

FEEs DOUBLE IF WORK IS PERFORMED WITHOUT PERMIT BEING ISSUED



NON - TRANSFERABLE
NO REFUNDS
EXPIRES IN 180 DAYS

Permits and Inspections Department

UTILITY CONTRACTOR APPLICATION

TYPE OF UTILITY:

___ Electric ___ Gas ___ Cable ___ Telephone

MUST PROVIDE THE FOLLOWING:

- 1. Valid Texas Drivers's License.
- 2. Contractor needs to submit drawings, plans or description of work being performed

LINE LOCATES FOR WATER & SEWER:

___ Approval of Water Superintendent ___ Initials ___ Date
___ Approval of Sewer Superintendent ___ Initials ___ Date
___ Approval of Storm Sewer ___ Initials ___ Date

LOCATION(S) OF DIGGING OR BORING:

Address 1 _____
Address 2 _____
Address 3 _____

Linear footage being constructed for this project.

NOTE: HIGHLIGHT ON MAP DETAILS OF FULL PROJECT.

SUB-CONTRACTOR INFORMATION:

Company Name: _____
Owner Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Office Phone: _____ Fax Phone: _____
Contact Person: _____ Cell Phone: _____

UTILITY COMPANY INFORMATION:

Company Name: _____
Contact Person: _____ Cell Phone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Office Phone: _____ Fax Phone: _____

I HEREBY ACCEPT ALL CONDITIONS MENTIONED ABOVE, AND CERTIFY THAT ALL STATEMENTS HEREIN RECORDED BY ME ARE TRUE. APPLICANT ACKNOWLEDGES THAT SIGNATURES TRANSMITTED ELECTRONICALLY OR BY FACSIMILE TRANSMISSION HAVE THE SAME LEGAL EFFECT AS ORIGINALS.

APPLICANT'S SIGNATURE

APPLICANT'S PRINTED NAME

DATE SIGNED