



PERMITTING APPLICATION

For District Use Only
DATE ACCEPTED:
LOG NO.

1. APPLICANT INFORMATION

ALL REVIEWS MUST FILL OUT

APPLICANT COMPANY*:
APPLICANT CONTACT*:
ADDRESS*:
PHONE*: EMAIL ADDRESS:

2. OWNER/DEVELOPER INFORMATION

ALL REVIEWS MUST FILL OUT

OWNER COMPANY:
OWNER CONTACT*:
ADDRESS:
PHONE: * EMAIL ADDRESS:

3. BUSINESS/DEVELOPMENT INFORMATION

NAME OF BUSINESS/DEVELOPMENT:

TYPE OF BUSINESS CHECK ONE

- Commercial Industrial Manufacturing Food Services Municipality
New Residential Subdivision Multi-tenant Residential New Home (in Established Subdivision)

REVIEW TYPE CHECK ONE

- New Construction Shell Building Addition Build-Out Irrigation Pool/Water Feature

ANTICIPATED CONSTRUCTION COMPLETION DATE*:

4. SERVICE ADDRESS*:

SUBDIVISION NAME:
LOT: BLOCK: SECTION:

5. PLAT INFORMATION

NEW DEVELOPMENTS MUST FILL OUT AND ATTACH COPY OF PLAT TO APPLICATION

Is Property Platted?* Name of Plat*:

If property is not platted, it must be platted and reviewed by the District prior to connection. See Plat Review form for more information.

6. INSTALLATION OF

- NEW DOMESTIC WATER CONNECTION
NEW IRRIGATION WATER CONNECTION/SYSTEM INSTALLATION
NEW FIRE PROTECTION TAP
NEW SANITARY CONNECTION
INSTALLATION OF INTERCEPTOR/PRETREATMENT UNIT
SWIMMING POOL
REPAIR OF LINE
BUILD-OUT/REMODEL
OTHER WORK

Review the following information to know what to submit with your review:
All new Commercial/New Residential Subdivisions/Multi-tenant submittals must include with this application, a Pretreatment Services Non-Residential Customer Questionnaire, a recorded/preliminary plat for the property, and 2 sets of full size (24"x36") construction plans, including plumbing, water, sanitary sewer, irrigation, landscaping, site layout, etc.
The final construction drawings must be sealed by a Texas registered Architect, professional engineer, licensed plumber or licensed irrigator, depending on regulations.
Irrigators and plumbers must be registered with the District through our website at the following location, fbcwcid2.com/construction-permitting
All submittals for new homes in established subdivisions must include a plot plan showing connection to the public system.
All Buildouts, Additions and Remodels must submit a site layout, plumbing plans, and any water or sanitary sewer plans.
Irrigation, Pool, and water amenities plans, and construction information must be submitted for review.
Repairs to Lines must submit an application and a drawing with a description of the work being completed.

* Item must be completed or submittal may not be accepted by District



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WATER/SANITARY USAGE *

CALCULATIONS FOR THE ANTICIPATED USAGES IN GALLONS PER DAY (GDP)

Estimated Water Usage*: _____ Estimated Sanitary Usage*: _____

Plumbing Company Information

PLUMBERS AND IRRIGATORS MUST BE LICENSED & REGISTERED WITH DISTRICT

Company: _____ Contact Name: _____
 Address: _____ Phone: _____
 _____ Email Address: _____

Irrigation Company Information

PLUMBERS AND IRRIGATORS MUST BE LICENSED & REGISTERED WITH DISTRICT

Company: _____ Contact Name: _____
 Address: _____ Phone: _____
 _____ Email Address: _____

Contractor Information

Company: _____ Contact Name: _____
 Address: _____ Phone: _____
 _____ Email Address: _____

PAYMENT INFORMATION

*ALL REVIEWS MUST FILL OUT INSPECTION AND SERVICE DEPOSIT INFORMATION.
 CONNECTION CHARGES ONLY NEED TO BE FILL OUT FOR REVIEWS WITH NEW CONNECTIONS*

Plan Review Fee Paid by: _____
 Connection Charges Paid by: _____
 Inspection Charges Paid by: _____
 Service Deposit Billed to: _____

FOR DISTRICT USE ONLY

SERVICE ADDRESS: _____

Log No. _____ **Permit No.** _____

APPLICATION APPROVED BY: _____ **DATE:** _____
Printed Name Signature

INSPECTION/CONNECTION INFORMATION

District Inspector will indicate the following on construction plans/plat.

Service Lines: _____ Cleanout Locations: _____ Sample Well: _____ Irrigation System: _____ Backflow Device: _____

WATER INSPECTIONS RECORDS

SEWER INSPECTIONS RECORDS

	Date Passed:	Inspector		Date Passed:	Inspector
Potable Service Line			Sewer Service Line		
Irrigation System			Dates Inspected:		
Fireline to Vault			Interceptor		
Backflow test			Type:		
Other:			Sample Well		

CERTIFIED BY: _____ **DATE:** _____
DISTRICT INSPECTOR - Printed Name Signature

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