

City of Kyle
Building Inspection Department
100 W. Center Street
P.O. Box 40
Kyle, Texas 78640



Telephone Number:
(512) 262-3911
Fax Number:
(512) 262-3915



FIRE PERMIT APPLICATION

PLEASE PRINT CLEARLY AND FILL IN ALL THAT APPLY.

PART 1. PROPERTY OWNER INFORMATION

Building site address: _____
Subdivision: _____ Lot: _____ Block: _____
Property owner: _____
Address of property owner: _____
City/State/Zip: _____
(_____) (_____) _____
Telephone No.: _____ Fax No.: _____

PART 2. CONTRACTOR INFORMATION

Name of Fire Installation Company: _____
Address of Fire Installation Company: _____
City/State/Zip: _____
(_____) (_____) _____
Telephone No.: _____ Fax No.: _____
Fire Alarm Contractor: (state license #) _____
Electrical contractor: _____ Phone: _____
Mechanical contractor: (state license #) _____ Phone: _____

PART 3. DESCRIPTION OF WORK:

- Day Care
- Foster Home
- Adoption Home
- Medical Office
- Nursing Home
- Hospital
- Fire Alarm
- Fire Sprinkler
- Other _____

- Vent-a-Hood
- Fixed Fire Suppression
- Fuel Storage Tank Installation
- Fuel Storage Tank Removal
- Construction Final

PART 5. AREA OF NEW CONSTRUCTION

Total No. of Sprinkler Heads 50 or less More than 50
Total covered area: _____ s.f.
Estimated value: \$ _____
(Cost of labor and materials)

Briefly describe the type of work being proposed: _____

PART 9. CONDITIONS OF PERMIT

Two (3) copies of construction plans and specifications must be submitted by the Applicant. Work may not start until a permit has been issued pursuant to approval of this application. Permits so issued shall not be construed as authority to alter or set aside any building code requirement, nor shall such issuance of a permit prevent the Building Official from thereafter requiring correction of errors in plans or in construction, or of violations of building codes or zoning ordinance.

PERMITS SHALL BECOME INVALID IF WORK IS NOT COMMENCED WITHIN SIX (6) MONTHS AFTER ISSUANCE, OR WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF SIX (6) MONTHS OR LONGER AFTER WORK HAS COMMENCED.

INSPECTIONS ARE TO BE REQUESTED AS NEEDED DURING WORK. A FINAL INSPECTION MUST BE DONE AND A CERTIFICATE OF OCCUPANCY ISSUED BEFORE THE NEW STRUCTURE IS OCCUPIED.

I hereby make application for a Building Permit for work as noted herein and as described by submitted plans and specifications.

Signature of Applicant: _____ Date: _____

ZONING DISTRICTS:

Agricultural	A
Single Family Residential 1	R-1-1
Single Family Residential 2	R-1-2
Single Family Attached – Garden Home	R-1-A
Residential Townhouse	R-1-T
Residential Condominium	R-1-C
Residential Two Family – Duplex	R- 2
Multi-Family Residential 1	R-3-1
Multi-Family Residential 2	R-3-2
Manufactured Home	M-1
Manufactured Home Subdivision	M-2
Manufactured Home Park	M-3
Central Business District 1	CBD-1
Central Business District 2	CBD-2
Restricted Commercial	C-1
General Commercial	C-2
Planned Unit Development	PUD
Historic District	H
Recreational Vehicle Park District	RV

FOR OFFICE USE ONLY

Check all that apply and initial

Conditional use overlay district permit application Approval Date: _____ Initials: _____

Zoning district _____ Approval Date: _____ Initials: _____

Site development approval Approval Date: _____ Initials: _____

Verified by: _____ Date: _____

Building Official: _____ Date: _____