City of La Porte
604 W. Fairmont Pkwy.
La Porte, TX 77571

Planning & Development Department

FIRE PERMIT APPLICATION

Phone: 281.470.5073
Fax: 281.470.5005
www.laportetx.gov

1. PROJECT INFORMATION:

DATE OF SUBMITTAL: _____

PROJECT ADDRESS (If existing): _____

HCAD PARCEL NO(s) 13-digit Tax ID(s): 1.) _____

2.) _____ 3.) _____

PROPERTY LEGAL DESCRIPTION: _____

☐ FIRE ALARM ☐ FIRE SUPPRESSION ☐ VENT HOOD FIRE SUPPRESSION ☐ UNDERGROUND FIRE LINE

☐ ABOVE-GROUND FIRE SUPPRESSION ☐ FIRE SPRINKLER

DESCRIBE WORK: _____

BUILDING USE: _____ NO. OF STORIES:_____ TOTAL SQ. FOOTAGE: _____PROJECT VALUATION: $_____

2. PROPERTY OWNER CONTACT INFORMATION:

OWNER'S NAME: _____ PHONE : _____

MAILING ADDRESS: _____

E-MAIL: _____

3. CONTRACTOR/AGENT:

☐ ***HOMEOWNER IS CONTRACTOR**

AGENT / CONTRACTOR COMPANY:_____

PHONE 1: _____ PHONE 2: _____

E-MAIL: _____ FAX #:_____

MAILING ADDRESS: _____

CONTACT PERSON'S NAME: _____ PHONE: _____

4. APPLICATION CHECKLIST & SUPPORTING DOCUMENTATION (Check applicable boxes):

If Homeowner is Contractor, must furnish notarized Homestead Affidavit

☐ COMPLETE ITEMS 1-4 OF PERMIT APPLICATION

☐ SUBMIT TWO (2) COMPLETE SETS (HARDCOPIES) OF CONSTRUCTION PLANS FOR REVIEW

NOTES TO APPLICANT:

1. CONTRACTOR MUST BE REGISTERED WITH THE CITY
2. TO REGISTER WITH CITY, SUBMIT CURRENT CERTIFICATE OF INSURANCE WITH CITY NAME & ADDRESS AS CERTIFICATE HOLDER
3. **NOT A VALID PERMIT UNTIL OWNER/CONTRACTOR IS NOTIFIED OF APPROVAL AND ALL APPLICABLE FEES ARE PAID IN FULL**

APPLICANT PRINTED NAME: _____ APPLICANT SIGNATURE: _____

(STAFF USE ONLY):

Occupancy Type: _____ Const.Type: _____ Flood Zone: _____ Use Zone (Zoning District): _____ CE?: _____ Taxes?: _____

FEES: PERMIT FEE: $_____ PLAN CHECK FEE: $_____

RESIDENTIAL DRIVEWAY TIE-IN FEE: $ _____ PARKLAND & ZONE FEE: _____

Special Conditions:_____

☐ *Must complete all work and pass City inspection within 10 days of permit issuance to avoid further Code Enforcement Action*

PERMIT APPROVAL: Fire Marshal (Commercial Only): _____ Date: _____

Approved for Issuance by: _____ Date: _____

PERMIT NO. _____