

# City of Ovilla

Phone: (972) 617-7262

105 S. Cockrell Hill Rd.

Fax: (972) 515-3221

Ovilla, Texas 75154

## Commercial Building Permit Application

Building Permit Number:					Valuation:		
Project Name:					Square Foot:		
Project Address:							
Project Description:	New <input type="checkbox"/>	C/O <input type="checkbox"/>	Sign <input type="checkbox"/>	Irrigation <input type="checkbox"/>			
	Fence <input type="checkbox"/>	Flatwork <input type="checkbox"/>	Electrical <input type="checkbox"/>	Other <input type="checkbox"/>			
Scope of Work:							

Owner Information:			
Name:			
Address:			
Phone Number:			
	Email:		

Engineer	Contact Person	Phone Number	Fax Number
Architect	Contact Person	Phone Number	Fax Number
General Contractor	Contact Person	Phone Number	Contractor License Number
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 certificate of occupancy must be issued before any building is occupied.***

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:	
City Manager:		Date approved:	

Plan Review Fee: \_\_\_\_\_

Permit Fees: \_\_\_\_\_

Building Permit Fee: \_\_\_\_\_

REC # \_\_\_\_\_

Issued Date: \_\_\_\_\_

Capital Recovery Fee: \_\_\_\_\_

Issued By: \_\_\_\_\_

Fire Meter: \_\_\_\_\_

Water Meter Cost: \_\_\_\_\_

Water Impact: \_\_\_\_\_

Sewer Connection Fee: \_\_\_\_\_

BV Project # \_\_\_\_\_

Sewer Impact: \_\_\_\_\_

Fire Fee: \_\_\_\_\_