



**CITY OF HAMILTON**  
**BUILDING & PLANNING DEPARTMENT**  
 200 EAST MAIN HAMILTON, TX 76531  
 TEL: 254-386-8116 EXT 4  
[BLDG@CI.HAMILTON.TX.US](mailto:BLDG@CI.HAMILTON.TX.US)  
[WWW.HAMILTONTXAS.COM](http://WWW.HAMILTONTXAS.COM)

## TRADE PERMIT APPLICATION

Please complete applicable portions for the type(s) of work being done.

PERMIT NO. B \_\_\_\_\_ - \_\_\_\_\_

PROJECT ADDRESS:			
PROPERTY DESCRIPTION:		LEGAL DESCRIPTION (Subdivision, Block & Lot)	PARCEL ID
			ZONING <input type="checkbox"/> RS - 1 <input type="checkbox"/> GENERAL RESIDENTIAL <input type="checkbox"/> RS - 2 <input type="checkbox"/> OTHER _____
OWNER:		NAME:	EMAIL:
ADDRESS:		TELEPHONE:	
COMPANY NAME & CONTACT PERSON:		EMAIL:	
GENERAL CONTRACTOR:		ADDRESS:	
		TELEPHONE:	
COMPANY NAME & CONTACT PERSON:		REGISTRATION NUMBER:	
MECHANICAL CONTRACTOR:		ADDRESS:	
		TELEPHONE:	
COMPANY NAME & CONTACT PERSON:		REGISTRATION NUMBER:	
ELECTRICAL CONTRACTOR:		ADDRESS:	
		TELEPHONE:	
COMPANY NAME & CONTACT PERSON:		REGISTRATION NUMBER:	
PLUMBING CONTRACTOR:		ADDRESS:	
		TELEPHONE:	
CLASS OF WORK*: (Check all that apply)		<input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> REMODEL <input type="checkbox"/> REPAIR <input type="checkbox"/> FENCE <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> PLUMBING <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> LAWN IRRIGATION <input type="checkbox"/> OTHER _____	
DESCRIPTION OF WORK:			
ELECTRICAL PROVIDER:		<input type="checkbox"/> TNMP <input type="checkbox"/> HAMILTON COOP	GAS PROVIDER: <input type="checkbox"/> ATMOS <input type="checkbox"/> OTHER
LIVING AREA IN SQ FEET		GARAGE IN SQ FEET:	
COVERED PORCH IN SQ FEET		NUMBER OF STORIES:	
TOTAL COVERED BLDG AREA:		PLAN NUMBER	
WATER SERVICE:		<input type="checkbox"/> NEW <input type="checkbox"/> EXISTING	SEWER SERVICE: <input type="checkbox"/> NEW <input type="checkbox"/> EXISTING
IS THIS PROPERTY IN A FLOODPLAIN?		<input type="checkbox"/> NO <input type="checkbox"/> YES (If yes, provide Flood Plain Certificate)	
LOCATION OF LEGAL CONSTRUCTION WASTE DISPOSAL:			
NOTES:			

I hereby certify that I have read and examined this application and know the same to be true and correct. I certify that the project described herein will be built in accordance with the plans and specifications submitted at the time of application. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. Granting of a permit does not presume to give authority to violate or cancel the provisions of any local or state law regulating construction or the performance of construction. A PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED. ALL PERMITS REQUIRE FINAL INSPECTION. A Certificate of Occupancy must be issued before any building is occupied. Permit Application must be presented with applicant's original signature. All submittals sent by mail or delivered by courier should be presented to the attention of the Building Official at the City of Hamilton, 200 East Main, Hamilton, Texas 76531.

\_\_\_\_\_

Applicant's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Applicant Name (Please Print Legibly)

**OFFICE USE ONLY:  
RESIDENTIAL PERMIT FEES – NEW, ADDITION OR REMODEL**

PERMIT NO. B \_\_\_\_ - \_\_\_\_\_

APPROVED:	DATE:
Building Permit Fee:	
Plan Review Fee:	
Water Tap Fee:	
Sewer Tap Fee:	
Meter Deposit Fee:	
Other (Specify):	

Total Fees: \_\_\_\_\_

Receipt #: \_\_\_\_\_

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

Issued By: \_\_\_\_\_

BV Project #: \_\_\_\_\_