



Residential Permit Application

Permit No: _____

ADDRESS OF PROJECT: _____ LOT: _____ BLOCK: _____

SUBDIVISION: _____ County: _____

OWNER NAME: _____ PHONE: (____) _____

OWNER ADDRESS: _____ CITY _____ STATE _____ ZIP _____

OWNER E-MAIL ADDRESS: _____

CONTRACTOR NAME: _____ PHONE: (____) _____

STREET ADDRESS: _____ CITY _____ STATE _____ ZIP _____

CONTRACTOR E-MAIL ADDRESS: _____

SUB-CONTRACTORS *All general contractors and sub-contractors (electrical, mechanical, plumbing, etc.) must be registered with the City.

MECHANICAL CONTRACTOR: _____

ELECTRICAL CONTRACTOR: _____

PLUMBING CONTRACTOR: _____

OTHER: _____

Permit Type

- | | | |
|-------------------------------------------------|---------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Addition/Remodel | <input type="checkbox"/> Carport | <input type="checkbox"/> Retaining/Screening Wall |
| <input type="checkbox"/> Construction Trailer | <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Grading |
| <input type="checkbox"/> Solar Panels | <input type="checkbox"/> Driveway/Flatwork | <input type="checkbox"/> Pool/Spa |
| <input type="checkbox"/> Foundation Slab/Repair | <input type="checkbox"/> Water Well | <input type="checkbox"/> Roof Replacement |
| <input type="checkbox"/> Storm Shelter | <input type="checkbox"/> Fence | <input type="checkbox"/> Patio Cover/Arbor/Pergola/Deck |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Fire Damage Repair | <input type="checkbox"/> Manufactured Home |

DESCRIPTION OF IMPROVEMENT: _____

COST OF IMPROVEMENT (Total Dollar Value of Labor and Materials) \$ _____

SQUARE FOOTAGE OF LOT SIZE: _____ SQUARE FOOTAGE OF LIVING AREA: _____
 SQUARE FOOTAGE OF GARAGE AND/OR PATIO: _____ SQUARE FOOTAGE OF ACCESSORY BUILDING: _____
 SETBACKS: FRONT _____ REAR _____ LEFT _____ RIGHT _____
 HEIGHT OF FENCE: _____ TYPE OF MATERIAL: _____
 FENCES ON CORNER LOTS REQUIRE SETBACK of 15' FROM CURB: _____ (initial)
 ALL POSTS SHALL BE ORIENTED TOWARD THE INTERIOR OF THE LOT WITH THE SMOOTH SIDE FACING OUT: _____ (initial)
 PROJECT IN THE 100-YEAR FLOODPLAIN? ____No ____Yes (If YES, plans shall comply with floodplain regulations.)

ALL MATERIALS SUBMITTED TO THE CITY ARE THE PROPERTY OF THE CITY OF CELINA AND MAY NOT BE AVAILABLE FOR RETURN.

THIS CERTIFIES THAT ON THIS DATE, APPLICATION WAS MADE FOR PERMIT WITH THE CITY OF CELINA, AND BY THIS SIGNATURE, THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE CODES, AMENDMENTS, AND CITY ORDINANCES.

APPLICANT PRINTED NAME: _____ **DATE** _____

APPLICANT SIGNATURE: _____ **DATE** _____

Development Services
 Building Inspections
 142 N. Ohio St.
 Celina, TX 75009
 972-382-2682
permits@celina-tx.gov
 RVSD 12/14/18



ASBESTOS-RELATED STATEMENTS

PROJECT:

(Name and Location)

1) ASBESTOS SURVEY

In accordance with the Texas Asbestos Health Protection Rules (TAHPR), the, National Emission Standards for Hazardous Air Pollutants (NESHAP), and Asbestos Hazard Emergency Response Act (AHERA), as applicable, I hereby certify that an asbestos survey for the area(s) planned to be renovated and/or demolished:

Has been done () (Date of survey: _____ TDH Inspector License No.: _____)
Shall follow () (Senate Bill 509 states that a permit may not be issued without copy of Asbestos Survey or Architect/Engineer's certification stating that the project does not contain asbestos.)

