



CITY OF BRECKENRIDGE
105 N. Rose Ave.
Breckenridge, TX 76424
254-559-8287

PLOT PLAN DRAWING REQUIRED ON ALL ADDITIONS & NEW CONSTRUCTIONS
APPLICATION FOR BUILDING PERMIT
NOTICE – THIS IS NOT A PERMIT

DATE: _____
COST OF CONSTRUCTION: \$ _____
PERMIT #: _____ (after approval)
PERMIT FEES: _____ (after approval)
RECEIPT #: _____ (after approval)

BUILDING ADDRESS: _____ ZONING CLASSIFICATION: _____
LEGAL DESCRIPTION: _____

LOT OWNER'S NAME: _____ ADDRESS: _____

USE OF BUILDING: _____

DISTANCE FROM STRUCTURE TO FRONT YARD PROPERTY LINE: _____ REAR YARD: _____
SIDE YARD: _____

LOT DEPTH: _____ LOT WIDTH: _____ LOT AREA: _____
(SQUARE FEET)

LOT COVERAGE BY BUILDING : _____ HEIGHT OF BUILDING: _____
(SQUARE FEET)

NUMBER OFF STREET PARKING SPACES: _____ NUMBER OF BUILDINGS ON LOT: _____
(1 SPACE 9'X18')

CLASS OF WORK TO BE DONE: _____
(REPAIR, ADDITION, ALTERATION, NEW CONSTRUCTION)

DOES WORK INVOLVE CHANGE IN USE OF BUILDING? _____ IF YES, PLEASE DESCRIBE:

DESCRIPTION OF WORK TO BE DONE: _____

BASEMENT SIZE: _____ BY _____ NUMBER OF BATHS: _____ NUMBER OF FAMILIES: _____

FOUNDATION: _____
(PIERS, POST, ROCK, CONCRETE, CINDER, BLOCK, ETC.)

NUMBER & TYPE OF PLUMBING FIXTURES: _____
(SPECIFY)

NUMBER & TYPE OF ELECTRICAL FIXTURES: _____
(SPECIFY)

AIR CONDITIONING (BUILD-IN, FORCED AIR, CENTRAL, ETC.) _____
(SPECIFY TONS OF BTU RATING)

HEATING: (CENTRAL, FORCED AIR, FLOOR FURNACE, OVERHEAD, STEAM, GAS, HEATERS, WALL,
RADIANT, ETC.) _____
(SPECIFY BTU'S)

GARAGE OR CARPORT SIZE: _____ ATTACHED TO HOUSE: _____
(SPECIFY) (SPECIFY)

ADDITIONAL FEATURES: FENCING, FIREPLACE, SWIMMING POOL, PATIO SIZE ____X____, ELEVATORS,
FIRE SPRINKLERS, WATER SPRINKLERS, VAULTS, COPPER SCREENS, OPEN PORCHES, WINDOW BOXES,
AWNINGS, GUTTERS, ATTIC FAN, WOOD BURNING, STOVES, ECT.

(SPECIFY)

TYPE OF STRUCTURE (SINGLE FAMILY DWELLING, TWO FAMILY DWELLING, MULTI FAMILY DWELLING,
COMMERCIAL BUILDING, INDUSTRIAL BUILDING, SWIMMING POOL, SIGNS):

BUILDING CONTRACTOR: _____
PLUMBING CONTRACTOR: _____
ELECTRICAL CONTRACTOR: _____
CONSTRUCTION WILL BEGIN ON _____ AND WILL BE COMPLETED BY _____.

THE UNDERSIGNED HEREBY DECLARES THE ABOVE STATEMENTS ARE TRUE FACTS FOR WHICH
APPLICATION FOR A BUILDING PERMIT IS MADE AND THAT HE OR SHE IS THE OWNER OF SAID BUILDING
OR HAS BEEN AUTHORIZED BY THE OWNER TO PROCURE THIS PERMIT.

HAVE YOU HAD THE ASBESTOS SURVEY DONE? _____

SIGNATURE OF APPLICANT

STREET ADDRESS

CITY

STATE ZIP

PHONE NUMBER

REMARKS: _____

SEC. 5.76 DEVELOPMENT PERMIT

SEC. 5.77 COMPLIANCE

SEC. 5.83 FLOOD DAMAGE MANAGEMENT AND PREVENTION

IS PROPOSED STRUCTURE OR DEVELOPMENT IN:

FLOODWAY _____ FLOODPLAIN _____ NEITHER _____

(IF APPLICATION) ELEVATION CERTIFIED ATTACHED _____

FLOODPLAIN ELEVATION _____

APPROVED/DENIED (SEC. 5.82) FOR COMPLIANCE/NON-COMPLIANCE SECTION V CODE OF ORDINANCES, CITY OF BRECKENRIDGE, TEXAS.

CITY MANAGER

RECEIVED AND APPROVED FOR COMPLIANCE WITH CODE PROVISIONS

BUILDING OFFICIAL

BUILDING INSPECTOR

_____ CODE ENFORCEMENT OFFICER

_____ CITY SECRETARY

FOR OFFICE USE ONLY

PLUMBING PERMIT# _____

DATE _____

ELECTRICAL PERMIT _____

DATE _____