

CITY OF CIBOLO
200 S. MAIN STREET / P.O. BOX 826
CIBOLO, TX 78108

Phone: (210) 658 - 4175 Fax: (210) 658 - 8065

BUILDING PERMIT APPLICATION - IRRIGATION

PROJECT ADDRESS: _____

CONTRACTOR NAME: _____ PHONE: _____

CONTACT NAME: _____ PHONE: _____

PROPERTY OWNER NAME: _____ PHONE: _____

DESCRIBE WORK: _____

Is any part of this property located in a Floodplain:
 Chemical Injection (or provision for):
 Plans Attached:
 Controller:

Pumps/Connections for Pumping Equipment:
 Use of Property:
 Valuation (cost of project): _____

| ITEM | Cost | Quantity |
|--|---------------|----------|
| Base Fee For Issuing each Permit | \$ 50.00 | 1 |
| Irrigation System - Residential (1 & 2 family dwellings) | \$ 50.00 each | |
| Irrigation System - Commercial | \$100.00 each | |
| Backflow Prevention Device - 2 inches or less | \$ 20.00 each | |
| Backflow Prevention Device - Over 2 inches | \$ 25.00 each | |
| | | |

Special Notes:
 Provide the customer with a copy of the permit.
 Inspections required for all devices and systems.
 No backflow prevention device shall be installed in the public right-of-way.
 Initial and annual inspection reports are required on all testable devices.

Plan Review:
 No plan review fee for one & two family dwellings.
 Plan review fee applies to commercial projects 1/2 the permit fee
 Reviewed by: _____ Date: _____

NOTICE

THE IRRIGATION PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

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 CITY GUIDELINES, ORDINANCES, CODES, STATE OR LOCAL LAWS PERTAINING TO OR REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE OF AUTHORIZED AGENT _____ PRINTED NAME _____ DATE _____