

CITY OF BEEVILLE
400 N. WASHINGTON
BEEVILLE, TX 78102
(361) 358-4641 OFFICE
(361) 362-9013 FAX



APPLICATION FOR PERMIT

APPLICATION FOR:

- | | | |
|-----------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Sign | <input type="checkbox"/> Demolition | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Other _____ | |

Contractor's Name: _____ Co. Name: _____

License Holder Name (If Applicable): _____ Email: _____

Type of License/License Number: _____ Contractor Phone: _____

Property Owner's Name: _____ Address: _____

Phone: _____ City/State/Zip: _____

Cell Phone: _____ Email: _____

Address of Project: _____

Description of Project: _____

Estimated Cost of Job: _____ Number of Squares (Roofing Only) _____

A site plan or copy of property survey showing setbacks and proposed detail is required for building, fence, sign, demolition and swimming pool permits.

Address numbers are required to be displayed on the building or project site and the permit displayed in a weather proof enclosure or window.

By signing this application, I warrant the information provided is true and correct to the best of my knowledge and that I have sufficient knowledge of City of Beeville codes, ordinances, State and Federal regulations. I further agree that all work will be done in full conformance with City of Beeville codes, ordinances, State and Federal regulations.

Signature of License Holder or Authorized Person

Date

Approved by

Date

Number of Inspections: _____