I understand that it is my responsibility to have this asbestos survey conducted prior to a permit's being issued by _____ and to notify the Texas Department of Health (TDH) not later than 10 working days, as required, before starting any demolition project, regardless of whether the site contains asbestos or not.

Name (please print): _____ Phone: _____
(Owner, Owner's Agency, or Authorized Representative)

Signature: _____ Date: _____

AND/OR

2) ARCHITECT/ENGINEER CERTIFICATION

- A) () Having reviewed the Material Safety Data Sheets (MSDSs) for the materials used in the original construction, the subsequent renovations or alterations of all parts of the building affected by the planned renovation or demolition, and any asbestos surveys of the building previously conducted in accordance with the Texas Asbestos Health Protection Act; and,
- B) () In accordance with the Senate Bill 509 regulations, to the best of my knowledge, information, and belief, I certify that all parts of the buildings affected by the alteration, renovation, and demolition and/or all the materials planned for the new construction do not contain asbestos. And,
- C) () The above-referenced project is designed, specified, and intended to be constructed using asbestos-free materials in accordance with the Texas Asbestos Health Protection Act. It shall be the responsibility of the undersigned to procure and verify that all the MSDSs are conforming to the House Bill 1927 regulations and to transmit approved copy to the Building and Inspection Services Division. It is also stipulated that the contractor shall provide the Building Official, upon project completion, with final documentation stating that no prohibited asbestos-containing materials have been installed in the Project.

Architect/Engineer Signature: _____ Date and Seal:

Name (please print): _____

Company: _____

Address: _____

Phone: _____



STORM WATER POLLUTION PREVENTION AND CONSTRUCTION SITE WASTE CONSENT FORM FOR CONTRACTORS / BUILDERS / DEVELOPERS

Project: _____ Developer: _____

Pollution prevention from a construction site is not only about controlling sedimentation and siltation by means of erosion control. All construction site waste that leaves a construction area will eventually make it into the storm water system. Siltation and the contribution of other pollutants from construction sites can cause physical, chemical and biological harm to our nation's waters.

ILLICIT DISCHARGE: Any discharge from a site that is not entirely composed of storm water is known as an illicit discharge.

Please identify that you have read and understand the following construction waste guidelines by initialing each item below.

- During a short period of time, construction sites can contribute more sediment to streams than can be deposited naturally during several decades. The City of Celina requires that erosion control measures be placed and maintained regularly at all construction sites.
- If a construction site disturbs more than one (1) acre of land, it must be covered by the State's TPDES Permit TXR150000 that regulates storm water discharges to state waters.
- All building construction debris must be gathered up and removed by the end of each day of construction or just before any projected rain event. This includes, but is not limited to excavation material, vegetation, bricks, concrete, timber, metals, glass, tiles, paper and food waste.
- Waste, construction materials and pollutant materials must be kept in the proper City approved containers at designated waste storage areas throughout construction activities.
- Weeds, grass, shrubs or brush shall not be deposited in any area that will allow drainage to the storm sewer system or waters of the State.
- Any potential storm sewer pollutant (pesticides, grease, petroleum products, paints, toxic chemicals, etc.) must be stored in the upright position and on racks/stands during construction.
- Access shall be provided at all times during construction or demolition for waste collection vehicles.
- All of the following are indications that storm water leaving a construction site contains an illicit discharge.

The contractor must keep a constant check that any water leaving a construction site is free of these indicators:

Unusual Color or Cloudiness	Strong Musty or Pungent Odor	Floating Debris
Surface Scum or Foam	Oil Sheen	Algae

- If the site contains construction trash, does not maintain its erosion control measures, is releasing illicit discharges or is not in compliance with any portion of the City of Celina Code of Ordinance it can be issued a Notice of Violation.

My signature below indicates that I have read and understand the above information.

Print Name: _____ Date: _____

Signature: _____