TYPE PERMIT					BU	JILDING I	INSPE	CTIC)N D	IV	ISIC)N					
	l co					CIT	ΓY OF	DAL	LAS								
$lacksquare$ other $_$				_		PERM					ſ					CITY OF DALLAS	
DATE	USE	OF PR	OPERT	Y		ADDRESS OF PROPOSED PROJECT											
OWNER/TENNANT ADDRE				DDRESS	3					CITY				STA	TE	ZIP	
DBA (IF APPLICABI	.E)																
APPLICANT				CONTR.	.#	SS#				COMPANY NA			NAME	ME			
ADDRESS					OITY	STATE			ZIP		L BURNE #				FAX		
ADDRESS				CITY		SIA		AIE	Zir		FHOR		HONE #	'NL#		#	
DESCRIPTION OF PROPOSED PROJECT			ECT			-					NEW SQ. FT		FT.			V CONST.\$	
										REM	REMODEL SQ. FT.			REMODEL\$			
										LEASE TO			OTAL	VALUE	TOT	AL\$	
PLEASE INDICATE					BE A PAR	T OF THIS PROJEC	CT BY CHEC	KING THE	APPRO	PRIA	TE BOX	(ANE	D PROVIDE CONT	RAC	\$ TOR/S	SUBCONTRACTOR INFORMATION ON	
BUILDING	FURINIFO		PLUME			□ LAWN S	PRINKLER		٥	FEN	NCE		۰	SW	IMMIN	IG POOL	
□ ELECTRICAL □ FIRE SPRKLR □ FLAMM. LIQUID □ BARRICADE							e OTHER										
□ MECHANICAL	□ MECHANICAL □ LANDSCAPE □ DRIVE APPROACH □ SIGN □ OTHER																
☐ WILL YOU SERV						ANCE FLOOR?											
I HAVE CAREFULL' HEREBY AGREE THE WILL BE COMPLIE RESTRICTIONS. I A HEREBY GRANTED	IAT IS A F D WITH W M THE OV	PERMIT I HETHE WNER O	IS ISSU R HERE OF THE A	ED ALL PI EIN SPECI ABOVE PI	ROVISION IFIED OR ROPERTY	NS OF THE CITY OF NOT. I AGREE TO OR DULY AUTHO	RDINANCES COMPLY V	S AND STA WITH ALL	ATE LAW	VS RTY	AP	PPLIC	CANT'S SIGNATU	RE			
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PDd SUP	D.R	D.R. FP DRY			HI ST	TYPE CONSTR	REQ PARK		ARK								
PRO PARK LO	OT AREA	SPRK R	(L B	BDRMS	BA TH	DWL UNITS	STO	RIES	D	BA							
PRKG AGRMT EARLY R		RAR	RAR DII		POSTAGE		<u> </u>		г								
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FIRE																	
PLANNING DEV																	
LANDSCAPE													TOTAL FEE	S			
FINAL APPROVAL			+														



TYPES OF WORK

Bldg. Contractor		Contr #			S.S.#	
Name				Company Name		
Address						Phone #
City	State		_Zip		Fax #	
Description of Work						
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Bldg. Contractor		Contr #			S.S.#	
Name				Company Name		
Address_						Phone #
City	State_		_Zip		Fax #	
Description of Work						
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Bldg. Contractor		Contr#			S.S.#	
Name				Company Name		
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Description of Work					I ax #	
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Bldg. Contractor		Contr #			S.S.#	
Name				Company Name		_
Address						Phone #
City	State		_Zip		Fax #	
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Bldg. Contractor		Contr #			S.S.#	
Name				Company Name		
Address						Phone #
City	State		_Zip		Fax #	
Description of Work						
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Bldg. Contractor		Contr #			S.S.#	
Name				Company Name		
Address						Phone #
City	State		_Zip		Fax #	
Description of Work_						