

CITY OF TATUM

680 Crystal Farms Rd
P. O. Box 1105
Tatum, Texas 75691
903 803-3580 – Phone
903 803-3590 – Fax

PERMIT NO. _____

ISSUE DATE: _____

EXPIRATION DATE _____

BUILDING PERMIT

Project Address: _____

PROPERTY OWNER

Property Owner: _____ Phone No: _____

Address: _____ City: _____ State: _____ Zip Code: _____

CONTRACTOR INFORMATION

Contractor's Name: _____ Phone No: _____

Company Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Work to be performed: _____

Total Under Roof Square Footage _____ Distance of Nearest Fire Hydrant _____

Description of Work/ Job		
Classification: <input type="checkbox"/> New <input type="checkbox"/> Remodel		Valuation of work _____
Proposed Electricity	Proposed Water	Proposed Sewer
Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Structure Type: <input type="checkbox"/> Concrete* <input type="checkbox"/> Metal * <input type="checkbox"/> Masonry/ Steel * <input type="checkbox"/> Ordinary Frame <input type="checkbox"/> Heavy timber		
Foundation Type: <input type="checkbox"/> Pier/Beam <input type="checkbox"/> Slab		
Roofing Material: <input type="checkbox"/> Composite <input type="checkbox"/> Wood <input type="checkbox"/> Metal		
Sub Contractors: Electric _____ Plumbing _____		
Mechanical _____ Gas/Sprinkler _____		

As permit applicant/holder, I understand it is my responsibility to be familiar with all ordinances and regulations of the City of Tatum relating to building and zoning. I agree to abide by all regulations and any lawful decisions of the Building Official. I shall not alter or change the accompany plans or specification of this permit without the approval of the Building Official. Any such violation or change made by me or my agent can constitute sufficient grounds for revocation of such permit.

I further understand that I am responsible for obtaining all required inspections, that a Certificate of Occupancy must be obtained prior to occupancy of the building or structure, and that I will not build or structure, and that I will not obstruct on any utility easement.

APPLICANT NAME: _____

SIGNATURE: _____

DATE: _____

FOR OFFICE USE ONLY

ENTERED BY: _____

SIGNATURE: _____

DATE ISSUED: _____