ft.	No. of Stories	Max. Occ. Load
Fire Zone	Use Zone	Fire Sprink Required <input type="checkbox"/> Yes <input type="checkbox"/> No
Special Conditions:		
<p>WHEN PROPERLY VALIDATED (IN THIS SPACE BY SIGNATURE & SEAL) THIS IS YOUR PERMIT</p>		
Application Accepted by	Plans Checked by	Approved for Issue

FEES	Required	Not Required	Amount	Rec. #
Move-On Fee				
Water Tap				
Sewer Tap				

ALL BUILDING PERMITS MUST HAVE CERTIFICATE OF OCCUPANCY