



CITY OF CISCO

DATE:_____ PERMIT NUMBER:

ACCESSORY BUILDING PERMIT APPLICATION

The City of Cisco has adopted the 2015 International Building Code and the 2015 International Residential Code. All work will be expected to conform to the adopted codes.

<u>A survey of the property and plans/drawings are required to be submitted with the Accessory</u> <u>Building Permit Application</u>. Permits will not be approved without all required documents for <u>plan review</u>.

LOCATION OF WORK				
Job Address				
Legal Description				
Owner				
Owner Address				
Owner Phone/Email				

BUILDING USE							
Class of Work	🗆 New	Additio	n	□ Alteration	🗆 Repair	□ Relocate	□ Demolition
Decription of Work							
Value of Work	\$						
Will Accessory Building have Plumbing, Gas, Electical, or Mechanical?		Yes I		No			

TRADE INFORMATION

If Accessory Building will have plumbing, electricity, and/or HVAC, please provide the following trade information.

<u>Plumber</u>	Phone
Address	Fax
City, State ZIP Code	E-mail
Electrician	Phone
Address	Fax
City, State ZIP Code	E-mail
HVAC	Phone
Address	Fax
City, State ZIP Code	E-mail
Additional Trades	Phone
Address	Fax
City, State ZIP Code	E-mail

NOTICE

Separate permits are required for electical, 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 suspened 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 <u>any</u> 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

PLANS REVIEW

Building Plan Review: _

Plumbing Plan Review: _____

Mechanical Plan Review:

Electrical Plan Review: _____

REVIEWER'S NOTES