



**PERMIT APPLICATION FORM
COMMERCIAL**

City of Del Rio
Code Compliance Department
109 W. Broadway (mailing address)
114 W. Martin (street address)
Tel: (830) 774-8553
Fax: (830) 703-5305

(Please check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> STORAGE SHED |
| <input type="checkbox"/> NEW | <input type="checkbox"/> CARPORT |
| <input type="checkbox"/> REMODEL | <input type="checkbox"/> RE-ROOFING |
| <input type="checkbox"/> ADDITION/ALTERATION | <input type="checkbox"/> MISCELLANEOUS |

PLEASE PRINT CLEARLY, COMPLETE ALL REQUESTED INFORMATION

Project Address:			Project Title:																																																		
Subdivision		Lot	Block																																																		
Property Owner:			Owner's Address:																																																		
Phone No. ()		City	State	Zip Code																																																	
T.A.S. Registration No:		Asbestos Abatement Survey Date: _____ <small>A Copy of Survey is Required for Commercial Remodeling/ Demolition Projects</small>																																																			
Contractor's Name:		Address:		Phone Number:																																																	
Registration No. /State License No:		License Type		City Business License No.																																																	
Architect/Designer Name:	Address:		City	State	Zip Code																																																
State License Number:	Phone Number:		Fax Number:		Other:																																																
Detailed Scope of Work:																																																					
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Project Valuation: \$ _____																																																					

An issued permit becomes invalid if the work on the site authorized by the permit does not commence within 180 days of issuance, or if the work on the site is incomplete due to suspension or abandonment 180 days after the work commenced. **All permits require final inspection.**

I hereby certify that I am an authorized agent of the owner, and have the owner's consent to enter onto the property to complete the work. After close review of this application, I further certify that the information provided is true and correct to the best of my knowledge. The work shall comply with all provisions of laws and ordinances, whether specified or not. The grant of a permit does not presume to give authority to violate or cancel the provisions of any Federal, State, or Local law regulating construction or the performance of construction.

Signature of Contractor or Authorized Agent Please Print Name _____ Date _____ Phone Number

FOR OFFICEUSE ONLY
Approvals Required

BUILDING DEPARMENT

NOTES: _____

Log #: _____

Location: _____

Work Involved: _____ / _____

Permit Type: _____

Occupant Description: Assembly Educational Daycare Health Care Detentional 1&2 Family Dwelling Lodging or

Rooming House Hotel or Dormitories Apartment Residential Board & Care Mercantile Business Industrial Storage

Proposed Use: _____

Report Code: _____ No. of Units: _____ Inspection Code: _____ Live Load: _____

Occupancy Type: _____ Construction Type: _____ Bldg Sq. Ft _____

Water System: _____

Sewer System: _____

Valuation: \$ _____ Plan Review Fees: \$ _____ Permit Fees: \$ _____

Reviewed by: _____ Date: _____

PLANNING DEPARMENT

NOTES: _____

Use Zone _____ House Lot Coverage _____ % Appeal Date # _____

Legal & Dimensions match plat Lot Sq. ft. _____

Easement Clean & Shown Parking _____

Subdivision /Lot release date _____ Survey _____

Required front yard _____

Required side yard- Left _____ Right _____

Rolled Plans Attached Plans

Reviewed by: _____ Date: _____

Zoning Dept.: _____ Date: _____

FIRE DEPARMENT

NOTES: _____

Max Occupancy: _____

Fire Zone: yes no

Fire Sprinkler yes no

Type of system: _____

HEALTH DEPARMENT

NOTES: _____



COMMERCIAL BUILDING PROJECT SUBMITTALS and REVIEW PROCESS

In an effort to reduce the time between the submitting of the application for a building permit and permit issuance, the Del Rio City Hall Annex Development Services Departments has the following plan submittal and review process for new construction, addition or alterations as well.

It is very important that plans, specifications, and the application submitted for review contain all the information requested. Incomplete or inadequate plans will be required to be resubmitted and will be reviewed according to the time and date of the 2nd submittal. Please note: multiple reviews will require additional plan review fees.

Extremely large or difficult plans are reviewed in a timely manner according to the date of submission, (excluding weekends and holidays)

*Planning & Zoning requirements may require additional time if platting, zone change, variances, or special permits are required.

As stated in the *January 2, 2002 Texas Engineering Practice Act*, any construction, enlargement, alteration, or repair to a building with the total square footage over 5000 square feet, or a building with a free span over 24 feet, is required to be designed by a licensed engineer and, as evidence, must show the seal and signature of the engineer.

As stated in the *Texas Board of Architectural Examiners Regulation of the Practice of Architecture*, any building such as a building with more than 2 stories, or over 20,000 square feet must show the seal and signature of the architect. Also, if the building is considered a "public building" (public building meaning any building that is owned by a State agency, a political subdivision of the State, or any other public entity in Texas) it may be required to show the seal and signature of the architect.

