

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 License.
2. Contractor needs to submit drawings, plans or description of work being performed
3. Need a copy of Insurance
4. Need contact information for claims for damages. Who will be the responsible party for any damages? Do you have a claims department?

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