

## City of San Angelo, Texas - Building Permits & Inspections 52 West College Avenue



## **Brick Ledge Permit Application**

NOTE: Incomplete applications will not be accepted. All required fields must be filled in adequately. The contact person will be notified of any changes in status & contacted with any questions. Use "N/A" where an item is not applicable.

OFFICE USE ONLY:	
PERMIT #:	Ī
DATE ACCEPTED:	Ī

PLEASE PRINT ALL INFORMATION			
Section 1: Basic Information			
Property Address			
Legal Description (can be found on p	property tax statement or at <u>www.tomgreencad.com</u> )		
Project Valuation (estimate):			
Contractor Name	Phone Number	Email Address	
Property Owner Name	Phone Number	Email Address	
Section 2: Property Charac	teristics		
Lot Size (Square Feet)	Size (Acreage)		
Description of work:			
Existing Zoning:	□ CN □ CO □ CG □ CH □ CG/CH □ CBD		
Section 3: Masonry require (By checking the boxes you indicate)	ments te that you understand each construction and insp	pection requirement)	
☐ The brick ledge must have an 8" wide by 12" deep footing with four 1/2" rebar equally spaced.			
☐ Must have weep holes every 33".			
☐ Must have one brick tie every three square feet, not to exceed 24" on center.			
This review is based upon the latest adopted applicable codes of the City of San Angelo and does not relieve any or all parties from complying with all federal, state, or local rules and regulations that may not have been covered or mentioned. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. You have the right to appeal any administrative decision to the appropriate appeals board.			
The undersigned hereby applies for brick ledge permit approval in accordance with the policies and regulations of the City of San Angelo and certifies that the information on this application is true and accurate to the best of my knowledge.			
Contractor or Property Owner Signat	ure Date		
FOR OFFICE USE ONLY Reviewed/Accepted by:	Date:/	/   Verified Complete  Verified Incomplete	
Action needed:			
Permit Number:	Issued By:		