CITY OF HEATH

200 Laurence Dr Heath TX 75032
972-961-4883 Ph 469-273-4015 Fax

Application for Residential Remodel, Additions, Auxilliary Buildings, Patio Covers, & Outdoor Amenities

Permit #_____

Project Address_____

Subdivision _____ Lot_____ Block_____

Owner_____ Telephone _____

Owner Address_____
street city state zip

Contractor _____ Contact Name_____

Email_____Cell #_____

LISTED SUB CONTRACTORS

Electrical Contractor_____Email_____Phone # _____

Plumbing Contractor _____ Email_____Phone # _____

Mechanical Contractor_____ Email_____Phone # _____

Foundation Contractor_____ Email_____Phone # _____

Foundation Engineer _____ Email_____

Description of Work _____

Contract or Sale price $_____Sq. ft. A/C _____Sq. ft. other_____Total Under Roof _____

I am the owner or the duly authorized agent of the above property. I agree to comply with all codes and Ordinances of The City of Heath. This permit is issued on the basis of information furnished in this application and on any submitted plans, and is subject to the provisions and requirements of the 2021 International Residential Code, The Code of Ordianances Adopted by the City of Heath. If any information is found to be untrue or incomplete this permit may be revoked and all construction stopped until a new permit has been approved & issued. Permission is hereby granted to enter the premises to make inspections. I hereby accept all conditions herein above mentioned and certify that all statements herein recorded by me are true.

APPROVED:

Building _____ Date _____

Public Works_____ Date _____

Fire _____ Date _____

City Engineer _____ Date_____

Com. Dev/ P&Z_____ Date_____

DR (Septic)_____ Date_____

SIGNED_____
agent or owner

DATE_____

PERMIT FEE **$**_____

Office Use Only:
Setbacks Front_____Side L_____Side R _____Rear_____Height_____Zoning_____

Revised 11/1/2022