



City of Harlingen
Commercial Permit Application

Name of Project: \_\_\_\_\_

Address of Project: \_\_\_\_\_

General Contractor: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Describe Proposed Work: \_\_\_\_\_
(i.e. new commercial building, alternation to commercial building, addition to commercial building)

Building Square Footage: \_\_\_\_\_ Building Construction Value \$ \_\_\_\_\_

Will an exterior advertising sign be installed (advertising business)? Yes \_\_\_ No \_\_\_

Will off-premise sign be installed (not advertising for business at location)? Yes \_\_\_ No \_\_\_
If yes, describe? \_\_\_\_\_

Legal description of property where construction is proposed

Subdivision: \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

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

The foregoing is a true and correct description of the improvement proposed by the undersigned applicant, and the applicant of the improvement proposed by the undersigned applicant, and the applicant states that he/she will have full authority over construction of same.

The building permit shall not be held to permit or be an approval of the violation or modification of any provision of the City ordinances, codes, or State law or be a waiver by the City of such violation.

Alterations, changes or deviations from the plans authorized by this permit are unlawful without written authorization from the Building Inspection Department.

The applicant hereby agrees to comply with all City ordinances, codes, and State laws and assumes all responsibility for such compliance.

It is understood that the improvements shall not be occupied until a Certificate of Occupancy has been issued.

\*\* The applicant hereby warrants that the property is legally owned by the applicant or that the applicant is acting as an agent of the legal property owner.

\*Property owner will be required to sign as well as sign contractor for off-premise sign permits.

\*Submittal less than four (4) sets of plans will not guarantee ten (10) day turn around.

Authorized Agent/Owner \_\_\_\_\_

Office Use only:

District Zone: \_\_\_\_\_ Located in Flood Zone: Yes \_\_\_ No \_\_\_ Flood Zone: \_\_\_\_\_

TAS I.D. #: \_\_\_\_\_ Date Received: \_\_\_\_\_