



415 N. College Ave
Justin, Texas 76247
(940) 648-2541

City of Justin Miscellaneous Permit Application

Permit #: _____

For Inspections:

Countywide Inspection Service

Email: inspections@cwistx.com

Phone: (940) 521-0470

Call before 5:00 p.m. for next day inspections

City Inspector: Chuck Sellers (817) 480-5448

Address where work will be performed

Owner of Property

Contractor Name

Contractor ID

Contractor Phone

All contractors must be registered with the city before a permit will be issued. All plans must be submitted before application will be reviewed.

<input type="checkbox"/> _____ *	<input type="checkbox"/> Fence Permit	<input type="checkbox"/> Plumbing Permit
<input type="checkbox"/> Accessory Building Permit	<input type="checkbox"/> Irrigation Permit	<input type="checkbox"/> Sign Permit
<input type="checkbox"/> Electrical Permit	<input type="checkbox"/> Mechanical Permit	<input type="checkbox"/> Swimming Pool Permit

*If you require one of the following permits/applications, please contact the Department of Development for further information:
Adult Business License, Alcoholic Beverage, Ball Field Tournament, Floodplain Development, Gas Well, Mobile Home Park Constr.,
New Pipeline, Seismic Survey, Specific Use, Tree Removal.

I agree to allow no work on which separate permits are required. I have carefully examined and read the completed application and know the same is true and correct, and hereby agree that if a permit is issued, all provisions of the City Ordinances and State Laws will be complied with, whether herein specified or not.

I, the undersigned, do hereby certify that I am the Authorized Agent/Builder/Owner of the property above described and that I am applying for this permit at the request and with the permission of the same.

I authorize the Building Inspector to enter on the property to complete any inspections necessary in conjunction with the issuance of this building permit, to perform inspections in connection with the issued permit, and to investigate possible code enforcement issues to this property.

Permit must be paid before work begins.

Estimated Valuation: \$ _____

Signature of Agent/Builder/Owner

This Permit will expire and become null and void if:

- a) Work does not commence within 180 days
- b) Exterior walls are not erected and completed within 180 days
- c) Work is discontinued at any time for a period of 180 days

Building Official

Fee: \$ _____

Approved Denied

Comments

Signature of Building Official

****FOR OFFICE USE ONLY****

Plans received By	Date Received	Date Issued
Date Paid	<input type="checkbox"/> Cash <input type="checkbox"/> CC <input type="checkbox"/> Check #(s): _____	