

CITY OF BAYOU VISTA BUILDING PERMIT

Small Duration Work

Address _____

Validation by Building Inspector: _____ By Homeowner: _____ Date _____

Owner: _____ Name _____ Street Address _____ City / State / Zip _____ Phone _____	Contractor: _____ Name _____ Street Address _____ City / State / Zip _____ Phone _____	Engineer: _____ Name _____ Street Address _____ City / State / Zip _____ Phone _____
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Permit Type: _____ Addition _____ Remodel _____ Boat House _____ Deck _____ Fence _____ Concrete _____ Bulkhead _____ Electrical _____ Plumbing _____ A/C _____ Pool _____ Propane _____ Other _____ Roof _____ Siding
Survey Required _____ Elevation Certificate Required _____ Addn'l Documentation w/Permit _____

Comments and Description for Scope of Work:

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. **Downstairs Enclosures may be used for entrance, storage or garage only. Appliances, water heaters, service panels and bathrooms are not allowed.**

 Signature of Contractor, Authorized Agent or Homeowner (Please Circle One) _____
Date

When properly validated in space below, this is your permit. Permit is valid for _____ days.

Permit Date: _____ **Permit Cost:** _____ **Permit #:** _____

Building Inspector Signature: _____

Date Complete: _____

Completion Picture Taken: _____
Date Initials/Signature