



Name of 3rd Party Contact: Jimmy Baisden

Plan Review Contact Name & Phone Number: Jimmy Baisden 817-335-1497

Project Address:
Include Suite/Bldg/Unit:

Legal Description: Addition _____ Block _____ Lot _____

Change of Use: _____ Prior Use: _____ Proposed Use: _____

3rd Party Plan Review Only _____ 3rd Party Plan Review & Inspections X 3rd Party Inspections Only _____

Commercial: Yes _____ No X Res: Yes X No _____ Type ___ Drainage

New Const X Remodel _____ Master Plan: Yes _____ No X Master Plan # _____

Description of Work (BE SPECIFIC): _____

An Urban Forestry Plan does/does not (circle one) apply to this project. If Plan does apply (circle one) 1—2—3—4 trees shall be installed on this Single Family Residential lot before final inspection.

Square Footage: _____ Residential: Living Area: _____ Garage & Porches/Patios: _____

Cost of Construction: _____ \$

Contractor Information: Builder/Contractor Name: _____

Address: _____

Phone Number: _____

Responsible Person: _____

DL# _____

DOB _____

Site Contact Person & Phone Number: _____

Residential Registration Number: _____