

**City of Port Aransas**  
710 W Avenue A  
Port Aransas, Texas 78373  
361-749-4111  
www.cityofportaransas.org



**GENERAL PERMIT APPLICATION**  
**(Remodels-Repairs-Roof- Windows-Etc.)**

**PROPERTY INFORMATION**

**DATE OF APPLICATION:** \_\_\_\_\_

\_\_\_\_\_  
Business / Property Owner's Name

\_\_\_\_\_  
Address of Project

**Port Aransas, TX 78373**  
City, State, ZIP

Residential       Commercial

Total A/C Sq. Ft. \_\_\_\_\_

\$ \_\_\_\_\_

**Zoning:** \_\_\_\_\_

**Value of Work**  
**(Labor & materials)**

**\*\* Any exterior alteration may require a TDI form WPI-1 with App ID #  
A WPI-2 or WPI-8 will be required before the permit will final out (C of C). \*\***

**\* Generator Permits require a Site plan showing location of the generator and Elevation Certificate \***

**Describe ALL proposed work in detail:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTRACTOR(S) - INFORMATION**

\_\_\_\_\_  
General - Business/Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Electrician – Business/Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Plumber – Business/Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Mechanical – Business/Company Name

\_\_\_\_\_  
Telephone

**\*I have read the complete application and know the same to be true and correct and hereby agree that if this permit is issued, all provisions of the City Ordinance will be complied with whether herein specified or not. I understand that this permit belongs to the property owner and I am an authorized agent.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Contractor or Authorized Agent

**Date:** \_\_\_\_\_

\*\*\*\*\* OFFICE USE ONLY \*\*\*\*\*

Planning & Development: \_\_\_\_\_  Approved Date: \_\_\_\_\_  Items Required Date: \_\_\_\_\_  
Zoning of property: \_\_\_\_\_ Allowable Use: \_\_\_\_\_

Dune Permit Needed: Yes  No

Substantial Improvement/Substantial Damage: Yes  No

Non-Conversion Agreement Needed: Yes  No

Non-Habitable Agreement Needed: Yes  No

Elevation Certificate Needed: Yes  No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Building Official: \_\_\_\_\_  Approved Date: \_\_\_\_\_  Items Required Date: \_\_\_\_\_  
 No Permit Required Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_