



309 W Sul Ross Ave
 Alpine, TX 79830
 Phone 432.837.3281
 permits@cityofalpine.com

FOR STAFF USE ONLY	
PERMIT #	_____
TOTAL FEES	_____
Date:	_____

COMMERCIAL BUILDING PERMIT APPLICATION

Project Address:	Property Owner Name
Lot Bloc Subdivision	Property Owner Address
Property Owner Phone:	Property Owner Email:
Contractors Name:	Contractors Address:
Contractors Phone Number:	Contractors Email:
Permit Type	
<input type="checkbox"/> New Construction <input type="checkbox"/> Remodel / Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Demolition <input type="checkbox"/> OTHER	
DESCRIPTION OF WORK TO BE DONE:	

NAME OF BUSINESS:	
SQUARE FOOTAGE ALTERATION/ADDITION:	
TOTAL SQUARE FOOTAGE UNDER ROOF:	
USE OF BUILDING OR STRUCTURE:	

PROJECT VALUE:	\$
<i>Any project over \$50,000.00 must be accompanied with a TABS #</i>	
I FURTHERMORE UNDERSTAND THAT PLANS AND SPECIFICATIONS ARE NOT REVIEWED FOR HANDICAPPED ACCESSIBILITY BY THE CITY, AND THAT THE DESIGN PROFESSIONAL/OWNER IS RESPONSIBLE FOR OBTAINING SUCH APPROVAL FROM THE APPROPRIATE STATE AND OR FEDERAL AGENCY (S)	
FIRE SPRINKLERED?	YES <input type="checkbox"/> NO <input type="checkbox"/>
WHAT TRADES WILL BE NEEDED?	
ELECTRIC <input type="checkbox"/> PLUMBING <input type="checkbox"/> MECHANICAL <input type="checkbox"/>	
<i>All trades must pull separate permits by a licensed tradesman</i>	

I hereby certify that plans have been received and the building will be inspected by a certified energy code inspector in accordance with State Law. Plan review and inspection documentation shall be made available to the Building Department.

I hereby certify that plans have been submitted to the Texas Department of Licensing and Regulation for Accessibility Review. Control Number: _____ (not required for 1&2 family dwellings)

I hereby certify that an asbestos survey has been conducted for this structure in accordance with the regulatory requirements of the Texas Department of Health. (REQUIRED FOR DEMOLITIONS, ADDITIONS, AND OR ALTERATION TO COMMERCIAL AND PUBLIC BUILDINGS)

I hereby certify that the foregoing is correct to the best of my knowledge and all work will be performed according to the documents approved by the building department and in compliance with the City of Alpine, Texas Ordinance regulating construction. It is understood that the issuance of this permit does not grant or authorize any violation of any code or ordinance of the City of Alpine, Texas.

Owner/Agent Print		Date:
Owner/Agent Signature		Date:

<u>Total valuation</u>	<u>Fee</u>
\$1.00 to \$500.00	\$21.00
\$501.00 to \$2,000	\$21.00 for the first \$500.00 plus \$2.75 for each additional \$100.00, or fraction thereof, to and including \$2,000.00
\$2,001.00 to \$25,000	\$62.25 for the first \$2,000.00 plus \$12.50 for each additional \$1,000.00, or fraction thereof, to and including \$25,000.00
\$25,000 to \$50,000.00	\$349.75 for the first \$25,000.00 plus \$9.00 for each additional \$1,000.00, or fraction thereof, to and including \$1,000,000.00
\$50,000.00 to \$100,000.00	\$574.75 for the first \$50,000.00 plus \$6.25 for each additional \$1,000.00 or fraction thereof to and including \$100,000.00
\$100,000.00 to \$500,000.00	\$887.25 for the first \$100,000.00 plus \$5.00 for each additional \$1,000.00 or fraction thereof, to and including \$500,000.00
\$500,000.00 to \$1,000,000.00	\$2,887.25 for the first \$1,000,000.00 plus \$4.25 for each additional \$1,000.00, or fraction thereof, to and including \$1,000,000.00
\$1,000,000.00 and up	\$5,012.25 for the first \$1,000,000.00 plus \$2.75 for each additional \$1,000.00 or fraction thereof