



Start Date: _____

City of Wharton Code Enforcement Dept. *Building/Mechanical/Sign Permit Application*

Permit #: _____ Date: _____

Please Print

Property Address: _____

Owner Name: _____

Mailing Address: _____

Phone: _____

Subdivision: _____ Lot: _____ Block: _____ No. of Stories: _____

Description of work to be performed:

NATURE OF PROPOSED DEVELOPMENT

() Residential () Non-Residential

DESCRIPTION OF PROPOSED DEVELOPMENT

() New Construction/Addition () Substantial Improvement/Alteration
() Manufactured Home () Other _____ (Paving, Demolition, Moving, Fill, Excavation, etc.)

***| Property is located in Zone _____.

***Recommended build-up is _____.

***If property is located in a Flood Zone, do we have an Elevation Certificate? YES or NO

***Is a Development Permit Required? YES or NO

Substantial improvement threshold:

Applies to residential, commercial, or industrial structures within the AE Zone. When an improvement is made to a structure that is equal to or greater than 50 percent of its appraised value in accordance with the Wharton Central Appraisal District, the entire structure must be brought into compliance with floodplain regulations. Each separate improvement is considered individually relative to the 50-percent threshold. **(Please initial)** _____

If project is intended for Public or Commercial Property:

An asbestos survey has been conducted in accordance with the Texas Asbestos Health Protection Rules (TAHPR) and the National Emission Standards for Hazardous Air Pollutants (NESHAP) for the areas being renovated and/or demolished.

YES _____ NO* _____
(PLEASE INITIAL)

*If the answer is NO, then as the owner/operator of the renovation/demolition site, I understand that it is my responsibility to have this asbestos survey conducted in accordance with Texas Asbestos Health Protection Rules (TAHPR) and the National Emission Standards for Hazardous Air Pollutants (NESHAP) prior to a renovation/demolition permit being issued by the City of Wharton.

****Roll-offs must be rented from Waste Corporation of America (WCA)****

Disposal of Debris:

Contractor: _____

Address: _____

Phone: _____

Square Feet: _____ Private Public Estimated Value: _____

Permit Type: Building Mechanical Sign Building (E)

Signature of Contractor or Authorized Agent **(Sign & Print Name)**

Date

****Permit fees must be paid prior to inspection(s).**

****A daily fee of \$100 if work begins before the issuance of a valid permit.**

****Re-inspection fees are required for failed inspections and must be paid prior to the re-inspection.**