

FEES DOUBLE IF WORK IS PERFORMED WITHOUT PERMIT BEING ISSUED



NON-TRANSFERRABLE NO REFUNDS EXPIRES IN 180 DAYS

Application date: \_\_\_\_\_

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

**APPLICATION FOR PRIVATE IMPROVEMENT WITHIN PUBLIC RIGHT OF WAY**

(Check All That Apply) / (Please Print or Type)

Residential  Driveway  New Install   
Commercial  Sidewalk  Replacement

**1. Applicant Information**

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

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

**2. Property Owner Information**

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

Address: \_\_\_\_\_  
Street City State Zip

Email: \_\_\_\_\_

**3. Project Information**

Address: \_\_\_\_\_  
Street City State Zip

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

(Office Use Only)

**4. Inspections**

SITE INSPECTION (Prior to Construction)

Driveway(s) Circular / One-Way Material: \_\_\_\_\_ Width: \_\_\_\_\_ No. \_\_\_\_\_

Culvert(s) Concrete / Steel Diameter: \_\_\_\_\_ Length: \_\_\_\_\_ No. \_\_\_\_\_

Sidewalk(s) Width: \_\_\_\_\_ Length: \_\_\_\_\_ No. \_\_\_\_\_

FINAL INSPECTION (Any Culverts MUST Be In Place and Exposed)

Date: \_\_\_\_\_  Approved By: \_\_\_\_\_  Re-Inspection

Date: \_\_\_\_\_  Approved By: \_\_\_\_\_  Re-Inspection

Inspection Notes \_\_\_\_\_

\_\_\_\_\_

ATTACH SITE PLAN OR SURVEY SHOWING THE PROPOSED WORK TO BE DONE IN THE PUBLIC RIGHT-OF-WAY FOR PRELIMINARY REVIEW, MORE DETAILED DRAWINGS MAY BE REQUIRED BEFORE A PERMIT CAN BE ISSUED.

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All construction must be completed in accordance with Santa Clara’s Ordinances.

The Applicant hereby acknowledges and agrees to be strictly bound to the provisions, conditions and requirements of the City of Santa Clara, attached to the issuance of the driveway permit(s), and such will be faithfully and fully complied with.

The Applicant understands that the Planning Commission or its authorized agent, may make scheduled or unscheduled inspections of the property upon the issuance of the permit. The Applicant acknowledges that the construction must be inspected before construction begins and after it is finished; provided however that if a culvert is being installed it is in-place but not covered. If the Applicant is a corporation, Partnership or other legal entity other than a natural person, then the undersigned acting as the authorized representative of said entity will be responsible for ensuring the entity’s compliance with all provisions, conditions and requirements of the permit.

The Applicant is responsible for any necessary utility locations within the construction area.

**THE CITY OF SANAT CLARA HEREBY DISCLAIMS ALL REPRESENTATIONS AND WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTIES OF MERCHANTABILITY, FITNISS FOR A PARTICULAR PURPOSE AND NON-INFRINGEMENT.**

In no way does the City of Santa Clara’s issuance of a permit constitute an endorsement or warranty of the Applicant or the quality of the Applicant, Applicant’s officer, agent or employee’s workmanship.

I \_\_\_\_\_, the undersigned, have carefully reviewed this application and my answers to all questions. To the best of my knowledge, the answers are all true and correct.

**SIGNATURE** of Applicant/Agent or Attorney \_\_\_\_\_ Date \_\_\_\_\_

DP # \_\_\_\_\_ Address: \_\_\_\_\_

**Contact City Hall for Inspection(s):**

**By Phone** (830) 914-4443

**By Mail or In Person** 1653 N. Santa Clara Rd.

**Mayor Email address:** [mayor@ciSantaClaraTX.us](mailto:mayor@ciSantaClaraTX.us)

**City Secretary Email address:** [SantaClaraTX@yahoo.com](mailto:SantaClaraTX@yahoo.com)

**Office Hours: Monday – Thursday 9:00 AM – 2:00 PM**

(Office Use Only)		
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Date _____
<b>SIGNATURE</b> of Authorized Agent of the City of Santa Clara _____		
Reason(s) for Denial: _____		
_____		

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