

**MISCELLANEOUS BUILDING PERMIT APPLICATION**

CITY OF WYLIE  
300 COUNTRY CLUB RD BLDG #100  
WYLIE, TX 75098  
972-516-6420



<b>PERMIT #</b>  
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Project Address \_\_\_\_\_

Subdivision: \_\_\_\_\_ Phase: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

General Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Electric Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Plumbing/Irrigator Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Back Flow Tester: \_\_\_\_\_ Phone: \_\_\_\_\_

**SQUARE FOOTAGE:** \_\_\_\_\_

**COST OF CONSTRUCTION:** \_\_\_\_\_

**Type of Permit:**

- |   |   |  |                                     |
|---|---|--|-------------------------------------|
| <input type="checkbox"/> ROOFING-DECKING  | <input type="checkbox"/> ACCESSORY BUILDING | <input type="checkbox"/> STORM SHELTER     | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> GARAGE CONVERSION  | <input type="checkbox"/> IRRIGATION         | <input type="checkbox"/> FOUNDATION REPAIR | <input type="checkbox"/> ELECTRICAL |
| <input type="checkbox"/> CARPORT/COVERED PATIO  | <input type="checkbox"/> CONCRETE           | <input type="checkbox"/> SOLAR SYSTEM      | <input type="checkbox"/> PLUMBING   |
| <input type="checkbox"/> REMODEL/ADDITION ( <i>SUBCONTRACTORS PULL SEPARATE PERMITS</i> ) | <input type="checkbox"/> OTHER _____        |  |                                     |

DESCRIPTION OF WORK: \_\_\_\_\_

THE GRANTING OF A BUILDING PERMIT DOES NOT CONSTITUTE A DETERMINATION THAT THE PROPOSED CONSTRUCTION WILL OR WILL NOT VIOLATE ANY DEED RESTRICTIONS OR COVENANTS APPLICABLE TO THE PROPERTY UPON WHICH THE CONSTRUCTION TAKES PLACE, NOR DOES IT AUTHORIZE ANY SUCH VIOLATION I, \_\_\_\_\_ (PRINT NAME), AS OWNER OR AGENT FOR THE OWNER, HEREBY CERTIFY THAT I HAVE REVIEWED ALL THE COVENANTS AND RESTRICTIONS APPLICABLE TO THE ABOVE PROPERTY. I FURTHER CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS OF THIS NOTICE.

**SIGNATURE** \_\_\_\_\_ **CONTACT PERSON & PHONE #** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_ **DATE** \_\_\_\_\_

**THIS PERMIT WILL EXPIRE, IF WORK HAS NOT COMMENCED WITHIN 180 DAYS OF THE ISSUANCE OF THIS PERMIT, THE EXCEPTIONS ARE FENCE AND IRRIGATION PERMITS WICH EXPIRE IN 60 DAYS.**

PERMIT FEE: _____	PLAN REVIEW FEE: _____	OTHER FEES: _____	TOTAL FEES: _____
APPROVED BY: _____	APPROVAL DATE _____		