



City of Glen Rose • P.O. Box 1949 • Glen Rose, TX 76043
Building Inspections / Permits 254-897-2272 ext. 109

COMMERCIAL BUILDING PERMIT APPLICATION

<u>JOB SITE INFORMATION</u>			
Address	City	State	Zip Code

<u>Property Owner / Tenant / Occupant</u>	<u>Contractor</u>
Name _____	Name _____
Address City State Zip	Address City State Zip
Phone # _____	Phone # _____
Email _____	Email _____

<u>Application Information</u>	
New Construction / addition <input type="checkbox"/>	Remodel or Repair <input type="checkbox"/> Job Valuation: \$ _____
Zoning: _____	Job Sq Ft: _____ No. of stories: _____
Attached Site Plan: <input type="checkbox"/>	3 Sets of COMPLETED paper plans and 1 digital set: <input type="checkbox"/>
Attached Certified Copy of most recent Plat: <input type="checkbox"/>	
1. Owner Authorization/signature, NOTARIZED at the bottom of this page OR a NOTARIZED letter of authorization from the owner giving the applicant permission to apply. 2. Dimensioned Site Plan or Survey that shows all existing structures and what is being demolished. 3. Certified tax certificate(s) from the Somervell County Appraisal District showing proof of ownership.	

<u>Job Site Contractors</u>	
General Contractor: _____	Phone: _____
Electrical Contractor: _____	Phone: _____
Plumbing Contractor: _____	Phone: _____
Mechanical Contractor: _____	Phone: _____

Flood Plain Information

Is the project in the 100 year flood plain? Yes No If yes, then a Certificate of Elevation from a licensed surveyor must be attached.

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COMMERCIAL PROPERTIES ONLY:

I understand and will adhere to the following rules or regulations:

1. **NO work may begin prior to issuance of this permit.**
2. Demolition permits are valid for 6 months, however once demolition has begun, you must complete the demolition and removal of all debris within **30 days**.

ASBESTOS SURVEY ACKNOWLEDGMENT STATEMENT

Texas Asbestos Health Protection Rules (TAHPR) requires that an asbestos survey be conducted when non-residential buildings and apartment complexes larger than four-plexes are demolished or renovated. As the owner/operator of the renovation/demolition site, I understand that it is my responsibility to have this asbestos survey conducted in accordance with Texas Asbestos Health Protection Rules (TAHPR) and the National Emission Standards for Hazardous Air Pollutants (NESHAP) and, if testing positive, send written notification to the Texas Department of State Health Services, <https://www.dshs.state.tx.us/asbestos/>, 10 business days prior to work commencing and prior to permit issuance by the City of Glen Rose.

3. I, _____, hereby certify that an asbestos survey has been done in accordance with the Texas asbestos Health Protection Rules (TAHPR) and the National Emissions Standards for hazardous Air Pollutants (NESHAP) for the area(s) being renovated and/or demolished.

I, the undersigned, hereby swear or affirm that the information provided in this application is true and correct to the best of my knowledge and is an accurate reflection of my intentions for the above structure and/or property. I understand that any omission or incorrect information herein will render this application and any permit obtained invalid.

As owner(s) of the property described in this application, I/we hereby authorized the Applicant listed on this application to act on my/our behalf during the processing and presentation of this request. They shall be the principal contact with the City in processing this application.

Signature of Applicant: _____ **Date:** _____
(if different from owner)

Owner Name: _____

Signature of Owner: _____ **Date:** _____

Sworn and subscribed before me this _____ day of _____, 20__

Signature of Public Notary

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Dollar Valuation (Labor and Materials)

Commercial Permit Cost

Value \$1.00 to \$500.00, flat fee	\$26.00
Value \$501.00 to \$2,000.00 minimum	\$26.00 + \$3.00 for each \$100.00, or fraction thereof above \$500.00
Value \$2,001.00 to \$25,000.00 minimum	\$76.00 + \$15.00 for each \$1,000.00, or fraction thereof above \$2,000.00
Value \$25,001.00 to \$50,000.00 minimum	\$430.00 + \$11.00 for each \$1,000.00, or fraction thereof above \$25,000.00
Value \$50,001.00 to \$100,000.00 minimum	\$710.00 + \$8.00 for each \$1,000.00, or fraction thereof above \$50,000.00
Value \$100,001.00 to \$500,000.00 minimum	\$1,100.00 + \$6.00 for each \$1,000.00, or fraction thereof above \$100,000.00
Value \$500,001.00 to \$1,000,000.00 minimum	\$3,700.00 + \$5.00 for each \$1,000.00, or fraction thereof above \$500,000.00
Value \$1,000,001.00 and up minimum	\$6,300.00 + \$4.00 for each \$1,000.00, or fraction thereof above \$1,000,000.00

- **Commercial Plan Review Fee: 25% of the cost of the permit**

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATION OR AIR CONDITIONING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 (SIX) MONTHS AT ANY TIME AFTER WORK IS COMMENCED. 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 provisions of any other state or local law regulating construction or the performance of construction.

