



City of Jarrell  
 161 Town Center Blvd.  
 Jarrell, Texas 76537  
 Fax (512) 746-4593  
[www.cityofjarrell.com](http://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](http://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](mailto: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:
<input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical <input type="checkbox"/> Irrigation (Backflow Test will be required) <input type="checkbox"/> Pool (Above or In-Ground) <input type="checkbox"/> Sign <input type="checkbox"/> Demolition <input type="checkbox"/> Temporary Use <input type="checkbox"/> Irrigation <input type="checkbox"/> New Construction <input type="checkbox"/> Remodel <input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Administrative Exception <input type="checkbox"/> Construction Plan <input type="checkbox"/> Vacating Plat <input type="checkbox"/> Construction Plan	<input type="checkbox"/> Master Sign Plan <input type="checkbox"/> Site Development Plans <input type="checkbox"/> Certification of Design Compliance <input type="checkbox"/> 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 <sup>ST</sup> FLOOR: 2 <sup>ND</sup> 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		
INCLUDE THE FOLLOWING: <ul style="list-style-type: none"><li>▪ 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.).</li><li>▪ Attach a plat showing where sign will be located.</li><li>▪ Ensure the sign meets or exceeds the 2000 International Building Codes for wind load, Chapter 16, Section 1609.</li></ul>		
COMPANY INSTALLING THE SIGN:	CONTACT INFORMATION:	

