



# CITY OF FRIENDSWOOD

## *IRRIGATION REQUIREMENTS*

THE FOLLOWING ITEMS MUST BE SUBMITTED AS ONE(1) COMPLETE PACKAGE

- Complete Building Permit
- Complete Plumbing Permit
- Signed Irrigation Requirements Form
- Copy of Contract
- Two(2) Sets of Detailed Plans

Texas Commission on Environmental Quality requires the connection of a landscape irrigation system to a water supply must be performed by either a licensed irrigator, licensed installer or an individual within sight of and under the direct control of a licensed irrigator.

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Signature

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License #

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Address of Job

**[www.ci.friendswood.tx.us](http://www.ci.friendswood.tx.us)**



# BUILDING PERMIT APPLICATION

\*Applicant to complete all required spaces

JOB ADDRESS (CORRECT ADDRESS IS REQUIRED TO PROCESS THIS APPLICATION)\*

1. \_\_\_\_\_

2. LEGAL DESCRIPTION	LOT NO.	BLOCK	SUBDIVISION	SHOPPING CENTER
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3. OCCUPANT\* MAILING ADDRESS\* ZIP\* PHONE/FAX\*

3. BUILDING OWNER \* MAILING ADDRESS\* ZIP\* PHONE/FAX\*

4. DESIGN PROFESSIONAL\* MAILING ADDRESS\* ZIP\* PHONE/FAX\*

5. CONTRACTOR \* MAILING ADDRESS\* ZIP\* PHONE/FAX\*

6. USE OF BUILDING\*

7. CLASS OF WORK\*:  NEW  ADDITION  ALTERATION  REPAIR  MISCELLANEOUS

8. DESCRIBE TYPE OF WORK YOU ARE PERFORMING\*:

9. TDLR PROJECT NUMBER \*(TEXAS DEPARTMENT OF LICENSING AND REGULATION REQUIRES ALL NON RESIDENTIAL projects that exceed \$50,000.00 to have a project number assigned to it by TDLR and said number shall be provided to the City on this application prior to acceptance of plans.) (To register call 512-463-7357)  
TDLR NUMBER: \_\_\_\_\_

10. TOTAL VALUATION OF WORK*:	11. TYPE OF ROOF*:	12. BUILDING HEIGHT*:	13. SLAB ELEVATION*:	14. Total Impervious Cover
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\*\*Slab/lowest floor of structure in flood prone area shall be certified by a registered engineer or registered public surveyor to be 24 inches above the 100 year base flood elevation.  
**A stamped form survey with slab form elevation shall be submitted PRIOR to slab inspection.**

**NOTICE**

SEPARATE PERMITS ARE REQUIRED FOR DRIVEWAY, DRIVEWAY APPROACHES, PUBLIC WALKS, RAMPS, SIGNS, ELECTRICAL, MECHANICAL, PLUMBING, HEATING, OR VENTILATING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION IS SUSPENDED OR ABANDONED FOR A PERIOD OF SIX 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.

**FOR OFFICE USE ONLY**

**PLAN REVIEW FEE:**

Plan Review Fee x .50 \_\_\_\_\_

**Approvals**

Accepted by \_\_\_\_\_ Date \_\_\_\_\_

Building Official \_\_\_\_\_ Date \_\_\_\_\_

City Planner \_\_\_\_\_ Date \_\_\_\_\_

Fire Marshal \_\_\_\_\_ Date \_\_\_\_\_

Application Number \_\_\_\_\_

**Building Permit fee shall be paid after plan review is completed**

Building Permit Fee \_\_\_\_\_

Flood Zone: \_\_\_\_\_

CFM Initials: \_\_\_\_\_

**APPLICANT NEEDS TO COMPLETE THE SPACES BELOW.**  
*State N/A to those sections that do not apply to the structure or work you are performing.*

Construction Type	Occupancy Group	Occupant Load
1 <sup>st</sup> Floor (S.F.)	Number of Stories	Parking Spaces
2 <sup>nd</sup> Floor (S.F.)	Total Paving	Use Zone
3 <sup>rd</sup> Floor (S.F.)	Lot Size	Fire Sprinkler Req. Yes or No
Garage (S.F.)	Total Building (S.F.)	% Lot Coverage

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

PRINTED NAME OF APPLICANT \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

**NEW CONSTRUCTION CHECKLIST**  
**\*\*\*\*\* APPLICANT TO COMPLETE\*\*\*\*\***

Circle one:

**NEW CONSTRUCTION REQUIREMENTS:**

- |   |     |    |
|---|-----|----|
| 1. Is the site platted?                         | Yes | No |
| 2. Is the site sub-divided?                     | Yes | No |
| 3. Are utilities available?                     | Yes | No |
| 4. Is the site properly zoned?                  | Yes | No |
| 5. Is a landscaping plan provided?              | Yes | No |
| 6. Are required public walks provided?          | Yes | No |
| 7. Are engineered plans signed?                 | Yes | No |
| 8. Have all applicable drainage fees been paid? | Yes | No |

**TECHNICAL REQUIREMENTS:**

- |  |     |    |
|--|-----|----|
| 1. Are architectural plans provided?                             | Yes | No |
| 2. Is a energy code compliance report provided?                  | Yes | No |
| 3. Is a site plan provided (Site Elevation)?                     | Yes | No |
| 4. Is a foundation plan provided?                                | Yes | No |
| 5. Is a plumbing riser diagram provided?                         | Yes | No |
| 6. Is a gas piping diagram provided?                             | Yes | No |
| 7. Is a water piping diagram provided?                           | Yes | No |
| 8. Is an electrical load analysis provided?                      | Yes | No |
| 9. *****Is an electrical service diagram provided? *****         | Yes | No |
| 10. *****Is an electrical lighting and power plan provided?***** | Yes | No |
| 11. Is an HVAC diagram provided?                                 | Yes | No |
| 12. Is a windstorm compliance plan provided?                     | Yes | No |
| 13. Is a framing plan provided?                                  | Yes | No |
| 14. *****Are technical specs provided?*****                      | Yes | No |

