



City of Jarrell
 161 Town Center Blvd.
 Jarrell, Texas 76537
 Fax (512) 746-4593
www.cityofjarrell.com

Project Name: _____

Submittal Date: _____

Application Type: _____

MASTER APPLICATION FORM
APPLICATION & CHECKLIST

INSTRUCTIONS:

- Fill out the following application prior to submission. Please include any plans for the project.
- Be sure to indicate which type of application at the top of the page.
- Use the most current application from the City's website (www.cityofjarrell.com) or at City Hall.
- City ordinances can be obtained at City Hall or by emailing the City Planner at j.moyer@cityofjarrell.com.
- If there are any questions reach out to the Planning Department at (512)-746-4593.

TYPE:

Permits:	Subdivision Related:	Development Related:
<ul style="list-style-type: none"> <input type="radio"/> Plumbing <input type="radio"/> Mechanical <input type="radio"/> Electrical <input type="radio"/> Septic <input type="radio"/> Irrigation (Backflow Test will be required) <input type="radio"/> Pool (Above or In-Ground) <input type="radio"/> Sign <input type="radio"/> Demolition <input type="radio"/> Temporary Use <input type="radio"/> Irrigation <input type="radio"/> New Construction <input type="radio"/> Remodel 	<ul style="list-style-type: none"> <input type="radio"/> Administrative Exception <input type="radio"/> Construction Plan <input type="radio"/> Vacating Plat <input type="radio"/> Construction Plan 	<ul style="list-style-type: none"> <input type="radio"/> Master Sign Plan <input type="radio"/> Site Development Plans <input type="radio"/> Certification of Design Compliance <input type="radio"/> Appeal of Administrative Decision

CONTACT INFORMATION:

CONTACT PERSON:			PHONE:
ADDRESS:			CELL:
CITY:	STATE:	ZIP:	EMAIL:
PROPERTY OWNER(S), IF DIFFERENT:			PHONE:
ADDRESS:			CELL:
CITY:	STATE:	ZIP:	EMAIL:

PROJECT INFORMATION:

LOT, BLOCK, OR PARCEL:	ZONING:	SQ. FT.: 1 ST FLOOR: 2 ND FLOOR: GARAGE: OTHER:
CONTRACTOR/INSPECTOR/LICENSE NUMBER (please list all included in the project and indicate their profession i.e. Plumbing, Electrical,):		
IRRIGATION/GAS SERVICE PROVIDER:		

SIGN APPLICATION:

CITY LIMITS OR ETJ?	TEMPORARY OR PERMENANT?	ON OR OFF PREMISE SIGN?
SIGN TYPE: FREESTANDING BUILDING MICELLANEOUS		
<p>INCLUDE THE FOLLOWING:</p> <ul style="list-style-type: none"> ▪ Attach a description of the sign (to include number of signs, dimensions: height, base, square footage of sign face, pole structure, total area square footage, lighting, etc.). ▪ Attach a plat showing where sign will be located. ▪ Ensure the sign meets or exceeds the 2000 International Building Codes for wind load, Chapter 16, Section 1609. 		
COMPANY INSTALLING THE SIGN:	CONTACT INFORMATION:	