Applicant is: Owner Contractor Tenant Developer Architect Engineer

Applicants Name: _____ **Phone:** _____

Applicant Signature: _____ **Date:** _____

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RESIDENTIAL BUILDING PERMIT APPLICATION

<u>Residential Building Construction</u>			
<input type="checkbox"/> Single – Family Dwelling	<input type="checkbox"/> Two – Family Dwelling	<input type="checkbox"/> Garage	<input type="checkbox"/> Accessory Building

<u>JOB SITE INFORMATION</u>			
Address _____	City _____	State _____	Zip Code _____

<u>Property Owner / Tenant / Occupant</u>	<u>Contractor</u>
Name _____	Name _____
Address _____	Address _____
City _____	City _____
State _____	State _____
Zip _____	Zip _____
Phone # _____	Phone # _____
Email _____	Email _____

<u>Application Information</u>			
<input type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Remodel	<input type="checkbox"/> Repair
Job Valuation: \$ _____			
Zoning: _____	Job Sq Ft: _____	No. of stories: _____	
Attached Site Plan: <input type="checkbox"/>		2 Sets of COMPLETED paper plans <input type="checkbox"/>	
Attached Certified Copy of most recent Plat: <input type="checkbox"/>			

<u>Job Site Contractors</u>	
General Contractor: _____	Phone: _____
Electrical Contractor: _____	Phone: _____
Plumbing Contractor: _____	Phone: _____
Mechanical Contractor: _____	Phone: _____

Flood Plain Information

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Residential Building Fees

Residential Single – Two Family Dwelling

\$0.65 / sq ft - \$108.00 minimum for remodels and additions and a \$541.00 minimum for new construction.

Accessory Buildings

Accessory Building Plan Review - \$25.00 per structure

200 sq ft or less..... \$25.00

201 sq ft or larger.....\$50.00 + \$0.03 / Sq ft

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ELECTRICAL PERMIT APPLICATION

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<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>

<u>Property Owner / Tenant / Occupant</u>				<u>Contractor</u>			
<u>Name</u>				<u>Name</u>			
<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
<u>Phone #</u>				<u>Phone #</u>			
<u>Email</u>				<u>Email</u>			

<u>Job Information</u>		
<u>Type of Construction</u>	<u>Job Valuation:</u> _____	<u>Job Sq Ft:</u> _____
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<u>Amps:</u> _____	

<p><u>Residential New Construction</u> <input type="checkbox"/></p> <p>Permit application fee.....\$35.00</p> <p>0000-2000.....\$125.00</p> <p>2001-3000.....\$150.00</p> <p>3001-4000.....\$200.00</p> <p>4001-5000.....\$250.00</p> <p>5001-6000.....\$300.00</p> <p>6001-7000.....\$350.00</p> <p><u>Commercial New Construction</u> <input type="checkbox"/></p> <p>Permit application fee.....\$35.00</p> <p>0 to 1,000 sq. ft. \$35.00 + Per sq. ft. \$0.10</p> <p>1,001 sq. ft. to 10,000 sq. ft. \$45.00 + Per sq. ft..... \$0.07</p> <p>10,001 sq. ft. to 50,000 sq. ft. \$80.00 + Per sq. ft. \$0.06</p> <p>50,001 sq. ft. or greater \$375.00 + Per sq. ft. \$0.04</p>	<p><u>Addition</u> <input type="checkbox"/> <u>Remodel</u> <input type="checkbox"/> <u>Repair</u> <input type="checkbox"/></p> <p><u>Residential/commercial add on or remodel:</u></p> <p>Permit Application Fee.....\$35.00</p> <p>Each outlet.....\$3.00</p> <p>Services per amp.....\$0.20</p> <p>Feeders per amp.....\$0.20</p> <p>Branch circuits each.....\$5.00</p> <p>First 500 sq. ft.....\$40.00</p> <p>After 500 sq. ft.....\$0.08 per sq. ft.</p> <p><u>Miscellaneous fees:</u></p> <p>Temporary pole.....\$25.00</p> <p>Temporary power on.....\$25.00</p> <p>Inspection for service on (meter pulled by TXU).....\$25.00</p> <p>Pools/spas/hot tubs.....\$50.00</p> <p>Electrical for which no fee has been established, (amount of contract):.....Valuation table</p>
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Applicants Name: _____ **Phone:** _____

Applicant Signature: _____ **Date:** _____

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PLUMBING PERMIT APPLICATION

<u>JOB SITE INFORMATION</u>			
Address	City	State	Zip Code

<u>Property Owner / Tenant / Occupant</u>				<u>Contractor</u>			
Name				Name			
Address	City	State	Zip	Address	City	State	Zip
Phone #				Phone #			
Email				Email			

<u>Job Information</u>	
Type of Construction	Job Valuation: _____
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Job Sq Ft: _____

