

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



Commercial Building Permit Application

NOTE: Incomplete or illegible applications will not be accepted. All applications must be submitted digitally. All required fields must be filled in adequately. The Authorized Representative (as designated in Section 1) will be notified of any changes in status & contacted with any questions. Use "N/A" where an item is not applicable.

Section 1: Basic Information									
Address		Busines	s Name						
Legal Description (can be for	und on property tax sta	atement or at <u>www.tomgreend</u>	cad.com)						
Point of Contact / Authorized Representative - All communications will be conducted with this individual. Additional individuals will be added as "Applicant Associates" that can view projects but not make any changes.									
Point of Contact:Name		Phone Number Ei		mail Address					
Tenant:Name/Company		Phone Number			Email Address				
, ,		. Hone Hamber							
Property Owner:Name		Phone Number			Email Address				
Contractor: Name/Company	/Contractor #	Phone Number			Email Address				
Architect/Engineer/Design P			Di N		5 7511				
	Name		Phone Nur	nber	Email Address				
Section 2: Property C	haracteristics	ROW Distance (Lin Ft)	Frontage (Lin Ft)		Street Name				
Lot Size (Square Feet)	Lot Frontage 1:			-					
	Lot Frontage 2:			-					
Lot Size (Acreage)	Lot Frontage 3:			_					
	Lot Frontage 4:			-					
Is the proposed project any o	=	ast 25,000 square feet of gros	ss floor area?						
Construction of a building comprising at least 10,000 square feet of gross floor area and which is located on the same lot as an existing building comprising at least 25,000 square feet of gross floor area?									
			et of gross floor area or	has	an existing Urban Design Review?				
☐ Construction of more	e than one principal bu	uilding for multi-family residen	ntial use on a single lot o	or tra	ct of land?				
☐ Construction of more	e than one principal bu	uilding for single-family or two	-family residential use o	on a s	single lot or tract of land?				
Section 3: Utility Infe	ormation								
Water:	- requesting new serv	ices	Sewer:		City - requesting new services				
☐ City - utilizing existing servi		rices			City - utilizing existing services				
☐ Othe	er				Other				
					Septic System				
(NOTE: Please see Tom Green County Health Department for Septic System Permit 325-658-1024)									

Section 4: Project Scope	☐ Change of occupancy ☐ Construction ☐ Addition ☐ House Moving ☐ Repair Work
	☐ Alteration ☐ Demolition ☐ Carport ☐ Accessory Building
Valuation:	Description of Work:
Section 5: Land Use / Occup	pancy (section applicable to non-residential or multi-family projects only)
current Zoning:	Is there currently an open application to rezone? ☐ Yes ☐ No
xisting Use or Most Recent Use of L	Land:
oes the Proposed Use Require a Co	
_	<u>lse Table</u> or contact the Planning Division at 657-4210, #2)
xisting Use or Most Recent Use of A	All Building(s) (if they exist):
roposed Use of All Building(s):	
loes the proposed use / occupancy in	· ·
if yes, summarize the types of thir	ngs which will be stored
If ves. how many employees does	s the business have?
	hemselves, or shelving - exceed 12' in height?
	tside building(s) on site?
oes the proposed use / occupancy i	
	iness take place on-site, off-site, or both?
	urt-time lodging on-site? If so, explain:
sthere a freight movement compone	ent to the business? If so, explain:
s there a manufacturing component t	to the business? If so, explain:
s there a sales component to the bus	siness? If so, explain:
s there any existing or proposed stora	rage of fuel or water on-site? If so, explain:
multi-family or lodging, how many u	inits?
he undersigned certifies that the	ne above information is correct to the best of my knowledge and that I have read, fully under
	ble city ordinances and specifications.
Authorized Deservation Of	inature Date
Authorized Representative Sig	, induit Date

Business Nam	ne:Address:						
COMMERCIAL CONSTRUCTION - PERMIT CHECKLIST							
N/A	General Requirements						
	A completed application. All information must be completely filled out.						
	One complete digita l set of plans with specifications, fully dimensioned. Plans must be drawn to scale and indicating the scale used. These plans must include:						
	Construction drawings (with Engineer & Architect drawings as required¹)						
	Foundation Detail						
	Wall sections						
	o Typical (wall) Framing Detail						
	o Elevation Drawings for all 4 sides						
	Roof Detail						
	Floor plan						
	Proposed building uses.						
	 Each space must have the proposed use labeled. 						
	 Label each room with use and dimensions. Include aisles, offices, restrooms, etc. 						
	 If storage is included, indicate the height of the storage. 						
	 Fire extinguisher location(s) and type(s). 						
	 Include a legend providing symbol guide and information. 						
	Emergency & Exit Lighting.						
	 Include a legend providing symbol guide and information. 						
	Room finish schedule						
	 Include for floor, walls, and ceilings. 						
	Door / door hardware schedule. ²						
	Fixture Layouts						
	 N/A if no shelving/cabinets exist or are proposed. 						
	Plumbing fixture schedule.						
	 N/A only if no plumbing work is involved. 						
	Window schedule						
	 Required when replacing existing windows or when adding new windows (Mark N/A if none of the above apply.). 						
	Seating Diagrams (for Assembly³ occupancies)						
	 See footnote 3 for more details. 						
	Specifications						
	Structural						
	Mechanical						
	N/A if no mechanical work is proposed						
	- r r						

Specifications (Continued)						
Electrical						
N/A if no electrical work	k is proposed					
Plumbing						
o N/A if no plumbing work	k is proposed					
Energy Code Compliance Form						
o N/A if space is not heat	,					
Kitchen Equipment, if applicable						
o N/A if no kitchen equip						
Provide Engineer & Architect drawing	• •					
		g authorities' rules and guidelines.				
State of Texas Safety and Compliance		g				
TDLR application with the revie		red ⁵ .				
o N/A if project cost is un	der \$50,000.					
 Asbestos survey, if required⁶. 						
o Required if altering or c	connecting to an ex	kisting building				
D. D. William A. Llaure Standard		(500)				
Required Building Address Signage	and Fire Departr	nent Connections (FDC)				
Required Signage for chemicals, flar existing or if not storing materials)	mmable/combust	ible materials, fuel etc. (N/A if already				
Texas Engineering Practice Act Sec. <u>1001.053</u> , <u>1001.056</u> & Architecture (<u>TBAE Rules and Regulations of the Board Regulations</u>)						
 Required for all doors, both existing and proposed. Assembly occupancies include but not limited to the following: the recreation, entertainment, spectator seating, and viewing of outdo Code. 						
4. Please find more information on compliance checks (COMchecks) at the following link: http://www.energycodes.gov/comcheck						
 TDLR Review required subject to provisions of <u>Title 4</u>, <u>Subtitle E</u> construction cost of at least \$50,000. Please visit https://www.tdlr.texas.gov/TABS to be 	dlr.texas.gov/ or www.	statutes.legis.state.tx.us/Docs/GV/htm/GV.469.htm for				
 Required if project is an existing building with alterations. Please information of the requirements by the State of Texas. This is no by the original architect of record for the building stating that no for an asbestos survey. 	ot a local requirement a	nd cannot be waived or exempted. If a letter is provided sealed				
Business Name	Address	S				
I certify that all items above have been proteins information will result in an incomplete a all minimum requirements have been address	pplication, which					
Applicant		 Date				
• •	2	Approved September 2023				