



THE CITY OF KILLEEN – BUILDING AND INSPECTIONS DIVISION
P. O. Box 1329, 100 E AVENUE C (254) 501-7762/FAX (254) 501-6302
APPLICATION FOR CONSTRUCTION PERMIT AND PLANS REVIEW

PROJECT ADDRESS:		PROJECT NAME:	
LEGAL DESCRIPTION: LOT:	BLOCK:	SUBDIVISION:	
OWNER NAME:	PHONE :	EMAIL:	
CONTRACTOR:	PHONE:	EMAIL:	
ARCHITECT OR DESIGNER:	PHONE :	EMAIL:	
DESCRIBE WORK:		USE OF BUILDING:	
CLASS OF WORK <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> FINISH OUT <input type="checkbox"/> SHELL <input type="checkbox"/> REMODEL <input type="checkbox"/> DEMOLISH <input type="checkbox"/> OTHER:			
TYPE OF BUILDING <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> DUPLEX <input type="checkbox"/> MANUFACTURED HOUSING <input type="checkbox"/> Multi-FAMILY # OF UNITS _____ <input type="checkbox"/> COMMERCIAL			
TYPE OF CONSTRUCTION	OCCUPANCY GROUP	NUMBER OF STORIES	BUILDING TOTAL SQ Ft
FLOOD ZONE <input type="checkbox"/> YES <input type="checkbox"/> NO	ZONE DISTRICT	FIRE SPRINKLERS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	MAXIMUM OCC. LOAD
PERMITS REQUESTED:	VALUATION:	FEES:	PERMIT NUMBER
			DATE PAID
BUILDING	\$ _____	\$ _____	_____
ELECTRICAL	\$ _____	\$ _____	_____
MECHANICAL	\$ _____	\$ _____	_____
PLUMBING	\$ _____	\$ _____	_____
FIRE SPRINKLER	\$ _____	\$ _____	_____
PLANS REVIEW	\$ _____	\$ _____	_____
TEMP POLE	\$ _____	\$ _____	_____
PAVING / CONCRETE	\$ _____	\$ _____	_____
FENCE	\$ _____	\$ _____	_____
LAWN SPRINKLER	\$ _____	\$ _____	_____
ACCESSORY BUILDING	\$ _____	\$ _____	_____
TEMPORARY FINAL	\$ _____	\$ _____	_____
CERT OF OCCUPANCY	\$ _____	\$ _____	_____
LANDSCAPING	\$ _____	\$ _____	_____
VENT A HOOD I/II	\$ _____	\$ _____	_____
FLOOD PLAIN	\$ _____	\$ _____	_____
POOL	\$ _____	\$ _____	_____
RIGHT OF WAY	\$ _____	\$ _____	_____
INSPECTION FEE	\$ _____	\$ _____	_____
		\$ _____	TOTAL FEES DUE
VALUATION IS NOT REQUIRED FOR RESIDENTIAL DWELLING IMPROVEMENTS OR NEW CONSTRUCTION			
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE 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.			
(PRINT) _____		(SIGNATURE) _____	
NAME OF CONTRACTOR/ OWNER OR AUTHORIZED AGENT			DATE
APPROVED: <input type="checkbox"/> YES <input type="checkbox"/> NO	BY:	DATE:	