\*\*\*\*\*Required for Commercial. Addition information may be required for Commercial Plans\*\*\*\*\*

**Please Note: The permit application and plans WILL BE RETURNED if all required documents are not provided at the time of submittal.**

Permit Fees  
 Total Valuation

**A. Building**

\$0.00 to \$1,000	No fee, unless an inspection is required, in which case a \$15.00 fee for each inspection shall be charged
\$1,001 to \$50,000.00	\$15.00 for the first \$1,000.00 plus \$5.00 for each additional thousand or fraction thereof, to and including \$50,000.00
\$50,001 to \$100,000	\$260.00 for the first \$50,000 plus \$4.00 for each additional thousand or fraction thereof, to and including \$100,000.00
\$100,001 to \$500,000	\$460.00 for the first \$100,000 plus \$3.00 for each additional thousand or fraction thereof to and including \$500,000
\$500,001 and up	\$1,660.00 for the first \$500,000 plus \$2.00 for each additional thousand or fraction thereof.

**B. Moving Fee**

For the moving of any building or structure, the fee shall be \$100.00

**C. Demolition Fee:**

For the moving of any building or structure, the fee shall be \$50.00. 0 up to 100,000 cu ft  
 \$.50 100,000 cu ft and over per 1,000 cu. Ft.

**D. Penalties**

Where work for which a permit is required by this Code is started or proceeded prior to obtaining a permit, the fees herein specified shall be doubled, but the payment of such double fees shall not relieve any persons from fully complying with the requirements of this Code in the execution of the work nor from any other penalties prescribed herein.



# City of Friendswood

910 South Friendswood Dr.

Friendswood, TX 77546

281-996-3201

## PLUMBING PERMIT APPLICATION

### PROPERTY INFORMATION

Date: \_\_\_\_\_

Job Address: \_\_\_\_\_

Job Description: \_\_\_\_\_

Owner/Occupant/Business: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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### CONTRACTOR INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

WATER METER <input type="checkbox"/> YES <input type="checkbox"/> NO  INDICATE SIZE/TYPE OF METER(S) _____			
#		EACH	TOTAL
	Plumbing Permit	10.00	
	Each Fixture, Floor Drain or Trap (Including All Piping)	2.50	
	Sewer Connection	5.00	
	Replacement or Repair of Sewer	5.00	
	Septic Tank, Seepage Pit or Drainfield	10.00	
	Water Heater and/or Vent	2.50	
	Installation, Alteration or Repair of Water Piping and/or Water treating Equip.	5.00	
	Repair or Alteration of Drainage or Vent Piping	5.00	
	Vacuum Breakers or Backflow Protective Devices (1 to 5)	2.50	
	Vacuum Breakers or Backflow Protective Devices (Over 5, Each)	1.50	
		Total Fees	

PRINT NAME: \_\_\_\_\_ LICENSE # \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER OF THIS BUILDING AND THE ABOVE SIGNED AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE CITY OF FRIENDSWOOD

# CITY OF FRIENDSWOOD

## BACKFLOW PREVENTION ASSEMBLY CERTIFIED TEST REPORT

<b>Name of Property:</b>			
<b>Property Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Mailing Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Phone #</b>	<b>Key Map #</b>	
<b>ATTN: WATER QUALITY CONTROL BRANCH</b>			
THE BACKFLOW PREVENTION ASSEMBLY DETAILED HEREON HAS BEEN TESTED AND MAINTAINED AS REQUIRED BY TEXAS NATURAL RESOURCE CONSERVATION COMMISSION WATER HYGIENE, RULES AND REGULATIONS FOR PUBLIC WATER SYSTEMS, AND IS CERTIFIED TO COMPLY WITH THE REQUIREMENTS.			
<b>BFP Type:</b>	<b>Make/Model #</b>		
<b>Serial #</b>	<b>Size:</b>	<b>Installation Date:</b>	
<b>Location of BFP:</b>			
<b>Gauge Type:</b>	<b>Gauge Serial #</b>		
<b>Last Gauge Test Date:</b>	<b>Last Gauge Calibration Date:</b>		

	Double Check Valve Assembly		Reduced Pressure Principle Assembly	Pressure Vacuum Breaker	
	Check Valve # 1	Check Valve # 2	Relief Valve	Air Inlet	Check Valve
<b>Initial Test</b>	D.C. Closed Tight 0 RP_____PSID	Closed Tight 0	Opened At _____PSID	Opened At _____PSID	Held At _____PSID
	Leaked 0	Leaked 0	Did Not Open 0	Did Not Open 0	Leaked 0
<b>Repairs</b>					
<b>Final Test</b>	D.C. Closed Tight 0 RP_____PSID	Closed Tight 0	Opened At _____PSID	Opened At _____PSID	Held At _____PSID

<b>Remarks</b>			
<b>THE ABOVE IS CERTIFIED TO BE TRUE</b>			
<b>CTS Firm Name:</b>		<b>Certified Tester:</b>	
<b>Firm Address:</b>		<b>Certified Tester #</b>	
<b>City:</b>	<b>State:</b>	<b>Zip:</b>	<b>Expiration Date:</b>
<b>Firm Phone #</b>		<b>Test Date:</b>	