



401 S. Alamo St., Marshall, TX  
PO Box 698, Marshall, TX 75671  
P:(903) 935-4455  
Fax: (903) 935-4409

## General Permit Application

Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor:  Reg  Not Reg  Lic exp

**THIS APPLICATION IS FOR PERMITS THAT ARE ISSUED OVER THECOUNTER.**  
Incomplete application and/or submittal will delay the review process.

Commercial  Residential

New Installation

Replacement

Electrical  SWEPCO Inspection  
 Mechanical  HVAC Replacement  
 Plumbing  Re-Roof  
 Gas Test/Minor  Fence  
Repair

Driveway  
 Minor Remodeling  
 Enclosing  
 Minor Repairs

**Asbestos Survey:**  YES  NO (Requirement for Commercial Buildings)

Job Address: \_\_\_\_\_ Description of Work: \_\_\_\_\_

Circle one based on valuation of work

0-\$1,000    \$1,001-\$2,000    \$2,001-\$3,000    \$3,001-\$4,000    Other: \$ \_\_\_\_\_ **sqft**

**Contact person:**  Applicant  Property Owner  Contractor

Name of applicant \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

### Property Owner

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Contractor

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

I hereby certify I have authority to make the necessary application; that all information in this application is correct and all work will comply with the most recently adopted International Building Codes and all other applicable state and local laws, ordinances, and regulations.

Name (PRINT) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_  
Plan Review Fee: \$ \_\_\_\_\_  
Total: \$ \_\_\_\_\_  
Receipt No. : \_\_\_\_\_

The permit issued for this application is void if construction has not been started within 60 days. The permit expires in 180 days or when work is complete.