

DALLAS COUNTY

APPLICATION: *Building Permit and Certificate of Zoning Compliance*

Permit #: _____ Date: _____ Fee: \$ _____ Check #: _____ Receipt #: _____

OWNER: _____ (Name) _____ (Mailing Address/P.O. Box) _____ (City/Post Office) (State) (Zip) _____ (Phone) <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile _____ (Email)	CONTRACTOR: _____ (Company/Name) _____ (Mailing Address/P.O. Box) _____ (City/Post Office) (State) (Zip) _____ (Phone) <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile _____ (Email)
LOCATION of PROPOSED CONSTRUCTION: _____ (Lot and Subdivision or Other Legal Description) _____ (Section Number) (Township Name) _____ (E-911 Address) (City/Post Office) _____ (Zoning District) (PIN) Proposed Building Setbacks from Property Lines: Front Yard Setback: _____ Side Yard Setback: _____ Side Yard Setback: _____ Rear Yard Setback: _____	PROPOSED CONSTRUCTION: _____ (Description of Work) _____ (Intended Use of Structure) _____ (Structure Type and Group) _____ (Sq. Ft., Main Floor) (Sq. Ft., 2nd Floor) _____ (Sq. Ft., Finished Basement) (Sq. Ft., Unfinished Basement) _____ (Sq. Ft., Garage/Accessory) (Sq. Ft., Porch/Deck) \$ _____ (Estimated Construction Cost) Septic Permit #: _____

PERMITS and INSPECTIONS

The issuance of a permit based on plans, specifications and other data shall not prevent the building official from thereafter requiring the correction of errors in said plans, specifications and other data, or from preventing building operations being carried on thereunder when violation of this code or other ordinances of Dallas County. It shall be the duty of the person doing the work authorized by a permit to notify the building official that such work is ready for inspection. The building official may require that every request for inspection be filed at least one (1) working day before such inspection is desired. It shall be the duty of the person requesting any inspections required by this code to provide access to and means for inspection of such work.

LIABILITY for DAMAGES

This Code (Dallas County Uniform Building Code) is enacted only for the purpose of securing to individuals the enjoyment of rights and privileges to which they are entitled as members of the public, rather than for the purpose of protecting any individuals from harm. The County, its officers, employees or agents make no representations or warranties of any kind whatsoever, express or implied, with respect to the completeness or thoroughness of the inspections and examinations performed under this Code, but said inspections are made solely to assist the owner of any building, structure, equipment and premises to meet certain minimum requirements of this Code and to compel, if necessary, the owner to meet the minimum requirements for the protection of the health, welfare and safety of persons and property. Nothing herein contained in this Code shall alleviate the owner of any building, structure, equipment or premises to make an independent inspection to fulfill the requirements of this Code nor shall this Code be construed to relieve or lessen the responsibility of any person owning, operating or controlling any building, structure, equipment or premises regulated herein from any damages to any person or property caused by defects or code violation. The County, its officers, employees or agents shall not be held as assuming any liability for damages to any person or property by reason of any inspections authorized by this Code or investigations, or any approvals issued herein, or for any act or failure to act in the enforcement of this Code.

Signature of Owner
or Authorized Agent _____ Date _____

DALLAS COUNTY SUBCONTRACTOR LIST

Company Name: _____

Phone: _____ Mailing Address/
P.O. Box: _____

City: _____ State: _____ ZIP: _____

Type of Work: _____

Company Name: _____

Phone: _____ Mailing Address/
P.O. Box: _____

City: _____ State: _____ ZIP: _____

Type of Work: _____

Company Name: _____

Phone: _____ Mailing Address/
P.O. Box: _____

City: _____ State: _____ ZIP: _____

Type of Work: _____

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Company Name: _____

Phone: _____ Mailing Address/
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City: _____ State: _____ ZIP: _____

Type of Work: _____