<u>Residential New Construction</u> <input type="checkbox"/>	<u>Commercial New Construction</u>
Permit Application Fee.....\$35.00	Permit Application Fee.....\$35.00
0 – 2000 sq. ft <input type="checkbox"/> \$175.00	Plus { Each plumbing fixture\$5.00
2001 – 3000 sq. ft <input type="checkbox"/> \$195.00	Plus { Each water line Service repair/replace.....\$10.00
3001 – 4000 sq. ft <input type="checkbox"/> \$225.00	Plus { Each sewer line repair/replace.....\$10.00
4001 – 5000 sq. ft <input type="checkbox"/> \$275.00	Plus { Each grease Interceptor / grease Trap.....\$40.00
5001 – 6000 sq. ft <input type="checkbox"/> \$325.00	Plus { Each Rainwater system.....\$8.00
Apartment Construction	Plus { Each Backflow protection.....\$50.00
Permit Application Fee.....\$35.00	Plus { Each water heater and/or vent.....\$20.00
1 bedroom efficiency, each.....\$35.00	Plus { Lawn Sprinkler (backflow) separate permit.....\$50.00
All other apartment units, each..\$45.00	Plus { Annual backflow inspection.....\$55.00
Sewer service for each building..\$20.00	
Water service for each building..\$20.00	

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Applicants Name: _____ **Phone:** _____

Applicant Signature: _____ **Date:** _____

Addition **Remodel** **Repair**

Residential / Commercial Add-on / Remodel / Misc.

- (1) Permit Application fee.....\$35.00
- (2) Two hose bibs.....\$16.00
- (3) Sink \$8.00
- (4) Washer box \$8.00
- (5) Lavatory \$8.00
- (6) Stool \$8.00
- (7) Shower/tub shower \$8.00
- (8) Water heater \$20.00
- (9) Water service \$20.00
- (10) Yard service \$20.00
- (11) For each wet bar add \$8.00
- (12) For each extra shower or tub add \$8.00
- (13) For each extra lavatory add \$8.00
- (14) Plumbing water piping repair \$30.00
- (15) Plumbing drain or vent repair \$30.00
- (16) Sewer main, each \$20.00
- (17) Temporary gas service (includes gas pressure test) \$15.00
- (18) Lawn sprinkler system/backflow preventer \$50.00
- (19) Mobile home space (each) \$30.00
- (20) Recreational vehicle space (each) \$30.00
- (21) Sewer vent (each) \$20.00
- (22) Manhole (each) \$20.00
- (23) Reinspection fee (after first reinspection) \$30.00
- (24) After hours inspection fee, per hour
 (Any inspection outside normal business hours, minimum 2 hours) \$75.00
- (25) Work in progress without securing a permit added to permit fee, double permit fee,
 minimum \$50.00
- (26) Plumbing for which no fee has been established, (amount of contract): Valuation table
 For use of outside consultants for plan checking and inspections, or both: Actual cost incurred

PERMIT TOTAL: _____

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MECHANICAL PERMIT APPLICATION

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<u>Property Owner / Tenant / Occupant</u>				<u>Contractor</u>			
Name				Name			
Address	City	State	Zip	Address	City	State	Zip
Phone #				Phone #			
Email				Email			

<u>Job Information</u>	
Type of Construction	Job Valuation: _____
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Job Sq Ft: _____

<p><u>New Construction</u> <input type="checkbox"/></p> <p>Permit application fee.....\$35.00 Residential.....\$75.00 each</p> <p><u>Apartment construction:</u> a. Cost per unit 1 inside.....\$25.00 b. Cost per unit 1 outside...\$25.00</p> <p><u>Commercial new construction</u> (per sq. ft.) x\$0.08</p>	<p><u>Addition</u> <input type="checkbox"/> <u>Remodel</u> <input type="checkbox"/> <u>Repair</u> <input type="checkbox"/></p> <ol style="list-style-type: none"> 1. Alteration or repair of residential..... \$30.00 each 2. Commercial; Repairs or change-out of unit..... \$45.00 each 3. Exhaust fans..... \$9.00 each 4. Minimum permit fee.....\$25.00 5. Vent hoods (no fire suppression)\$25.00 6. Vent hoods (fire suppression)\$35.00 7. Filtration system (beauty salon) \$25.00 8. After hours inspection fee per hour (any inspection after normal business hours, minimum 2 hours)\$75.00 9. Work in progress without securing a permit (added to permit fee), double permit fee, minimum..... \$50.00 10. Equipment regulated by code with no fee schedule listed: Valuation table
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NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 (SIX) MONTHS AT ANY TIME AFTER WORK IS COMMENCED. 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 provisions of any other state or local law regulating construction or the performance of construction.

Applicant is: Owner Contractor Tenant Developer Architect Engineer

Applicants Name: _____ **Phone:** _____

Applicant Signature: _____ **Date:** _____

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