



PLANNING DEPARTMENT

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Gas Fitting Permit Application

(Residential Repair)

Permit No. _____

| | |
|---|----------------------|
| Job Address | MCAD Property ID NO. |
| | |
| Legal Description: Lot #, Block #, & Subdivision Name | |
| | |

NOTICE

All persons who obtain a permit regulated by this code shall possess a responsible master plumbing license in accordance with the provisions of the Texas Occupations Code Chapter 1301.

A property owner is not required to be licensed under Texas Occupations Code Chapter 1301 for the performance of plumbing repairs on their property.

OWNER INFORMATION

| |
|---------------|
| Owner Name: |
| |
| Mail Address: |
| |
| Phone: |
| |

I hereby certify that all of the details and information I have submitted or entered regarding this application are true and accurate to the best of my knowledge and that all plumbing work and installations performed under the permit issued for this application will be in compliance with all Pertinent provision of the Texas State Plumbing Code and City of Eagle Pass Code of Ordinances.

MASTER PLUMBER INFORMATION (If Applicable)

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|--------|
| DBA: |
| |
| Phone: |
| |

Signature of Master Plumber


Date

| |
|-----------------------------|
| Description of work: |
| |
| |
| |

I, _____, do hereby certify that I am the homesteaded homeowner, and accept full responsibility for the above described work.

Homeowner Signature

Date

| | |
|--|-----|
|  Date Application Received: | By: |
| Address Validation: <input type="checkbox"/> Yes <input type="checkbox"/> No | By: |
| Legal Lot Validation: <input type="checkbox"/> Yes <input type="checkbox"/> No | By: |