This section office use only

<table>
<thead>
<tr>
<th>Application #</th>
<th>Receipt #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash ☐</td>
<td>CC ☐</td>
</tr>
<tr>
<td>Phone order ☐</td>
<td></td>
</tr>
<tr>
<td>Check #</td>
<td>Balance due</td>
</tr>
<tr>
<td>Permit type</td>
<td>CD Received ☐</td>
</tr>
</tbody>
</table>

Commercial

Date

- All application fees are non-refundable
- All credit card transactions include a 2% convenience fee
- Permits and approved plans must be posted on site as failure to post may result in re-inspection fee
- City will call when permit is ready for pickup
- Application must be completed in its entirety prior to submittal

Job address

Business name (tenant)

Contact person

Suite #

Phone

Check one: ☐ New building ☐ Addition ☐ New tenant (finish out) ☐ Existing Tenant (remodel) ☐ Cell Tower ☐ Racking

Any early release for electrical service prior to finals? ☐ Yes ☐ No ☐ (If yes, additional fees shall apply)

Describe business/building use

Describe construction being done

Cost of construction being done $ TDLR TABS Registration #

Is building equipped with an automatic fire sprinkler? ☐ Yes ☐ No ☐

Is building equipped with med gas or med vac? ☐ Yes ☐ No ☐ License #

List any materials sold, stored or used by tenant:

Total square footage of storage over 12 feet in height (measured to top of commodities)

Maximum height (feet) at which commodities will be stored

Areas:

Retail _____________ sf. Manufacturing ______________ sf. Other ______________ sf.

Office ______________ sf. Restaurant ______________ sf. TOTAL ______________ sf.

Warehouse _____________ sf. Church ______________ sf.

By signing below, 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 state or local law regulating construction or the performance of construction. The issuance of any permit neither exempts nor modifies any covenants, deed restrictions, city ordinances and/or state or federal laws, whether herein specified or not.

*AN EMAIL ADDRESS OF THE MAIN CONTACT MUST BE PROVIDED TO RECEIVE INSPECTION RESULTS.

Provide contractor list and see additional checklist information on reverse side of application

Name

Signature

Phone

Email*

BUILDING INSPECTION  |  1945 EAST JACKSON ROAD, CARROLLTON, TX 75006  |  972.466.3225  |  FAX 972.466.3220
BLDGINSPECT@CITYOFCARROLLTON.COM  |  OFFICE HOURS: MONDAY-THURSDAY 7:30 AM-5:30 PM  |  FRIDAY 7:30 AM-11:30 AM
## Contractor List

<table>
<thead>
<tr>
<th>Contractor Type</th>
<th>Contact Person</th>
<th>Carrollton ID#</th>
<th>Company Name</th>
<th>Expiration</th>
<th>Company Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Contractor</td>
<td>(contact person)</td>
<td></td>
<td>Company Name</td>
<td></td>
<td>Company Address</td>
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<tr>
<td>Electrical Contractor</td>
<td>(contact person)</td>
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<tr>
<td>Mechanical Contractor</td>
<td>(contact person)</td>
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<td>Company Name</td>
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<td>Company Address</td>
<td>Phone</td>
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<tr>
<td>Plumbing Contractor</td>
<td>(contact person)</td>
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<td>Company Name</td>
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<td>Company Address</td>
<td>Phone</td>
</tr>
<tr>
<td>Paving Contractor</td>
<td>(contact person)</td>
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<td>Company Name</td>
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<td>Company Address</td>
<td>Phone</td>
</tr>
<tr>
<td>Utility Contractor</td>
<td>(contact person)</td>
<td></td>
<td>Company Name</td>
<td></td>
<td>Company Address</td>
<td>Phone</td>
</tr>
</tbody>
</table>

## Requirements Checklist

- [ ] 2 sets of plans (maximum size 30” x 42”)
- [ ] CD required
- [ ] Asbestos report
- [ ] Energy compliance certifications (i.e. COMchecks)

**Total # of employees:**

**Maximum # of employees on-duty day or night (parking analysis may be required):**

**Zoning:**

**Sup:**

**Required parking:**

**Type of construction:**

**Flood plain?** Yes [ ] No [ ]

**Occupancy:**

**Sewer fee:**

**Use:**

**Other:**

**Comments:**