



COMMERCIAL/MULTI-FAMILY BUILDING APPLICATION

City of Lindale
 105 Ballard Dr.
 Lindale, TX 75771
 Phone: 903-882-6861 Fax: 903-881-8170
 Email: communitydevelopment@lindaletx.gov

Received by: _____ Date: _____

Permit #: _____

SITE INFORMATION

Project Name			Type Business
Street Address of Proposed Project	Suites #	Building #	Zoning

PROPERTY OWNER INFORMATION

Owner / Tenant	Phone Number	Business Name:	Phone Number
Mailing Address	Street	City	State
		Zip Code	Email

GENERAL CONTRACTOR & ARCHITECT OR ENGINEER INFORMATION

Company Name	Phone Number	Supervisor or Contact Name	Cell Number
Address	City	State	Zip Code
		Email	
Architect or Engineer	Phone Number	Email	

SUBCONTRACTOR NAMES – ALL CONTRACTORS MUST BE REGISTERED WITH CITY OF LINDALE

Concrete Contractor	Phone	Email	Plumbing Contractor	Phone
Dirt Contractor	Phone	Email	Mechanical Contractor	Phone
Electrical Contractor	Phone	Email	Utility Contractor	Phone

PERMIT TYPE (COMPLETE ALL THAT APPLY)

<input type="checkbox"/> New Construction	<input type="checkbox"/> Multi-family/Apartments	<input type="checkbox"/> Concrete/Flatwork	<input type="checkbox"/> Swimming Pool	<input type="checkbox"/> Solar Panels
<input type="checkbox"/> New Addition	<input type="checkbox"/> Tenant Interior Finish Out	<input type="checkbox"/> Replace Roof	<input type="checkbox"/> Screening Wall	<input type="checkbox"/> Spa <input type="checkbox"/> Shell Only
<input type="checkbox"/> Alteration/Remodel/Repair	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Fence	<input type="checkbox"/> Revise Existing (Permit #) _____	<input type="checkbox"/> Other: _____
No. of Dwelling Units (for Apartments)	Existing (Sq. Ft.)	Added (Sq. Ft.)	Total New Sq. Ft.	Estimated Construction Job Cost
*Fire Sprinklers: <input type="checkbox"/> YES <input type="checkbox"/> NO *A separate application will be required.	* Fire Alarm: <input type="checkbox"/> Yes <input type="checkbox"/> No * A separate application will be required.	<input type="checkbox"/> Applicant will comply with EPA Rule regarding Lead- Based Paint Renovation, Repair and Painting (RRP) rule in structure.		

PERMIT FEES: New Commercial/Industrial Construction- \$.25 per sq. ft. - \$100.00 minimum
Commercial Roof- \$.10 per sq. ft. - \$100.00 minimum **Commercial Remodel/Pools - \$80.00 + \$6.00 per \$1,000 valuation (based on job cost)**
Retaining Walls- \$55.00 for more than four feet high measured from the bottom of the footing to the top, plus the cost of any inspections performed by an engineer.

All commercial projects over \$50,000.00 must be submitted to the Texas Department of Licensing & Regulation for an Americans with Disabilities Act (ADA) review. We cannot accept any plans without a Texas Accessibility Standards (TAS) permit number.
TAS # _____ (Knox Boxes are required for all Commercial Buildings)

Remodel / Renovation projects are required to have an asbestos survey conducted in accordance with Texas Asbestos Health Protection Rules (TAHPR) and the National Emission Standards for Hazardous Air (NESHAP). Has this survey been conducted? Yes No **If the answer is no, then as the owner/operator of the renovation site, I understand that it is my responsibility to have this survey conducted in accordance with TAHPR and NESHAP prior to renovation / demolition permit being issued by the City of Lindale. (Copy of survey must be attached)**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit. **A Penalty Fee equal to 2x's the Permit Fee will be assessed if work begins before the issuance of a valid permit.**

I represent the: Owner Contractor

Print Name Applicant/Responsible person in charge of work _____ Signature _____ Date _____

Notes:

Reviewed By _____ Date _____