

CITY OF KIRBY
112 Bauman
Kirby, Tx. 78219

Phone: 210-661-2100
Fax: 210-661-4525

BUILDING INSPECTIONS DEPARTMENT
BUILDING PERMIT APPLICATION

(Please complete and be specific. Failure to do so will cause a delay in the issuance of a permit)

THIS APPLICATION DOES NOT CONSTITUTE PERMISSION TO BEGIN WORK. IF WORK IS STARTED WITHOUT A PERMIT, AN INVESTIGATION FEE WILL BE ASSESSED IN ADDITION TO THE PERMIT FEE. THE INVESTIGATION FEE SHALL BE EQUAL TO THE PERMIT FEE.

ADDRESS/LOCATION OF PROPERTY _____
LOT No. _____ BLK. _____ CB _____ ZONE _____ LOT SIZE _____ AGE _____

An application is hereby made for a permit to cover the following described work to be done or future use of building.

Contact Building Inspector at (210)661-2100 to determine if plans are required. (ALL NEW CONSTRUCTION REQUIRES TWO SETS OF COMPLETE PLANS)

No. Rooms _____ No. Baths _____ No. Stories _____ Carport _____ Fence _____ Patio Slab Cover _____
Lot Size _____ Total Sq. Ft. Floor Area _____
Garage Type: Single _____ Dbl _____ Attached _____ Detached _____

PROPERTY OWNER _____ ADDRESS: _____

PROPERTY OWNERS PHONE NUMBER _____

CONTRACTOR _____ ADDRESS: _____

TOTAL VALUE OF CONSTRUCTION PLUS ALL FINISH WORK \$ _____

*For Residential, Building, Mechanical, Plumbing, Elevators, Fire Extinguisher Systems and other permanent work, see the International Codes published by The International Code Council. For electrical see the NEC published by NFPA.
SEPARATE INDIVIDUAL PERMITS WILL BE REQUIRED BY THE VARIOUS TRADES.

THE APPLICANT SHALL BE RESPONSIBLE FOR INFORMING ALL PARTIES INVOLVED, INCLUDING THE DESIGN PROFESSIONAL OF ANY CODE NON-COMPLIANCE AS NOTED ON PLANS, INSPECTION REPORTS OR ANY OTHER DOCUMENTS ISSUED BY THE BUILDING OFFICIAL/INSPECTOR.

I hereby acknowledge that I have read this application and state that the above is correct and I agree to comply with all City of Kirby ordinances, State laws and the International Codes as published by ICC regulating building construction.

AUTHORIZED SIGNATURE _____ (PRINT) _____

COMPANY: _____ ADDRESS: _____ PHONE: _____

DATE OF APPLICATION: _____ DATE PERMIT ISSUED _____

PERMIT FEE \$ _____ PLAN REVIEW FEE \$ _____ INVESTIGATION FEE \$ _____

INSPECTION FEE \$ _____

Approved to issue permit _____ Building Official _____

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BUILDING INSPECTIONS DEPARTMENT
MECHANICAL PERMIT APPLICATION

(Please complete and be specific. Failure to do so will cause a delay in the issuance of a permit)

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ADDRESS/LOCATION OF PROPERTY _____

LOT No. _____ BLK. _____ CB _____ ZONE _____ LOT SIZE _____ AGE _____

An application is hereby made for a permit to cover the following work:

SEER OF UNIT(S) _____ **TON** _____ **BRAND** _____

New structure _____ Residential _____ Commercial _____ Remodel _____ Addition _____

No. Rooms _____ No. Baths _____ No. Stories _____ Oil _____ Nat. Gas _____ LPG _____

Electric or Gas Furnace _____ Condensing Unit _____ Cooling Coil _____ Air Handler _____

No. Duct Outlets _____ Roof Top Units _____ Fire Dampers _____ Wall Mounted Units _____

Walk in Cooler _____ Reach in Cooler _____ Exhaust Fan _____ Range Hood _____

Describe work to be performed _____

Explain the current and/or future use of building or space _____

PROPERTY OWNER _____ ADDRESS: _____

PROPERTY OWNER PHONE NUMBER _____

CONTRACTOR _____ ADDRESS: _____

STATE LICENSE NO. _____

TOTAL VALUE OF CONSTRUCTION PLUS ALL FINISH WORK \$ _____

*All mechanical work must comply with the 2015 edition of the International Mechanical Code as published by the International Code Council.

THE APPLICANT SHALL BE RESPONSIBLE FOR INFORMING ALL PARTIES INVOLVED, INCLUDING THE DESIGN PROFESSIONAL OF ANY CODE NON-COMPLIANCE AS NOTED ON PLANS, INSPECTION REPORTS OR ANY OTHER DOCUMENTS ISSUED BY THE BUILDING OFFICIAL/INSPECTOR.

