



# Town of Argyle

## Residential Building Permit Application

308 Denton St. Argyle, TX 76226

(940) 464-7273

Email permits to [permits@argyletx.com](mailto:permits@argyletx.com)

Please allow 24-48hrs for processing

Building Permit Number: _____		Zoning: _____	
Project Address: _____		Valuation: _____	
Lot: _____	Block: _____	Subdivision: _____	
Project Description:	NEW SFR <input type="checkbox"/>	REMODEL or ADDITION <input type="checkbox"/>	SPECIFY OTHER: _____
	PLUMBING <input type="checkbox"/>	MECHANICAL <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>
	FENCE <input type="checkbox"/>	LAWN IRRIGATION <input type="checkbox"/>	SWIMMING POOL <input type="checkbox"/>
Description of Work:			
Area Square Feet: _____		Covered _____	
Living: _____	Garage: _____	Porch: _____	Total: _____
		Number of stories: _____	
*Buildings 5,000 square feet and over require a fire suppression system. Please contract Argyle Fire District at 940-464-7102 for requirements.			

Owner Name: _____
Phone Number: _____ Email: _____

Contractor Type	Contact Person	Phone Number	Contractor Email Address
General Contractor			
Mechanical Contractor			
Electrical Contractor			
Plumber/Irrigator			

No permits will be sent to review until complete. Please allow a minimum of (10) working days for review. A permit becomes null and void if work or authorized construction is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. **ALL PERMITS REQUIRE FINAL INSPECTION.** Failure to do so will result in the suspension of registration with the Town of Argyle.

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 or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:**

Approved by: _____	Date approved: _____
--------------------	----------------------

Building Permit Fee: \$ _____	Sewer/Septic Fee: \$ _____	Park Fee: \$ _____
Plan Review Fee: \$ _____	Wastewater Impact Fee: \$ _____	<b>Total Permit Fees:</b> \$ _____
Electrical Permit Fee: \$ _____	Drive/Culvert Fee: \$ _____	<b>Issued Date:</b> _____
Mechanical Permit Fee: \$ _____	Grading/Drainage Fee: \$ _____	
Plumbing Permit Fee: \$ _____	Roadway Impact Fee: \$ _____	

**Construction Hours: Monday - Friday, 7:00 a.m. to 6:00 p.m. and Saturday 7:00 a.m. to 5:00 p.m.**  
**No Work allowed on Sundays. The Town of Argyle has a zero tolerance policy on construction hours.**  
**First time violators will be cited.**



### Authorization of Payment by Credit/Debit Card

I hereby authorize the Town of Argyle to charge the amount of \$ \_\_\_\_\_ to the Credit/Debit Card listed below for a building permit, development review permit or for contractor's registration. My signature below confirms that I have full authority to use the card listed below and do so voluntarily.

\_\_\_\_\_  
Permit Address (House Number, Street)

\_\_\_\_\_  
Project Description (ex:Pool, Remodel)

\_\_\_\_\_  
Print Name as it appears on card

\_\_\_\_\_  
Billing Zip Code

\_\_\_\_\_  
Credit/Debit Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Cardholder's Signature

\_\_\_\_\_  
Date

**\*All credit card charges in excess of \$1,000 will incur a 3% processing fee**

Town of Argyle Community Development  
308 Denton Street  
P.O. Box 609  
Argyle, TX 76226  
Phone Number: 940-464-7273  
[www.argyletx.com](http://www.argyletx.com)