Permit #

TOWN OF BAYSIDE, TEXAS P.O. BOX 194

909 FIRST STREET - BAYSIDE COMMUNITY CENTER **BAYSIDE, TEXAS 78340** PHONE (361) 529-6520 FAX 361-529-6409

MECHANICAL PERMIT APPLICATION

APPLICANTS ARE REQUESTED TO PROVIDE A CURRENT DRIVER'S LICENSE AS PROOF OF IDENTIFICATION ALONG WITH A COPY OF THEIR STATE LICENSE.

A COPY OF THIS PERMIT MUST BE POSTED AT THE CONSTRUCTION SITE.

Please print clearly. Failure to complete all information will cause a delay in the approval of this permit

PLEASE PRINT		
Property Owner Name:	Phone Number:	
Address: City, State, Zip:		
Project Address:		
LEGAL DESCRIPTION OF PROPERTY: Block Lot _	Zone	
Mechanical Contractor's Firm Name	Phone Number:	
Licensed Contractors Name:		
Address: City, State, Zip:		
***State License Number:Expirate	ion Date	
Check mark (√) the box or boxes that best describe the mechanical installation: □ New □ Residential □ Manufactured home □ Modular home □ Remodel □ Commercial □ Service only □ Addition □ Other		
Occupancy Type: Private Rental Public Commercial Industrial		
INSPECTION FEE PER INSPECTION: \$100.00 - \$100.00 FOR EACH RE-INSPECTION		

- This application does not constitute permission to begin work. If work is begun prior to the issuance of a permit, a penalty fee in addition to the permit fee shall be assessed. The penalty fee shall be equal to the permit fee.
- All electrical work must comply with the Town of Bayside mechanical code.
- The applicant shall be responsible for informing the City Office for inspections, inspection requests may be made by calling (361)529-6520.
- This permit will expire and become null and void if work does not commence within 180 days or if work is discontinued at anytime for a period of 180 days
- Permit fees must be paid prior to inspection(s).
- No refund after the city building inspector has made a field inspection. There shall be no refunding of any fee paid except on written application filed by the original permittee not later than 180 days after the date of fee payment. No refund shall be made of an amount less than \$25.

BY SIGNING THIS BULIDING ELECTR	RICAL PERMIT APPLICATION:		
I AGREE TO ALLOW NO WORK ON WHICH SEPARATE PERMITS ARE REQUIRED. I HAVE CAREFULLY EXAMINED AND READ THE COMPLETED APPLICATION AND KNOW THE SAME IS TRUE AND CORRECT, AND HEREBY AGREE THAT IF A PERMIT IS ISSUED, ALL PROVISIONS OF THE CITY ORDINANCES AND STATE LAWS WILL BE COMPLIED WITH, WHETHER HEREIN SPECIFIED OR NOT.			
PROPERTY ABOVE DESCRIBED AND PERMISSION OF THE SAME. I AUTHORIZE THE BUILDING INSPECTION NECESSARY IN CONJUNCTION WITH	CERTIFY THAT I AM THE AUTHORIZED AGEN O THAT I AM APPLYING FOR THIS PERMIT AT STOR TO ENTER ON MY PROPERTY TO COM H THE ISSUANCE OF THIS PERMIT, TO PERF RMIT, AND TO INVESTIGATE CODE ENFORC	THE REQUEST AND WITH THE IPLETE ANY INSPECTIONS ORM INSPECTIONS IN	
	, WARRANT THE TRUTHFULNESS OF ALL C TAND THAT IF ANY OF THE INFORMATION F BUILDING OFFICIAL.		
APPLICANT'S SIGNATURE		DATE	
LICENSE MECHANICAL SIGNATURE		DATE	
* HOMEOWNER CLAUSE: AS THE HOMEOWNER, YOU HAVE THE OPPORTUNITY TO PERFORM YOUR OWN MECHANICAL WORK PROVIDED THE FOLLOWING CONDITIONS ARE TRUE: (1) YOU ARE THE PROPERTY OWNER AND THIS PROPERTY IS NOT FOR SALE OR RESALE, IS NOT RENTAL PROPERTY WHICH IS OCCUPIED OR IS TO BE OCCUPIED BY TENANTS FOR LODGING, EITHER TRANSIENT OR PERMANENT; AND IS NOT GENERALLY OPEN TO THE PUBLIC. (2) THE MECHANICAL SYSTEM WILL BE INSPECTED PRIOR TO COVERING, I.E., INSULATION, DRYWALL, ETC. (3) ALL ELECTRICAL WORK WILL BE DONE IN ACCORDANCE WITH THE TOWN OF BAYSIDE MECHANICAL CODE. Under State law, work that deals with refrigerants and equipment containing refrigerants may require additional certificates or licenses that are not waived under this permit provision.			
HOMEOWNER AFFIDAVIT: I HEREBY CERTIFY THAT THE MECHANICAL WORK DESCRIBED ON THIS PERMIT SHALL BE INSTALLED BY MYSELF IN MY OWN HOME IN WHICH I AM LIVING OR ABOUT TO OCCUPY. ALL WORK SHALL BE INSTALLED IN ACCORDANCE WITH THE TOWN OF BAYSIDE MECHANICAL CODE AND SHALL NOT BE ENCLOSED, COVERED UP, OR PUT INTO OPERATION UNTIL IT HAS BEEN INSPECTED AND APPROVED BY THE BUILDING INSPECTOR. I WILL COOPERATE WITH THE BUILDING INSPECTOR AND ASSUME ALL RESPONSIBILITY TO ARRANGE FOR ALL NECESSARY INSPECTIONS AND CORRECTIONS REQUIRED.			
Owner Signature	Date		
OFFICE USE ONLY FEE: \$			
AMOUNT PAID: \$ DATE	PAID: CHECK OR CASH	RECEIPT NO:	
PERMIT EXPIRATION DATE:			
☐ FIRST EXTENSION. NEW EXPIRATION DATE:			
SECOND EXTENSION. NEW EXPIRATION DATE:			
PERMIT: APPROVED DENIED	City Official Signature	Date	
3	City Official Signature	Date	
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