



City of Kemah, Texas  
Department of Community Services

# PLUMBING/GAS PERMIT APPLICATION

Permit #: \_\_\_\_\_

Job Address: \_\_\_\_\_

Commercial     Residential

Owner: \_\_\_\_\_

Contractor: \_\_\_\_\_

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

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

City, St, Zip: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Description of Work:

<input type="checkbox"/> New	Construction Type _____  Valuation of Work \$ _____
<input type="checkbox"/> Addition	
<input type="checkbox"/> Alteration	
<input type="checkbox"/> Repair	
<input type="checkbox"/> Other _____	

Scope of Work: \_\_\_\_\_

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

### MASTER PLUMBER MUST SIGN APPLICATION – NO EXCEPTIONS

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

License #: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Permit Fee:            \$ \_\_\_\_\_

Payment Type:        \_\_\_\_\_

Payment Date:        \_\_\_\_\_

See Attached Fee Schedule