

**The City of Universal City**  
Development Services Department  
2150 Universal City Blvd ♦ Universal City, TX 78148  
(210) 659-0333, ext 723, 725, 720  
Fax: (210) 659-7062

**APPLICATION FOR INTERIOR FINISH OUT PERMIT**

Complete entire application, incomplete applications will not be accepted

**Commercial—Attach three (3) set of Plans and Specifications**

A permit is being requested for the following described work. Check all that apply:

Commercial \_\_\_\_\_ Interior Finish Out \_\_\_\_\_  
Remodel \_\_\_\_\_ Addition \_\_\_\_\_  
\*Demolition \_\_\_\_\_ Other: \_\_\_\_\_

Explain use of structure, space: \_\_\_\_\_  
\_\_\_\_\_

Any Electrical?\_\_\_ Plumbing?\_\_\_ Mechanical?\_\_\_ Flatwork?\_\_\_

Property Address: \_\_\_\_\_

Owner of Property: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_  
Electrical Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_  
Plumbing Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_  
Mechanical Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_  
Utility Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_  
Fire Alarm Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_  
Fire Sprinkler Contractor: \_\_\_\_\_ Tel: \_\_\_\_\_ UC License #: \_\_\_\_\_

Fire Sprinkler System: \_\_\_Yes \_\_\_ No

Sq. Ft. Habitable Area \_\_\_\_\_ Number of Stories \_\_\_\_\_ Interior Wall Type: \_\_\_\_\_

No. of showers \_\_\_\_\_ No. of lavatories \_\_\_\_\_ No. of water closets \_\_\_\_\_ No. of urinals \_\_\_\_\_

COST OF CONSTRUCTION: \$ \_\_\_\_\_

**Commercial Plan Scan Fee:**

Size D & E Sheets \$2.50 per page No. of Pages \_\_\_\_\_ x \$2.50 = \_\_\_\_\_

8x11, 8x14, 11x17 sheets \$0.25 per page No. of Pages \_\_\_\_\_ x \$0.25 = \_\_\_\_\_

**Commercial:**

\*1. \_\_\_\_\_ I hereby certify that an asbestos survey has been done in accordance with the Texas Asbestos Health Protection Rules and the National Emission Standards for Hazardous Air Pollutants for the buildings being renovated and/or demolished.

2. \_\_\_\_\_ Projects that exceed \$50,000 shall register with the Texas Department of Licensing and Regulation (TDLR) for Texas Accessibility Standards (TAS) review. The project registration number shall be provided in the space below before the city is allowed to accept plans. Project No. \_\_\_\_\_

3. \_\_\_\_\_ I hereby certify that all Mechanical, Electrical, and Plumbing Contractors listed on this application have agreed to be listed on this permit application and that a Verification Letter has been signed by the Responsible Master or Responsible License Holder. The Verification letter for each applicable trade is attached.

I have read the completed application and know the same to be true and correct and hereby agree that if a permit is issued, all disciplines of the International Codes and supplements thereto as well as city ordinances and amendments will be complied with whether herein specified or not. THE APPLICANT SHALL BE RESPONSIBLE FOR INFORMING ALL PARTIES INVOLVED, INCLUDING THE DESIGN PROFESSIONALS AND SUB-CONTRACTORS, OF ANY CODE NON-COMPLIANCE AS NOTED ON PLANS OR AS INFORMED UPON SUBMITTAL OF THIS APPLICATION. ANY PLAN CHANGES TO ORIGINAL APPLICATION SHALL BE APPROVED IN WRITING BY THE CITY.

Signature of Applicant \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Tel \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

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For Office Use Only

Approve/Disapprove Issuance of Building Permit: \_\_\_\_\_ Date: \_\_\_\_\_

**Service Connection Fees:**  
CCMA \$ \_\_\_\_\_  
SARA \$ \_\_\_\_\_  
Water \$ \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_

**Building Permit Fees:**  
Building Permit \$ \_\_\_\_\_  
Scan Fee \$ \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_

Updated 10/2019