



# City of Stafford

2610 South Main  
Office Number (281) 261-3940

Stafford, Texas 77477  
Fax Number (281) 261-3939

## Building Permit Application

<input type="checkbox"/> Civil/Site Work Only	<input type="checkbox"/> BUILDING	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> PLUMBING
<input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Public				

Please fill out information completely and legibly

### SECTION 1-GENERAL

Site Address:							
1. Legal Description:	Lot Number:	Block:			Subdivision:		
2. Owner Name		Mailing Address:			Phone Number:		
3. Contractor Name:		Mailing Address			Phone Number:		
4. Architect or Designer:		Mailing Address			Phone Number:		
5. Engineer:		Mailing Address			Phone Number:		
6. Use of Building:	<input type="checkbox"/> Residential		<input type="checkbox"/> Commercial Building			<input type="checkbox"/> Public	
7. Class of Work:	<input type="checkbox"/> Site Work Only	<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Alterations	<input type="checkbox"/> Repair	<input type="checkbox"/> Swimming Pool Construction	<input type="checkbox"/> Driveway
12. Scope of Work:							
13. Name of Business:		14. Type of Business:			15. Total Number of Acres Disturbed:		
16. Total Square Feet:	17. Number of Stories:	18. Number of Rooms:		19. Occupant Load:			

### SECTION 2-GENERAL (Required for New Construction, Addition & Remodel)

20. Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No    Slab Elevation: _____ SLAB: Lowest floor of the structure in flood prone areas shall be certified by a registered engineer or registered public surveyor to be twelve (12) inches above the base flood elevation.	22. Type of Roof:
21. Water or Sewer Service Required <input type="checkbox"/> Yes <input type="checkbox"/> No Arrangements must be made with WC&ID #2 for water supply and sewage disposal. Where these services are not available, they must be provided. Phone 281-499-1031.	23. Building Height :
	24. Type of Construction:
	25. Occupancy Group:

If the project exceeds \$50,000.00 in construction costs, registration with the TDLR, Architectural Barriers is required. If you have registered, enter the project number \_\_\_\_\_, if not contact TDLR at (512) 463-6599 or (800) 803-9202.

<input type="checkbox"/> Commercial/Site Construction skip to section 3	<input type="checkbox"/> Residential Construction skip to section 4	
<input type="checkbox"/> Mechanical work continue to next section 7	<input type="checkbox"/> Plumbing work skip to Section 8	<input type="checkbox"/> Electrical work skip to Section 6

**SECTION 3-COMMERCIAL CONSTRUCTION (New, Remodel & Additions)**

\$1.00 to \$50,000.00	\$75.00 for the first \$1,000.00 plus \$6.00 for each additional \$1,000.00
\$50,001.00 to \$100,000.00	\$300.00 for the first \$50,000.00 plus \$5.00 for each for each additional \$1,000.00
\$100,001.00 to \$500,000.00	\$500.00 for the first \$100,000.00 plus \$4.00 for each additional \$1,000.00
\$500,001.00 and up	\$2,000.00 for the first \$500,000.00 plus \$3.00 for each additional \$1,000.00

**26. List Project Valuation: (Labor and Material)** \$

**SECTION 4-RESIDENTIAL CONSTRUCTION**

(New Construction, Addition, Remodel, Repair, Accessory Building, Pool & Fence)

**27. List Inspections Required: (\$100 Per Inspection)**

Inspection Type	Quantity	Inspection Type	Quantity	Office Use Only:
Brick Tie		Frame		Total Number of Inspections
Foundation/Flat Work		Roof		
Final		Windstorm		

**SECTION 5 COMMERCIAL & RESIDENTIAL**

**PLAN CHECKING FEES**

A plan is required to be submitted by 102-101.2 of the Stafford Code of Ordinance, a plan-checking fee shall be paid to the City of Stafford at the time of submitting plans and specifications for review. Said plan-checking fee shall be equal to one-half of the building permit fee. Such plan checking fee is in addition to the building permit fee.

Permit Fee	\$	
Plan Check	\$	
Residential Base Fee	\$	
Partial Inspections (\$50.00 Each)		
<input type="checkbox"/> Certificate of Occupancy	\$	100.00
<input type="checkbox"/> Certificate of Completion	\$	
<b>Total Fees</b>	\$	

**SECTION 6 - ELECTRICAL**

QTY		FEE	TOTAL	QTY		FEE	TOTAL
1	BASE FEE	75.00	75.00		Transformers (each)	7.00	
	Meter Loop & Service	25.00			Generators Residential	\$25.00	
	Underground wiring installation per 10 linear feet	\$2.00			Generators Commercial	\$50.00	
	Sub Panel (each)	\$20.00			Electrical Reconnect	\$75.00	
	Electrical Heat (per unit)	\$20.00			Miscellaneous	\$20.00	
	Lighting fixtures/Outlets	\$0.75			Temporary Saw Pole	\$50.00	
	Fixed Appliances (each)	\$5.00			TCI (letter required)	\$50.00	
	Motors and Fans (each)	\$7.00					
	Area Pole Lighting (each)	\$30.00			<b>Total</b>		

<b>SECTION 7 – MECHANICAL</b>			
Quantity	Type of Equipment	Each	Total
1	Base Fee	\$75.00	75.00
	Per Ton	\$ 5.00	
	Exhaust	\$15.00	
	Duct System	\$25.00	
	Heaters	\$25.00	
	Vent Hoods	\$25.00	
	Coolers/Icemakers	\$25.00	
Total			

<b>SECTION 8 - PLUMBING</b>			
Quantity	Type of Equipment	Each	Total
1	Base Fee	\$75.00	75.00
	Plumbing Fixture	\$8.00	
	Water Heater	\$25.00	
	Backflow Preventer	\$25.00	
Total			

<b>OFFICE USE ONLY</b>		
Accepted By:	Date In	Date Out
Plan Reviewer:	Date In	Date Out
Public Works:	Date In	Date Out
Health Inspector:	Date In	Date Out
Fire Marshal:	Date In	Date Out
Zoning District:	Approved By	Date Out
Comments:		

<p><b>PLEASE READ</b></p> <p>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 RELATING TO CONSTRUCTION OR PERFORMANCE OF CONSTRUCTION.</p> <p>SEPARATE PERMITS ARE REQUIRED FOR FIRE ALARM OR FIRE SPRINKLER. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.</p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black;">Applicant Email</td></tr> <tr><td style="border-bottom: 1px solid black;">Applicant Phone Number</td></tr> <tr><td style="border-bottom: 1px solid black;">Position/Title and Company Name</td></tr> <tr><td style="border-bottom: 1px solid black;">Name of Contact Person &amp; Phone Number</td></tr> <tr><td style="border-bottom: 1px solid black;">Printed Name of Signee</td></tr> <tr> <td style="border-bottom: 1px solid black;">Signature of Contractor or Authorized Agent</td> <td style="border-bottom: 1px solid black;">Date</td> </tr> </table>	Applicant Email	Applicant Phone Number	Position/Title and Company Name	Name of Contact Person & Phone Number	Printed Name of Signee	Signature of Contractor or Authorized Agent	Date
Applicant Email								
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