



DATE: \_\_\_\_\_

CITY OF CISCO

PERMIT NUMBER: \_\_\_\_\_

## BUILDING PERMIT APPLICATION

### LOCATION OF WORK

Job Address	
Legal Description	
Owner	
Owner Address	
Owner Phone/Email	

### BUILDING USE

Use of Building	<input type="checkbox"/> Commercial <input type="checkbox"/> Residential
Class of Work	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Relocate <input type="checkbox"/> Demolition
Description of Work	
Value of Work	\$

### BUSINESS/TRADE INFORMATION

<b><u>Contractor</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
<b><u>Architect or Designer</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
<b><u>Engineer</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
<b><u>Plumber</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
<b><u>Electrician</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
<b><u>HVAC</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
<b><u>Additional Trades</u></b>		Phone	
Address		Fax	
City, State ZIP Code		E-mail	

## NOTICE

Separate permits are required for electrical, plumbing, gas, and mechanical work. There will also be additional fees for inspections of work. 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 1 year at any time after work is commenced. Revised construction plans must be submitted for city review and approval is required for any changes made after the City of Cisco issues a building permit.

## SIGNATURES

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.

Signature of Contractor		Signature of Owner	
Name and Title		Name and Title	
Date		Date	

**Please include a copy of plans and/or drawings with your permit application. Permits will not be approved without a plan review.**