

**CITY OF HIGHLAND HAVEN, TEXAS**  
Phone #: (830) 265-4366 Fax #: (512) 366-9721  
**PROPERTY DEVELOPMENT PERMIT APPLICATION**  
Rev. 2018

Permit # \_\_\_\_\_ HH Street Address \_\_\_\_\_ Lot# \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email \_\_\_\_\_

**PERMIT PURPOSE: NEW CONSTRUCTION**

- New Single Family Residence (SFR) - \_\_\_\_\_ BR \_\_\_\_\_ Bath \_\_\_\_\_ Garage \_\_\_\_\_ Living Area SQ.FT. \_\_\_\_\_
- Septic System Test
- Septic System Construction (LCRA permit required)
- Waterfront:  retaining wall  boat dock/slip  boat house
- Waterfront:  PWC floating, fixed dock or ramp  PWC lift manual or electric
- Outbuilding:  detached garage  workshop  storage facility  gazebo  greenhouse
- Outbuilding-Pergola, detached:  existing slab or no floor w/ utilities  no utilities
- Pergola, attached:  existing slab or no floor w/ utilities  no utilities  Pergola, w/ new foundation
- Concrete:  slab  walk  steps  driveway or other \_\_\_\_\_
- Fence
- Sprinkler/Irrigation system
- Landscaping raw land (clearing, grading)
- Drainage Alterations (requires engineering certification)
- Other (describe project) attach additional if needed: \_\_\_\_\_

**PERMIT PURPOSE: REMODELING, ADDITIONS, RENOVATION, OTHER IMPROVEMENTS**

- Re-model - **Major** (changes any or all - footprint, structural, roofline, facade, floor-plan, living space)
- Re-model - **Minor** (interior or exterior, with electric &/or plumbing; without Major changes above)
- Room addition(s) \_\_\_\_\_ rooms, \_\_\_\_\_ sq. footage  new slab  existing slab
- Septic system repair/expansion (LCRA permit required)
- Carport enclosure, use of new space \_\_\_\_\_ addition, or expansion  new slab  existing slab
- Patio addition or expansion:  covered  un-covered
- Driveway:  resurface  re-pave/repair approach
- Waterfront:  boat slip/PWC dock/lift  boat house  retaining wall  other \_\_\_\_\_

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- Electrical meter/loop or breaker panel replace or rewire
- Propane tank installation including screening/fencing (all property setbacks apply)
- Swimming Pool, Hot Tub, or Fountain (all property setbacks apply)
- Plumbing (Includes connecting to Highland Haven Water System tap)
- Water well plugging
- Drainage Alterations (requires engineering certification)
- Other (describe project) (attach additional if needed): \_\_\_\_\_

**PERMIT PURPOSE: DEMOLITION**

- Total- removal of structure(s), Structure Description: \_\_\_\_\_

**NOTICE: Property owner is responsible for:**

1. Insuring contractors possess current license (i.e., electrical, plumbing, mechanical or irrigation).
2. Adherence to provisions of International Building Code.
3. Adherence to applicable City Ordinances, the most pertinent being Ordinances # 056, 020, 021, 037, & 051.
4. **Prior to any modifications or changes to the permit purpose(s), property owner/contractor must contact The City Building Permit Officer and submit all required documents AND fees.**

**INDEMNIFICATION**

A property development permit, when issued, does not imply that ownership claimed by the applicant is valid. City verification of ownership is limited to examination of the latest on-hand version of the Burnet County Appraisal District property ownership rolls. Property owner or owners hereby indemnifies and hold harmless the City of Highland Haven, its elected officials, agents and appointees from any and all claims and damage, including court costs and attorney fees, that may result because of ownership claims and from failure of the property owner and/or contractors to comply with relevant building codes and/or city ordinance requirements.

**Special circumstances for New Single Family Residence (SFR): A Certificate of Occupancy issue by the City of Highland Haven must be obtained before any habitation of the residence occurs.** No furnishings, personal property, or storage of items is permitted in the residence until the Certificate of Occupancy is issued.

