



**NEW RESIDENTIAL BUILDING APPLICATION**

PROPERTY INFORMATION			
Project Address: _____			
Subdivision: _____	Section: _____	Block: _____	Lot: _____
Owner First Name: _____		Owner Last Name: _____	
Owner Address: _____		Owner Phone: _____	

CONTRACTOR INFORMATION			
General Contractor: _____		Phone Number: _____	
Contractor Address: _____	City: _____	State: _____	Zip: _____
Email: _____			

TYPE OF PERMIT (Complete all that Apply)			
<input type="checkbox"/> New Res Single Family	<input type="checkbox"/> New Multi Family - Duplex	<input type="checkbox"/> New Multi Family - Condo	* Separate Permit Required ** No Permit Required
<input type="checkbox"/> New Room Addition	<input type="checkbox"/> Attached Garage	<input type="checkbox"/> Detached Garage	
<input type="checkbox"/> with Fence **	<input type="checkbox"/> with Irrigation System*	<input type="checkbox"/> with Deck	
Total Sq Ft: _____	Deck/Patio Sq Ft: _____	Garage Sq Ft: _____	Total Non-Living Sq Ft: _____
Cost of Improvement: _____		Fence Type: _____	Fence Height: _____

PROPERTY OWNER/AGENT AUTHORIZATION			
<p><b>Homeowners Association:</b> If the property is located in a subdivision with an active Homeowners Association (HOA), please indicate whether approval has been obtained for any of the work being completed as a part of this application.      <input type="checkbox"/> YES      <input type="checkbox"/> NO      <input type="checkbox"/> N/A</p>			

**Property Owner Consent/Agent Authorization:** By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's fee schedule. This fee is non-refundable even in the event of application withdrawal. I have the power to authorize and hereby grant permission for City of Dickinson officials to enter the property on official business as part of the application process.

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Signature of Contractor/Authorized Agent _____	Printed Name _____	Date _____
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FOR OFFICE USE ONLY			
Permit Number: _____	Fees Due: _____		
Date Submitted: _____	Payment: _____		
Zoning District: _____	Plan Reviewer: _____	Date: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied

**You can email this application along with supporting documentation to:**

[permits@ci.dickinson.tx.us](mailto:permits@ci.dickinson.tx.us)