



CITY OF KINGSVILLE
Planning Department
Building Permit Application

Phone No: (361) 595-8019

Submit the **completed** form and an Inspector will be assigned to review your application and property before starting the following job.

DATE:	PERMIT# :	APPROVED BY:
JOB ADDRESS:		
OWNER'S NAME: LAST:		FIRST: M:
MAILING ADDRESS:		PHONE NO:
CITY:	STATE:	ZIP CODE:
CONTRACTOR: *		PHONE NO:
DESCRIPTION OF WORK: <input type="checkbox"/> New <input type="checkbox"/> Remodel <div style="text-align: center;">Square Feet</div>		
VALUATION OF WORK: \$		PERMIT FEE: \$
<p>* Contractor must be registered with the City of Kingsville.</p> <p>NOTICE</p> <p>SEPARATE PERMITS ARE REQUIRED FOR, ELECTRICAL, PLUMBING, HEATING, VENTILATING OR AIR-CONDITIONING; ALL CONTRACTORS ARE RESPONSIBLE FOR DISPOSING OF THEIR OWN DEBRIS AT THE SANITARY LANDFILL ON CR 2130. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN SIX MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.</p>		
SIGNATURE _____		DATE _____
<p>HOMEOWNER APPLICANTS ONLY: I HEREBY CERTIFY THAT I OWN AND AM NOW LIVING AT THE DWELLING FOR WHICH THIS PERMIT IS BEING ISSUED, AND THAT THE WORK IS BEING PERFORMED BY ME OR A MEMBER OF MY IMMEDIATE FAMILY. I UNDERSTAND THAT, FOR THE PURPOSES OF THIS APPLICATION, MY IMMEDIATE FAMILY IS LIMITED TO MY PARENT, CHILD OR CHILD'S SPOUSE.</p> <p align="center">INITIAL HERE _____</p>		

FOR OFFICE USE ONLY

CURRENT ZONING FOR LOCATION:	IS ZONING APPROPRIATE FOR USE REQUIRED: YES/NO
SETBACK REQUIREMENTS VERIFIED: YES/NO	ARE SETBACK REQUIREMENTS MET: YES/NO
IS THE PROPERTY IN THE AICUZ/CCLUA**: YES/NO	DOES IT COMPLY WITH THE AICUZ/CCLUA**: YES/NO
PROPERTY EASEMENT VERIFIED: YES/NO	DIMENTION OF EASEMENT:
AICUZ/CCLUA** DEED NOTIFICATION: YES/NO	** CONTROLLED COMPATIBLE LAND USE AREA (JAZB)

Show NORTH arrow on (PLOT PLAN)

LOT SIZE:

1. Width of lot_____ 2. Length of lot_____.

BUILDING SETBACKS

1. Front_____ 2. Right Side_____

3. Left Side_____ 4. Back_____

SHOW_____FOR EXISTING SHOW_____FOR ALTERATION

