

PLUMBING PERMIT APPLICATION

PERMIT NO. _____

Please complete applicable portions for the type(s) of work being done.

PROJECT ADDRESS:			
PROPERTY DESCRIPTION:	LEGAL DESCRIPTION (Subdivision, Block & Lot)	PARCEL ID	ZONING
			<input type="checkbox"/> RS - 1 RESIDENTIAL <input type="checkbox"/> RS - 2 RESIDENTIAL <input type="checkbox"/> GR - GENERAL RESIDENTIAL <input type="checkbox"/> OTHER _
OWNER:		NAME:	EMAIL:
TENANT (If applicable):	ADDRESS:	TELEPHONE:	
COMPANY NAME & CONTACT PERSON:		REGISTRATION NUMBER:	
PLUMBING CONTRACTOR:	ADDRESS / TELEPHONE	EMAIL REQUIRED	
CLASS OF WORK*: (Check all that apply)	<input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> REMODEL <input type="checkbox"/> REPAIR <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> WELL <input type="checkbox"/> RESIDENCE <input type="checkbox"/> OTHER _		
DESCRIPTION OF WORK:			
NOTICE: <ul style="list-style-type: none"> All plumbing work must be performed by a licensed plumber unless (1) The applicant owns the residence, (2) The applicant has lived at the residence at least six months, and (3) The applicant provides a copy of their Homestead Exemption. All plumbing work must be inspected by an inspector authorized by the City of Hamilton. 			

I hereby certify that I have read and examined this application and know the same to be true and correct. I certify that the project/work described herein will be built/performed in accordance with the plans and specifications submitted at the time of application. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any local or state law regulating construction or the performance of construction. A PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED. ALL PERMITS REQUIRE FINAL INSPECTION. A Certificate of Occupancy must be issued before any building is occupied. Permit Application must be presented with applicant's and contractor's original signatures. All submittals sent by mail or delivered by courier should be presented to the attention of the Building Official at the City of Hamilton, 200 East Main, Hamilton, Texas 76531.

 Applicant's Signature (Owner or Tenant)

 Date

 Applicant Name (Please Print Legibly)

 Plumbing Contractor's Signature

 Date

 Plumbing Contractor's Name (Please Print Legibly)

OFFICE USE ONLY:

PERMIT NO. _____

APPROVED:	DATE:
Plumbing Permit Fee:	
Other (Specify):	

Total Fees: _____

Receipt #: _____

Issued Date: _____

Issued By: _____