

# CITY OF NIXON BUILDING PERMIT

\_\_\_ Bldg \_\_\_ Residential \_\_\_ Commercial \_\_\_ Sign \_\_\_ Demolition \_\_\_ Moving Date \_\_\_\_\_

Job Address					
Legal Description	Lot No.	Block	Tract		
Owner		Mailing address		Zip	Phone
Contractor		Mailing address		Phone	Registration No.
Architect or Designer		Mailing address		Phone	Registration No.
Engineer		Mailing address		Phone	Registration No.
Lender		Mailing address		Branch	
Use of Building					
Class of work: ___ New ___ Addition ___ Repair ___ Move ___ Remove					
Describe work:					
Valuation of Work: \$			Plan Check Fee	Permit Fee	
Special Conditions:					
Type of Constr.	Occupancy Group	Division	Size of Bldg (Sq ft)	No. of Stories	Max Occ. Load
Fire Zone	Use Zone	Fire Sprinklers	No. of Dwelling Units	Offstreet parking Covered:	Offstreet parking: uncovered
<b>Special Approvals</b>		<b>Required</b>	<b>Received</b>	<b>Not Required</b>	
Zoning					
Health Dept.					
Fire Dept					
Soil Repot					
Other (specify)					

**NOTICE:**

**Separate permits are required for electrical, plumbing, heating, ventilating or air conditioning. This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.**

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein 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 construction or the performance of construction.

\_\_\_\_\_  
Signature of Contractor or Authorized Agent Date

\_\_\_\_\_  
Signature of Owner Date

**When properly validated (in this space) this is your permit. (Plan Check Validation Ck. M.O. Cash**