



Single Trade

Permit Application

Permit #: ELE _____ - _____

Permit #: MEC _____ - _____

Permit #: PLM _____ - _____

(Please Print)

All contractors MUST FIRST REGISTER (one time per year) by completing the Annual Contractor Registration Form

Application Date: _____		
Project Address: _____		
Property Owner(s) Name: _____		
Owners Address: _____		Zip: _____
Phone: _____	Email: _____	
Contractor(s) Name: _____		Business Name: _____
Phone: _____	Email: _____	
<u>PLUMBING</u>		
Water Heater (change out) - \$75	Gas Test (Natural or LPG)- \$75	Backflow Device - \$50
Water/Sewer (yard line) - \$50	Expansion Tank - \$50	Water Tap ____ inch - \$50
Replacing Fixture(s)____ - \$50	Sewer Tap ____ inch - \$50	Gas Pipe (Residential) - \$50
	Add Medical Gas - Based on valuation	
<u>ELECTRICAL</u>		
Service Upgrade (Meter Loop) - \$75	Existing Service Reconnect	<u>UTILITY PROVIDER</u>
Temporary Power Pole - \$50		WE. ELECTRIC
New Service Installation - \$75	Overhead or Underground?	TXU/ONCOR
Adding # Circuits - \$50	OH UG	TRI-COUNTY
<u>MECHANICAL</u>		
Res Change-out Split System Unit(s) - \$75	New Bath Vent - \$50	Com. Change-out - Based on valuation
Res. Change-out HVAC Unit - \$75	New Kitchen Vent - \$50	Res. Duct Modification - \$50

Caution: If your work is included and paid for under a building permit you do not need this permit.

This permitting process is not available for:

**New Residential/Commercial
Construction Commercial Buildings
Complete System Installations**

*******PROCESSING PROCEDURE*******

1. Submit completed application and copy of license by Email to PermitApplications@weatherfordtx.gov
2. The Permit Technician will call you if your application is incomplete (Incomplete applications will not be processed).
3. If the contractor license(s) and insurance is current, a permit will be issued.
4. If the Building Official or the State of Texas requires plans or schematics for your project, the plans and permit must be submitted in person(Except as permitted above in description of work).

Name of Applicant: _____ Date: _____