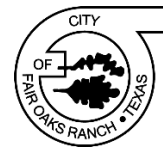




**CITY OF FAIR OAKS RANCH**  
 7286 Dietz Elkhorn  
 Fair Oaks Ranch, TX 78015  
 PH: (210)698-0900      FAX: (210)698-3565  
 www.fairoaksranchtx.org  
 bcodes@fairoaksranchtx.org



**PERMIT APPLICATION  
 RESIDENTIAL DETACHED BUILDING**

Project Address: \_\_\_\_\_ Unit: \_\_\_\_\_ Lot: \_\_\_\_\_  
 (Street)

Owner Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Impervious Coverage Sq. Ft.: \_\_\_\_\_ Project Square Footage: \_\_\_\_\_

Applicant: \_\_\_\_\_ Engineer: \_\_\_\_\_  
 (Foundation)

Applicant email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

General Contractor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

(OFFICE USE ONLY) City Registration #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

(OFFICE USE ONLY) City Registration #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

(OFFICE USE ONLY) City Registration #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

(OFFICE USE ONLY) City Registration #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

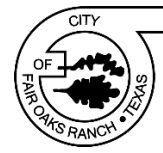
Signature of Contractor/Agent

Date

**\*\*\*MUST COMPLETE PAGE 2 OF THIS APPLICATION\*\*\***



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**FIXTURE FEES**

**(Add \$2.50 for each of the following)**

<u>ITEM</u>	<u>QTY</u>	<u>ITEM</u>	<u>QTY</u>
Receptacle	_____	Range/Cooktop	_____
Switch	_____	Trash Compacter	_____
Light Fixture	_____	Log Lighter	_____
Ceiling Fan	_____	Barbeque	_____
Smoke/CO Detector	_____	Pressure Reducing Valve	_____
Refrigerator/Freezer	_____	Expansion Tank	_____
Ice Machine	_____	Steam Unit	_____
Exhaust Fan	_____	Sink (lavatory, kitchen, laundry)	_____
Vent Hood	_____	Tub/Shower	_____
Dishwasher	_____	Water Closet	_____
Clothes Washer	_____	Hose Bib	_____
Clothes Dryer	_____	Fire Sprinkler Head	_____

**(Add \$5.00 for each of the following)**

<u>ITEM</u>	<u>QTY</u>	<u>ITEM</u>	<u>QTY</u>
Electric Panel	_____	Grinder Pump	_____
Water Heater/Boiler	_____	Jacuzzi	_____
Water Softener	_____	Fire Sprinkler Riser	_____
Sewer Line	_____	Backflow (non-irrigation)	_____
Water Line	_____		

**(Miscellaneous)**

HVAC (\$10 per ton capacity) \_\_\_\_\_ tons

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Fixture Total \_\_\_\_\_ x \$2.50 = \$ \_\_\_\_\_

Square foot \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Fixture Total \_\_\_\_\_ x \$5.00 = \$ \_\_\_\_\_

HVAC tons \_\_\_\_\_ x \$10.00 = \$ \_\_\_\_\_

**PERMIT FEE TOTAL \$ \_\_\_\_\_**

**INSPECTIONS REQUIRED:**

- |   |  |
|---|--|
| <input type="checkbox"/> PLUMBING ROUGH | <input type="checkbox"/> FRAMING/ELEC/MECH |
| <input type="checkbox"/> FOUNDATION     | <input type="checkbox"/> PLUMBING TOP      |
|   | <input type="checkbox"/> FINAL             |

DATE REC'D: \_\_\_\_\_ BY: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

DATE APPROVED: \_\_\_\_\_