## VILLAGE OF SURFSIDE BEACH - BUILDING PERMIT APPLICATION -

## **Roofing**

## **INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED OR PROCESSED**

LEGAL OWNER NAME:
ADDRESS:
PHONE:
EMAIL:
AUTHORIZED APPLICANT (if different):
PHONE:
EMAIL:
(AUTHORIZATION REQUIRED FROM LEGAL OWNER OF LOT)
BCAD GEOGRAPHIC ID:
PHYSICAL ADDRESS:
FULL PROJECT SCOPE:
-
MORE SPACE ON BACK IF NEEDED.

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City Hall: 1304 Monument Drive \*\* Surfside Beach, Texas 77541 \*\* City Hall 979-233-1531 \*\* Fax 979-373-0699

Building Department Email: cityhall@surfsidetx.org \*\* SURFSIDE BEACH SUPPORTS FAIR HOUSING LAW

REVISION DATE: August 8, 2019 KH

IMPORTANT NOTICES				
** DURATION OF PROJECT:	MONTHS (PERMIT IS VOID AFTER SIX MONTHS IF PROJECT IS			
** DURING THE ENTIRE DURATION OF THE PROJECT I PORTABLE RESTROOM AND ROLL OFF, ALL MATERIAL	BY LOCAL ORDINANCE YOU ARE REQUIRED TO RETAIN A AND DEBRIS IS TO BE CONTAINED.			

## **REQUIRED WITH APPLICATION:**

- WPI-1 Sent directly to the Building Official via email from a Texas Certified Windstorm Engineer at <a href="mailto:cityhall@surfsidetx.org">cityhall@surfsidetx.org</a>
- Other requirements as specified by the Building Department, check with the Building Official if uncertain.

Signature of Authorized Applic	cant: I understand that fa	ailing to follow all regula	ntions can result in a HALT
WORK ORDER as well as FINE	S AND CITATIONS:		
		Date:	
Signature of City Official:	1		Date:
APPLICATION IS:	APPROVED	DENIED	