



Development Services
 P.O. Box 369 (Mailing)
 303 E. Pecan St. (Physical)
 Johnson City, Texas 78636
 (830) 868-7111, Ext. 4
 (830) 868-7718 (Fax)

Application Date: _____

PERMIT APPLICATION FOR FOUNDATION REPAIR

Job Address: _____ Date: _____

Legal Description: _____

Subdivision: _____ Block: _____ Lot: _____ Section: _____

Owner of Property Mail Address: _____

City, State, Zip: _____ Phone: _____

General Contractor: _____

Contractor's Mail Address: _____

City, State, Zip: _____ Phone: _____

General Contractor's Email Address: _____

NOTE: PLEASE ATTACH A COPY OF YOUR FOUNDATION CONTRACTOR'S LICENSE AND CERTIFICATE OF INSURANCE.

Scope of Work: _____

Type of Construction: _____

Existing Single Family Residence: _____

Additional Notes: _____

Construction Valuation (if commercial): \$ _____

NOTICE: 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 HEREIN 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 Contractor or Authorized Agent _____

Printed Name _____

Date _____

Office Use Only: