

Residential Building Permit Application



City of Nevada

EMAIL TO:
 cityclerk@cityofnevadatx.org
 citysecretary@cityofnevadatx.org

Phone: (972) 853-0027
 424 E. FM 6
 NEVADA, TX 75173

Building Permit Number: (Given after approval / payment) _____		Valuation: _____	
Project Address: _____		Total Square Feet: _____	
Lot: _____	Block: _____	Subdivision: _____	
Project Description:	NEW SFR <input type="checkbox"/>	SFR REMODEL/ADDITION <input type="checkbox"/>	SPECIFY OTHER: _____
	PLUMBING <input type="checkbox"/>	MECHANICAL <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>
	ACCESSORY BUILDING <input type="checkbox"/>	LAWN IRRIGATION <input type="checkbox"/>	DEMOLITION <input type="checkbox"/>
		SWIMMING POOL <input type="checkbox"/>	FENCE <input type="checkbox"/>
Description of Work: _____			
Living: _____	Garage: _____	Covered Porch: _____	Number of stories: _____

Owner: _____
Contact Person: _____
Address: _____
Phone Number: _____ Mobile Number: _____ Email: _____

General Contractor	1 Contact Person	Phone Number	Contractor License Number
	2 Contact Person	Email	
Mechanical Contractor	Contact Person	Phone Number	Contractor License Number
Electrical Contractor	Contact Person	Phone Number	Contractor License Number
Plumbing Contractor	Contact Person	Phone Number	Contractor License Number

A permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction/work is suspended or abandoned for a period of 180 days at any time after work is commenced. All permits require final inspection.
 *A separate permit is required for each residence, or building.

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 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 Applicant: _____ **Date:** _____

OFFICE USE ONLY:			
Approved by: _____		Date approved: _____	
New SFR Permit Fee: _____	Remodel Permit Fee: _____	Pool Permit Fee: _____	Total Fees: _____
Accessory Bldg Permit Fee: _____	Electrical Permit Fee: _____	Fence Permit Fee: _____	Issued Date: _____
Mechanical Permit Fee: _____	Plumbing Permit Fee: _____	Misc. Permit fee: _____	Issued By: _____

Please contact County Wide for inspections | phone: 940-521-0470 or email: inspections@cwistx.com