



# City of Dripping Springs

P.O. Box 384, Dripping Springs, TX 78620  
Physical Address - 511 Mercer Street, 512-858-4725

## Commercial Building Permit Application

Building Permit Number: _____	Valuation: _____
Project Name: _____	Square Foot: _____
Project Address: _____	
Project Description:    New <input type="checkbox"/> Addition <input type="checkbox"/> Remodel <input type="checkbox"/> Finishout <input type="checkbox"/>	
Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical <input type="checkbox"/> Other <input type="checkbox"/>	
Scope of Work: _____	Zoning: _____

Owner Name: _____
Mailing Address: _____
_____
Phone Number: _____                    Email Address: _____

<b>Engineer</b>	Contact Person	Phone Number	Fax Number
<b>Architect</b>	Contact Person	Phone Number	Fax Number
<b>General Contractor</b>	Licensed Contractor	Phone Number/ Email:	Contractor License Number
<b>Mechanical Contractor</b>	Licensed Contractor	Phone Number	Contractor License Number
<b>Electrical Contractor</b>	Licensed Contractor	Phone Number	Contractor License Number
<b>Plumbing Contractor</b>	Licensed Contractor	Phone Number	Contractor License Number

A permit becomes null and void if work or construction authorized is not commenced 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.

***A certificate of occupancy must be issued before any building is occupied.***

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 the performance of construction.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY

Building Permit Fee: _____	Total Permit Fees: _____
Public Sewer/ OSSF: _____	Issued Date: _____
Driveway Permit Fee: _____	Issued By: _____
Sewer Connection Fee: _____	

BV Project # \_\_\_\_\_

Historic District Overlay?    Yes    No                    If yes, which district? \_\_\_\_\_