A copy of the asbestos survey must be provided indication a survey has been done in accordance with the Texas Asbestos Health Protection Rules (TAHPR) and the National Emissions Standards for Hazardous Air Pollutants (NESHAP) for the area(s) being renovated and/or demolished. For more information contact the Texas Department of Health at 1-800-572-5548 or visit their website at www.tdh.state.tx.us/beh/asbmain.htm .If you have any other questions concerning a commercial project please do not hesitate to call on us for assistance at (830-774-8553 / 830-774-8531)



City of Del Rio Commercial Check List

CODE REF: 2006 INTERNATIONAL BUILDING CODE

CONSTRUCTION DOCUMENTS CHAPTER 1

CONSTRUCTION PLANS – Four (4) sets (Five (5) sets if application includes food establishment, day care, or public /semi-public pool facilities). Two (2) set will be returned to you and must be displayed on the project site for all inspections.

***Notes: Finished Commercial Plans should include a minimum 1/4" = 1' scaled drawings.**

Plans must be prepared by a design professional as required by Texas State Law.

Planning & Zoning Review ***Note: 12 sets of site plan required (contact Planning & Zoning for additional Information at 830-774-8524 or 830 -703-5309)**

Project Address on documents

Professional Designer/ Architect / Engineer seal Information

Landscaping plan to City Of Del Rio Ordinance requirements.

Asbestos Survey Information page 6

Plans are designed under 2006 I-Codes.

Plans are designed under 2005 NEC.

Plot Plans (Site Plans)

Plans to scale

Foundation Plans / Detail

Floor Plans

Roof Plans / Detail

Elevations

Sections and Detail

Architectural

Structural / detail

*M.E.P. Plans

BUILDING PLANNING DESIGN

<input type="checkbox"/> Occupancy Type	Chapter 3
<input type="checkbox"/> Construction Type	Chapter 6
<input type="checkbox"/> Allowable Height	Chapter 5
<input type="checkbox"/> Allowable Area	Chapter 5
<input type="checkbox"/> Bldg. Size	Sq. Ft.
<input type="checkbox"/> Occupancy Load	Chapter 10
<input type="checkbox"/> Mix Occupancy	Chapter 5
<input type="checkbox"/> Sprinkler System	Chapter 9
<input type="checkbox"/> Fire Alarm System	Chapter 9
<input type="checkbox"/> Distance of Travel to Exit	Chapter 10
<input type="checkbox"/> # Of Exits required	Chapter 10
<input type="checkbox"/> Exit Width	Chapter 10
<input type="checkbox"/> Min. Corridor/Aisle Width	Chapter 10
<input type="checkbox"/> Dead End Corridor	Chapter 10
<input type="checkbox"/> Plumbing Fixtures required	Chapter 29
<input type="checkbox"/> Separation requirements	Chapter 5
<input type="checkbox"/> Rated Assemblies	floor/wall/ceiling assemblies
<input type="checkbox"/> Firestop / Fire Block Assemblies	Chapter 7
<input type="checkbox"/> Draftstopping Attics, floor assemblies	Chapter 7
<input type="checkbox"/> Door/Window Schedule, ratings	
<input type="checkbox"/> Insulation R-Value and Installation	(Building Envelope)

ACCESSIBILITY CHAPTER 11

- Texas Accessibility Standards permit form page 7
- Exterior Accessible routes
- Parking spaces
- Accessible Entrances
- Accessible Means of Egress
- Interior Accessible Route
- Signage / Detail / heights
- Ramps / Detail

- **This handout is not intended to cover all items required by the City of Del Rio, but it is to serve as a guide.**

Asbestos Survey Information

Asbestos Survey Texas Department of Health, <http://www.tdh.state.tx.us>
1-800-572-5548 or 1-512-834-6610

Was an asbestos survey performed in accordance with Texas Asbestos Health Protection Rules (TAHPR) and the National Emission Standard for Hazardous Air Pollutants (NESHAP)? Yes _____ No _____

Date of Survey: ____/____/____

TDH Inspector License No. _____

If the answer is NO, then as the owner/operator of the renovation/demolition site, I understand that is my responsibility to have this asbestos survey conducted in accordance with Texas Asbestos Health Protection Rules (TAHPR) and the national Emission Standards for Hazardous Air Pollutants (NESHAP) prior to a renovation/demolition permit being issued by the City of Del Rio.

A copy of survey must be submitted to the City of Del Rio Code Compliance Dept.

**Proof of Plan Submittal to Texas Department of Licensing and Regulation (TDLR) for Texas Accessibility Standards (TAS) Review
City of Del Rio, Code Compliance Department**

Project Address: _____

Project Name: _____

On application to a local governmental entity for a building construction permit related to the plans and specifications have been submitted to the Texas Department of Licensing and Regulation (TDLR). Article 9102, Section 5 (k) - Senate Bill 959

I hereby certify that I comply with the requirements of Article 9102, Section 5(k) and have submitted plans and specifications for Texas Accessibility Standards (TAS) review to TDLR as required or this project exempt.

Signature of owner or Authorized Agent

Date

TDLR Project Number
(May be obtained at <http://www.license.state.tx.us>)
Or reason for exemption: _____
