



City of Saint Hedwig

13065 FM 1346 / PO Box 40
Saint Hedwig, Texas 78152
210-667-9568
cityhall@sainthedwigcity.com

**BUILDING PERMIT
APPLICATION**

PROJECT ADDRESS

PERMIT NO.

OWNER INFORMATION

OWNER NAME			
CURRENT MAILING ADDRESS		HOME PHONE	
EMAIL ADDRESS		MOBILE PHONE	

PROJECT DESCRIPTION (check as applicable)	NO. OF STORIES	TOTAL SQUARE FOOTAGE / SIZE	LIVING AREA SQUARE FOOTAGE	GARAGE SQUARE FOOTAGE	COVERED PORCH/PATIO SQ. FOOTAGE
<input type="checkbox"/> COMMERCIAL BUILDING					
<input type="checkbox"/> NEW SINGLE-FAMILY RESIDENCE					
<input type="checkbox"/> SINGLE-FAMILY RESIDENCE REMODEL/ADDITION					
<input type="checkbox"/> STORAGE BUILDING					
<input type="checkbox"/> WORK SHOP					
<input type="checkbox"/> HAY BARN					
<input type="checkbox"/> CARPORT					
<input type="checkbox"/> OTHER (SPECIFY):					
<input type="checkbox"/> ELECTRICAL					
<input type="checkbox"/> PLUMBING					
<input type="checkbox"/> MECHANICAL					

Valuation _____

CONTRACTOR INFORMATION

	COMPANY NAME	CONTACT PERSON	PHONE	EMAIL
GENERAL/BUILDER				
ELECTRICAL				
MECHANICAL				
PLUMBING				

A permit becomes null and void if work or construction authorized is not commences within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All permits require final inspection.

- 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 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 regulating construction or performance of construction.
- I hereby certify that this project's use is only as designated on this application under "PROJECT DESCRIPTION".
- I hereby certify that I am informed that the issued Building Permit must be posted at all times at the project site. Failure to do so will initiate a Stop Work Order, ceasing all work.
- I hereby certify that I am informed of the City of Saint Hedwig's exclusive agreement with Frontier Waste Solutions for all residential, commercial and industrial waste collection services, and use of any other waste collection service is in noncompliance.

Owner Name:(print) _____ (signature) _____ Date: _____

OFFICE USE ONLY:

APP RCVD BY/DATE:	
PERMIT FEE:	
FEE RCVD DATE/CK#/NAME:	

BV PROJECT# _____

	APPROVED BY	DATE
CODE COMPLIANCE:		
ZONING:		
P&Z COMMISSION:		
PERMIT ISSUED BY:		