

City of Windcrest 8601 Midcrown Windcrest, TX 78239 Phone: (210) 655-0022 Fax: (210) 655-8776

www.ci.windcrest.tx.us

IRRIGATION SYSTEM PERMIT

DATE:		PERMIT NO	
JOB ADDRESS:			
OWNER:		PHONE:	
CONTRACTOR:	ADDRESS:		PHONE:
NUMBER OF SPRINKLER HEADS:		PERMIT FEE:	
CLASS OF WORK: NEW ADDITION ALTERATION REPAIR			
DESCRIBE WORK:			
NOTICE			
THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED INNINETY (90) DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDED FOR A PERIOD OF SIXTY (60) DAYS AT ANY TIEM AFTER WORK IS COMMENCED.			
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAMETO 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 PROVISIONS OF ANY OTHER STATE OF LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.			
SIGNATURE OF CONTRACTOR OR A	AUTHORIZED AGEN	T DATE	
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CITY OFFICIAL COMMENTS:			
APPROVED BY:		DATE:	,
ALLKOVED DI.		211121	