

### **CITY OF HEATH**

200 Laurence Dr. • Heath TX 75032 972-771-6228 • 469-273-4015 - Fax 972-961-4897 – Inspection

Permit #			
Amount Paid \$_			
Check #			
Date Paid	/	/	
Receipt #			

	APPLICATIO	ON FOR B	UILDING PERMIT	Receipt #	
Job Address					
Subdivision			LotBlock		
Owner			Telephone		
Owner Address					
stre		city	state	zip	
Contractor			Heath Registration #		
Contact Name		Email	Cell #		
LISTED SUB CONTRACTORS					
Electrical Contractor		Email		Heath Reg #	
Plumbing Contractor		Email		Heath Reg #	
Mechanical Contractor		Email		Heath Reg #	
Foundation Contractor		Email		Heath Reg #	
Energy Examiner/ Inspector		Email	Certified by	Number	
Foundation Engineer		Email			
Description of Work					
Contract or Sale price \$	Sa. ft. A/C	7	Sa. ft. other To	otal Under Roof	
(If OSSF, Sprinkler, or fence provide This permit is issued on the basis of ir City of Heath Codes and any applicabl	documents for submittal with sep aformation furnished in this applicate Ordinance. If any information is am the owner or the duly authorize	parate application and on a s found to be used agent of the	on)  ny submitted plans, and is subject to the intrue or incomplete this permit may be		
APPROVED:			I HEREBY ACCEPT ALL COND		
Building	Date		MENTIONED AND CERTIFY TI RECORDED BY ME ARE TRUE	HAT ALL STATEMENTS HEREIN	
Public Works	Date	-			
Fire	Date		SIGNEDage	nt or owner	
City Engineer	Date		DATE		
Com. Dev/ P&Z	Date		PERMIT FEE \$		
DR (Septic)			UTILITY DEPOSIT \$		
•			SEWER IMPACT \$		
SWWWP	Date		WATER IMPACT \$		
			METER PASS THRU FEE	\$195 \$260	
			ROADWAY IMPACT \$		
			TOTAL \$		
Office Use Only: Setbacks Front	Side LSide _	Rear	HeightZo	oning	

### **CITY OF HEATH**

200 Laurence Dr. Heath TX 75032

THE UNDERSIGNED,	, of
(Applican	t & Company Name)
	more specifically described
(Address of Project)	
as Block, Lot, of the	Addition to the City of Heath,
Texas, do hereby certify that	
this permit is sought, is to be construct	tle to the property upon which the building or structure, for whic cted, and the proposed building or structure complies in each an licable covenants, deed restrictions and encumbrances of suc
Signed thisday of	_, 20
	Printed Name
	Signature
day of	Public in and for said County and State, personally on the
	he executed the same as his/her free and voluntary act and deed for
GIVEN under my hand and seal the day and y	year last above written.
Ŋ	Notary Public in and for the State of Texas
My Commission Expires:	
[SEAL]	



### City of Heath 200 Laurence Drive Heath, Texas 75032

**y of Heath**Phone 972-771-6228
Fax 469-273-4015

## SANITARY SEWER CONNECTION REQUEST

ate:		Applicants Name:  Address:  Contact Person:  Contact Phone:
Property Physical Ad	me:dress:	LETED BY APPLICANT
		(Block) (Lot)
Legai Description. (S		
Permit Number:		
Permit Number:		
Permit Number:		City Use Only
Permit Number:	5/8" 🔲	City Use Only
Permit Number:  Meter Information:  Fees: Impact	5/8" 🗌	City Use Only  1" Other
Permit Number:  Meter Information:  Fees: Impact	5/8"	City Use Only  1"
Permit Number:  Meter Information:  Fees: Impact Clean Out Assembly	5/8"	City Use Only  1"  Other



Date: \_\_\_\_\_

# CITY OF HEATH DEPARTMENT OF PUBLIC WORKS BUILDING INSPECTION DIVISION

200 LAURENCE DRIVE HEATH, TX 75032-2608 972-771-6228 Fax 469-273-4015

### TEMPORARY PERMIT APPLICATION / UTILITIES RELEASE

Site Address:	Suite Number:		
City:	State:Zip	:	
Business Name (If applical	ble):		
Site Owner			
Telephone Number: (	)		
Mark as Commercial or Residential Request	Options	Fee Each	<b>Total Fee</b>
	Temporary Certificate of Occupancy - Includes Fire Marshall and Building Inspection (Commercial only)	\$ 25 – Building Inspection \$25 – Fire Marshall Inspection	
	Temporary Electric Only	\$ 25	
	Temporary Gas Only	\$ 25	
	Temporary Electric and Gas	\$ 50	
	Reconnect Electric	\$ 25	
	Deposit Required* (If structure is entirely electric or if requesting for both gas and electric releases)	\$500	
his/her designated representary place on deposit with the Cit obtain and pass a final insperior forfeited. This forfeiture shape other Heath Ordinance. (Order		nd inspection, such made. Failure by the amount so d	ch person shall y any person to eposited being
Clean and ShowY	Yes (Commercial Only)		
Office Use Only Approved By:	Date:		



City of Heath

Phone 972-771-6228
200 Laurence Drive \* Fax 469-273-4015

Heath, Texas 75032

### **WATER CONNECTION REQUEST**

C	COMPLETED BY APPLICANT
Date:	Applicants Name:
	Address:
	Contact Person:
	Contact Phone:
C	XOMPLETED BY APPLICANT
Property Owner's Name:	
Property Physical Address:	
Owner's Phone Number:	
Legal Description: (Subdivision)	(Block)(Lot)
Permit Number:	
	City Use Only
Meter Information: 5/8"	-
Fees:	
Impact \$	
Meter and Accessories \$	
Tap \$	
Other Related Fees \$	
STAFF COMMENTS :	
CITY OF HEATH:	DATE ISSUED:



## **WATER DEPARTMENT - WORK ORDER**

CITY OF HEATH 200 LAURENCE DR. HEATH, TX. 75032

DATE ISSUED//	NAME	
RECEIPT #	BILLING ADDRESS	
	CITY , ZIP	
CONTACT PERSON		
CONTACT NUMBER		
JOB ADDRESS		
SUBDIVISION	LOT BLOCK	
DATE		
SIGNED	<u></u>	
SET METER CHANGE METER READ METER	5/8" METER 1" METER	
OTHER	SEWER LOCATE	
DATE SET //_		
NEW METER READING	SERIAL NUMBER	
OLD METER READING	SERIAL NUMBER	
NUMBER OF DIGITS ON METER :	( PLEASE CIRCLE ONE ) 3 4	
SEQUENCE NUMBER: (FOR SEQU	JENCE)	
ROUTING WAT	ER METER DEPARTMENT	
RILL	ING DEPARTMENT	