Property Owner authorizes contractor to make modifications to permit: Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of applicant (must be property owner) \_\_\_\_\_ Date: \_\_\_\_\_

(If owner has submitted signature authority for contractor, form must be attached)

Application received by (City Official) \_\_\_\_\_ Date: \_\_\_\_\_

**Allow a minimum of 7 days processing time (after receipt of all required supporting documentation) for new residence, major remodeling, and waterfront construction.**

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**SUPPORTING DOCUMENT REQUIREMENTS**

	Yes	N/A		Date Rec'd
LCRA Septic System Permit (SFR or Septic repair/replace				
Most current Certified Site Survey -----	<input type="checkbox"/>	<input type="checkbox"/>		_____
Site Plan including construction plan, elevation, setbacks, lot lines and construction location(s) -----	<input type="checkbox"/>	<input type="checkbox"/>		_____
Floodplain Certificate with FEMA elevations by surveyor/engineer -----	<input type="checkbox"/>	<input type="checkbox"/>		_____
LCRA Floodplain Compliance Certificate by Flood Plain administrator-----	<input type="checkbox"/>	<input type="checkbox"/>		_____
Architectural plans & specifications showing exterior elevations, foundation plans & floor plan for new SFR (an additional set of reduced-size for use by Building Code Inspector may be submitted-----	<input type="checkbox"/>	<input type="checkbox"/>		_____
LCRA and/or FEMA shoreline or watershed construction permits -----	<input type="checkbox"/>	<input type="checkbox"/>		_____
Variance approval or "grandfather" exclusion -----	<input type="checkbox"/>	<input type="checkbox"/>		_____
Termite treatment certification (new SFR) -----	<input type="checkbox"/>	<input type="checkbox"/>		_____
Description of scope of work -----	<input type="checkbox"/>	<input type="checkbox"/>		_____

**BUILDING CODE (BCI) AND CITY INSPECTION REQUIREMENTS**

	Yes	N/A		
Termite (certificate required on new residence) -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Foundation -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Framing, bracing & roof -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Plumbing, electrical, mechanical rough-in -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Energy Efficiency-----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
LPG pressure test -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Final Building Inspection -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Final Lot Grading Inspection -----	<input type="checkbox"/>	<input type="checkbox"/>	(City)	Date _____
Final as-built elevation survey & photos (FEMA) -----	<input type="checkbox"/>	<input type="checkbox"/>	(BCI)	Date _____
Occupancy Certificate -----	<input type="checkbox"/>	<input type="checkbox"/>	(City)	Date _____
Clean-up -----	<input type="checkbox"/>	<input type="checkbox"/>	(City)	Date _____

(Other inspections may also be required.)

Note: BCI = Building Code Inspector: \_\_\_\_\_ Phone # \_\_\_\_\_

**Notes:**

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**Contractor Information**

Primary Contractor: Name \_\_\_\_\_  
Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

Electrical Contractor: Name \_\_\_\_\_ License # \_\_\_\_\_  
Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

Plumbing Contractor Name: \_\_\_\_\_ License # \_\_\_\_\_  
Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

Mechanical Contractor Name: \_\_\_\_\_ License # \_\_\_\_\_  
Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

Irrigation Contractor Name: \_\_\_\_\_ License # \_\_\_\_\_  
Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

(Other) \_\_\_\_\_ Name: \_\_\_\_\_ License # \_\_\_\_\_  
Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_

**Notes:**

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**FOLLOWING TO BE COMPLETED BY CITY OFFICIALS:**

**Site Plan has been checked for proper Lot Platting prior to issuing Building Permit:**

Permit Officer Signature \_\_\_\_\_ Date \_\_\_\_\_  
 \*\*\*\*\*  
 \_\_\_\_\_ Approved Permit # \_\_\_\_\_ (Expires 1 year from initial approval)

\_\_\_\_\_ Denied Reason for denial \_\_\_\_\_

Appointed P&Z member (if required) \_\_\_\_\_ Elected City Official \_\_\_\_\_ Elected City Official (if required) \_\_\_\_\_

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

**FEE RECORD (All fees due upon permit approval)**

Permit fee \$ \_\_\_\_\_  
 Inspection fees \$ \_\_\_\_\_ (Building Code Inspections)  
 City Inspection \$ \_\_\_\_\_ (City Inspection fees may be levied as required; see Ord. #20)  
 Clean-up deposit \$ \_\_\_\_\_ (unpaid inspection fees will be deducted from Clean-up Deposit)  
**Total** \$ \_\_\_\_\_ Date paid \_\_\_\_\_ Ck.# \_\_\_\_\_ by:  Owner  Contractor  
 \*\*\*\*\*

**Three-Month Extension Approval:**  
 Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Elected Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fee paid \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_  
 \*\*\*\*\*

Clean-up deposit return -Approval \_\_\_\_\_ Date \_\_\_\_\_ \$ \_\_\_\_\_ Date \_\_\_\_\_ Ck# \_\_\_\_\_  
 \*\*\*\*\*

**Certificate of Occupancy – Approval \_\_\_\_\_ Issue date \_\_\_\_\_**