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AUTHORIZED SIGNATURE _____ (PRINT) _____

COMPANY: _____ ADDRESS: _____ PHONE: _____

DATE OF APPLICATION: _____ DATE PERMIT ISSUED _____

PERMIT FEE \$ _____ PLAN REVIEW FEE \$ _____ INVESTIGATION FEE \$ _____

INSPECTION FEE \$ _____

Approved to issue permit _____ Building Official _____

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BUILDING INSPECTIONS DEPARTMENT
ELECTRICAL PERMIT APPLICATION

(Please complete and be specific. Failure to do so will cause a delay in the issuance of a permit)
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ADDRESS/LOCATION OF PROPERTY _____
LOT No. _____ BLK. _____ CB _____ ZONE _____ LOT SIZE _____ AGE _____
An application is hereby made for a permit to cover the following work:
New structure _____ Residential _____ Commercial _____ Remodel _____ Addition _____
Alteration _____ Repair _____ Int. Comp. _____ C of O _____ TML _____ No. Rooms _____
No. Baths _____ No. Stories _____ No. Switches _____ No. GFCI _____ No. Outside Outlets _____
No. Inside Outlets _____ No. Lighting Fixtures _____ Elec. Range _____ Elec. Dryer _____
Garbage Disp. _____ Dish Washer _____ Elec. Furnace _____ Elec. Water heater _____

Describe work to be performed _____

Explain the current and/or future use of building or space _____

PROPERTY OWNER _____ ADDRESS: _____
PROPERTY OWNER PHONE NUMBER _____
CONTRACTOR _____ ADDRESS: _____
STATE LICENSE NO. _____

TOTAL VALUE OF CONSTRUCTION PLUS ALL FINISH WORK \$ _____

*All electrical work must comply with the 2014 edition of the National Electrical Code as published by (NFPA).

THE APPLICANT SHALL BE RESPONSIBLE FOR INFORMING ALL PARTIES INVOLVED, INCLUDING THE DESIGN PROFESSIONAL OF ANY CODE NON-COMPLIANCE AS NOTED ON PLANS, INSPECTION REPORTS OR ANY OTHER DOCUMENTS ISSUED BY THE BUILDING OFFICIAL/INSPECTOR.

I hereby acknowledge that I have read this application and state that the above is correct and I agree to comply with all City of Kirby ordinances, State laws and the International Codes as published by ICC regulating building construction.

AUTHORIZED SIGNATURE _____ (PRINT) _____
COMPANY: _____ ADDRESS: _____ PHONE: _____
DATE OF APPLICATION: _____ DATE PERMIT ISSUED _____

PERMIT FEE \$ _____ PLAN REVIEW FEE \$ _____ INVESTIGATION FEE \$ _____
INSPECTION FEE \$ _____

Approved to issue permit _____ Building Official _____

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BUILDING INSPECTIONS DEPARTMENT
PLUMBING PERMIT APPLICATION

(Please complete and be specific. Failure to do so will cause a delay in the issuance of a permit)

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ADDRESS/LOCATION OF PROPERTY _____

LOT No. _____ BLK. _____ CB _____ ZONE _____ LOT SIZE _____ AGE _____

An application is hereby made for a permit to cover the following work:

New structure _____ Residential _____ Commercial _____ Remodel _____ Addition _____

No. Baths _____ No. Toilets _____ No. Bathtubs _____ No. Lavatories(wash basins) _____

No. Showers _____ Kitchen sink _____ Dishwasher _____ Clothes Washer _____ Laundry tray _____

Drinking fountain _____ Gas (Y) (N) Floor sink or drain _____ Slop sink _____ Urinal _____

Lawn Sprink System _____ Sewer _____ Water Service _____ Water heater _____ (gas) (electric)

Describe work to be performed _____

Explain the current and/or future use of building or space _____

NOTICE: APPLICANT MUST SUBMIT A LIST OF FIXTURES WITH TYPE OF MATERIALS TO BE USED SUCH AS PIPE, BRAND NAMES, ETC. A DIAGRAM OF ROUGH-IN WORK TO BE DONE MUST ALSO BE SUBMITTED.

PROPERTY OWNER _____ ADDRESS: _____

PROPERTY OWNERS PHONE NUMBER _____

CONTRACTOR _____ ADDRESS: _____

STATE LICENSE NO. _____

TOTAL VALUE OF CONSTRUCTION PLUS ALL FINISH WORK \$ _____

*All plumbing work must comply with the 2015 edition of the International Plumbing Code as published by the International Code Council.

THE APPLICANT SHALL BE RESPONSIBLE FOR INFORMING ALL PARTIES INVOLVED, INCLUDING THE DESIGN PROFESSIONAL OF ANY CODE NON-COMPLIANCE AS NOTED ON PLANS, INSPECTION REPORTS OR ANY OTHER DOCUMENTS ISSUED BY THE BUILDING OFFICIAL/INSPECTOR.

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AUTHORIZED SIGNATURE _____ (PRINT) _____

COMPANY: _____ ADDRESS: _____ PHONE: _____

DATE OF APPLICATION: _____ DATE PERMIT ISSUED _____

PERMIT FEE \$ _____ PLAN REVIEW FEE \$ _____ INVESTIGATION FEE \$ _____

INSPECTION FEE \$ _____

Approved to issue permit _____ Building Official _____