

Building Permit Application

City of Westworth Village – Permits Department: 817-710-2506

311 Burton Hill Rd., Westworth Village, TX 76114

Permit Application Type:

Residential
 Commercial

ROW/ Utility

Form

(SEPARATE PERMITS REQUIRED FOR ALL TRADE WORK)

Job Address:							
Property Owner:							
Email:	Phone #:						
Construction Type: New Please check he	Addition Remodel/ Repair/ Alteration ere if you will not be using the preferred city standards of 100% masonry exterior construction						
Proposed Use of Building/ Land:							
Value of Construction:	Total SQ. FT.:						
General Contractor Name:	Licensed Contractor #:						
Address:							
Email:	Phone #:						
Electrical Contractor:	Phone #:						
Mechanical Contractor:	Phone #:						
Plumbing Contractor:	Phone #:						
Detailed Description of Work:							

NOTICE:

THIS PERMIT IS ISSUED BASED UPON CURRENT APPROVED INTERNATIONAL BUILDING CODE AND THE CITY OF WESTWORTH VILLAGE CITY ORDINANCES. EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK ON THE SITE AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED ON THE SITE BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. THE BUILDING OFFICIAL IS AUTHORIZED TO GRANT, IN WRITING, ONE OR MORE EXTENSIONS OF TIME, FOR PERIODS NOT MORE THAN 180 DAYS EACH. THE EXTENSION SHALL BE REQUESTED IN WRITING AND JUSTIFIABLE CAUSE DEMONSTRATED.

I HEREBY CERTIFY THE FOREGOING TO BE CORRECT TO THE BEST OF MY KNOWLEDGE. I ALSO AGREE THE SAID WORK SHALL BE PERFORMED IN CONFORMATION WITH THE INFORMATION HEREIN SET FORTH AND ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING THE PERFORMANCE OF WORK.

Signature

Name (Print)



Α.	PERMITS DEPARTMENT					
	\Box Application & Plans Received by:	Date:				
	\Box Application Payment Received by:	Date:				
	\Box Registration with City Verified by:	Date:				
в.	Entered into Incode & Tyler Content Manager Project Code: BUILDING DEPARTMENT	Date:				
	□ Application Approved □ Application Denied Signature:	Date:				
	Reason for Denial:					
c.	Application Routed to Public Works Department by: PUBLIC WORKS DEPARTMENT	Date:				
	□ Application Approved □ Application Denied Signature:	Date:				
	Reason for Denial:					
	If approved for permit, route to Permits Department. If denied, route to City Secretary for issu					
D.	Application Routed to Permits Dept. or City Secretary by: COMMUNITY DEVELOPMENT DEPARTMENT	Date:				
E.	Signature Required if for ROW/ Utility: PERMITS DEPARTMENT	Date:				
	\Box Inspection Forms Received and Scanned by:	Date:				
	Permit Created by: Permit # Issued:	Date:				
	Routed to Building Department by:	Date:				
	Permit Mailed to Applicant by:	Date:				
	\Box Permit & Application Added to Property File by:	Date:				
F.	Permit File Closed by:	Date:				
G.	 Denial Notice Mailed to Applicant & Coped to Application by: Data data data data data data data data					

RECEIPT



Impervious Surface Questionnaire

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Impervious surface is anything on your property that restricts rainwater from hitting the dirt to be absorbed. Examples include: concrete, pavers, swimming pools, sheds, etc. City Zoning Ordinances set the maximum amount of impervious surface allowed on each lot. This information is required for all permits. Please completely fill out the form below, marking N/A for the impervious surface areas that do not apply to this property.

Total Square Footage of:

Lot:	_sq. ft.	Building Foundation (incl. patio & garage):	_sq. ft.
Driveway & Sidewalks:	_sq. ft.	Pool & Decking:	.sq. ft.
Each Accessory Building:			
Building #1:	_sq. ft.	Building #2:	sq. ft.
Building #3:	_sq. ft.	Other:	_ sq. ft.

Signature

Name (Print)

Form



FOR INTERNAL CITY USE ONLY							
Α.	PERMITS DEPARTMENT						
	Questionnaire Received by:			_ Date:			
	Total Lot:	Total Imp Surface:	Zone:				
	Max % Allowed:	Current	t Existing % :				
	□ Pass □ Fail Reviewed by:			Date:			