



P.O. Box 369 (Mail)
 303 E. Pecan Dr. (Physical)
 Johnson City, TX 78636
 830.868.7111 (Phone)
 830.868.7718 (Fax)

Application Date: _____

LANDSCAPING PERMIT APPLICATION

*Commercial and Residential
 Subdivision Landscape Requirements*

Section I. Project Information

Project Address/Location: _____ Outside City Limits: Y N

Project Name/Subdivision: _____

Approximate Project Construction Date: ____/____/20____

Section II. Project Contact Information

Contact Person: _____ Phone #: _____ Fax: _____

Email Address: _____ Cell #: _____

Business Address: _____

Property Owner: _____ Phone #: _____

Owner Address: _____

Section III. Contractor's Information

Landscape Architect: _____ Phone #: _____ Fax: _____

Email Address: _____ Cell #: _____

Irrigation Designer: _____ Phone #: _____ Fax: _____

Email Address: _____ Cell #: _____

Landscape Contractor: _____ Phone #: _____ Fax: _____

Email Address: _____ Cell #: _____

Irrigation Contractor: _____ Phone #: _____ Fax: _____

Email Address: _____ Cell #: _____

Note: No permit shall be issued until the City Arborist has reviewed and approved the plans.

Note: Prior to the issuance of a Certificate of Occupancy for the project, the City Arborist shall inspect each site and certify that the site meets the requirements of City Code. The property owner must have approved landscape / irrigation plans on site for inspection. Do not call for final inspection(s) until all items are installed per plan.

<u>Office Use Only:</u>	
City Arborist _____	Date _____
Approved: _____	Disapproved: _____
COMMENTS: _____	
