



P.O. Drawer 400 2665 San Angelo  
 Ingleside, TX 78362  
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## APPLICATION FOR PLUMBING PERMIT

**Permit #** \_\_\_\_\_

(check one) Residential: \_\_\_\_\_ Commercial: \_\_\_\_\_

(check one) Class of Work to be Done: New [ ] Addition [ ] Repair [ ]

Site Address:	Valuation:
Owner:	Plumbing Contractor: _____ License #: _____
Mailing Address:	Mailing Address:
Phone #:	Phone #:
Type of Building:	No. of Units: _____ Building #: _____
Description of Work:	Special Conditions:

Permit Fee Schedule			
Amount	Description	Qty	Total
\$35.00	Permit Issuance		
	plus \$10.00 per \$1,000 of valuation		
\$35.00	Gas Meter to be Turned on		
\$25.00	Each Re-Inspection		
\$30.00	Water Well		
<b>FAILURE TO OBTAIN PERMIT*</b>			
*If work complete, double amount of permit fee plus a \$150 administrative fee.			
*If work is started but not complete, double amount of permit fee or a \$150 administrative fee, whichever is greater.			
	Double amount of permit fee		
\$150.00	Administrative Fee		
<b>ALTERNATE FEE SCHEDULE**</b>			
**New Construction Only / MINIMUM AMOUNT \$25.00			
\$0.05/Gross Sq. Ft.	New Construction Fee		

**TOTAL AMOUNT DUE:** \_\_\_\_\_