CITY OF MURPHY
LIFE LIVED AT YOUR PACE

RESIDENTIAL PERMIT APPLICATION

Permit Number	

Project Address: _____
(Street address)

Subdivision: _____ Block: _____ Lot: _____

Property Owner: _____ ( )
(Name) (Address) (City, state, & zip code) (Phone)

	Name	Address	City, State & Zip Code	Phone Number
Contractor:				
Electric:				
Plumbing:				
Mechanical:				
Other:				

Type of Work:

☐ Accessory Building ☐ Arbor/Patio Cover ☐ Demolition ☐ Fence/Gate ☐ Fire Pit /Fire Place
☐ Flatwork ☐ Foundation Only ☐ Foundation Repair ☐ Garage Conversion ☐ Garage, Detached
☐ Irrigation ☐ Mechanical/HVAC ☐ New Building ☐ Outdoor Kitchen ☐ Plumbing
☐ Pool - In Ground ☐ Remodel/Alter/Add ☐ Retaining Wall < 2ft ☐ Roofing ☐ Spa or Hot Tub
☐ Screen Wall ☐ Structure Moving ☐ Other

FOR OFFICE USE ONLY			Description of Work (please be specific): ***The City encourages you to have approval from your HOA prior to submittal.**
Zoning			
Min. Building Setbacks from Property Line			
Front= Front Side= Side= Rear=			
No. of off street parking spaces required=			
Special Conditions:			Valuation of Work:
Type of Construction:	Occupancy Group:		Plan # Stories: Fire Sprinkler: Y / N
Permit Fees			Sq Footage: Garage Sq Ft:
Building		$	**NOTICE**
Electrical		$	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. **NO REFUNDS ON EXPIRED, DUPLICATE, OR WITHDRAWN PERMITS. NO REFUNDS WILL BE ISSUED FOR ANY PERMIT FEES.**
Mechanical		$	
Plumbing		$	
Plan Review		$	
Impact Fees		$	
Sewer Size		$	
Engineering Inspection Fees		$	
Other		$	
Total Due		$	
			Signature of Applicant: Date:
Accepted By:	Plans Checked & Approved By:	Issued By:	Contact Name: (Please print)
			Phone: Fax Number:
Date:	Date:	Date:	Email Address:

Complete the following only if paying permit fees by MasterCard or Visa. There is a 3.5% fee on credit card transactions made online and over the telephone.

CREDIT CARD #: _____ CARD EXP. DATE: _____

SIGNATURE: _____

CURRENT BILLING ADDRESS ASSOCIATED WITH CARD: _____

Customer Service Department
206 North Murphy Road ● Murphy, Texas 75094 ● Tel: 972.468.4100 ● Fax 972.468.4127
Email: customerservice@murphytx.org *Website:* www.murphytx.org