



CITY OF ROANOKE
 500 S. OAK STREET
 ROANOKE, TEXAS 76262
 (817) 490-1308

ACCESSORY STRUCTURE APPLICATION

Inspection Request – inspections@roanoketexas.com

ADDRESS OF PROJECT: _____

OWNER NAME: _____ PHONE: _____

CONTRACTOR INFORMATION: _____ PHONE: _____

CONTRACTOR EMAIL: _____

SUB-CONTRACTORS: *All general contractor and sub-contractors (electrical, mechanical, plumbing etc.) must be registered with the city.

MECHANICAL CONTRACTOR: _____ PHONE: _____

ELECTRICAL CONTRACTOR: _____ PHONE: _____

PLUMBING CONTRACTOR: _____ PHONE: _____

PERMIT TYPE

SHED	CARPORT DRIVEWAY/	ARBOR/PERGOLA
CONSTRUCTION TRAILER	FLATWORK	DECK/PATIO COVER
STORM SHELTER	MISCELLANEOUS	ROOF/RE-ROOF

DESCRIPTION OF IMPROVEMENT: _____

CONSTRUCTION VALUE: _____

SQUARE FOOTAGE OF LOT SIZE: _____ SQUARE FOOTAGE OF LIVING AREA: _____

SQUARE FOOTAGE OF GARAGE AND/OR PATIO: _____ SQUARE FOOTAGE OF ACCESSORY BLDG: _____

SETBACKS: FRONT: _____ REAR: _____ LEFT: _____ RIGHT: _____

PROJECT IN THE 100-YEAR FLOODPLAIN? _____ NO _____ YES (If YES, plans shall comply with floodplain regulations).

THIS CERTIFIES THAT ON THIS DATE, APPLICATION WAS MADE FOR PERMIT WITH THE CITY OF ROANOKE AND BY THIS SIGNATURE, THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE CODES, AMENDMENTS, AND CITY ORDINANCES.

APPLICANT SIGNATURE: _____ DATE: _____

PERMIT FEE: _____