

# BUILDING PERMIT

Jurisdiction of City of Pharr #4790

Applicant to complete numbered spaces only.

JOB ADDRESS 604 W. Sam Houston			
1 LEGAL DESCR.	LOT NO. 889	BLK 3	TRACT Byers S/D <span style="float: right;"><input type="checkbox"/> SEE ATTACHED SHEET</span>
2 OWNER	MAIL ADDRESS St. George Orthodox Church 608 Laurel/McAllen, Tx.	ZIP 78501	PHONE 631-1491
3 CONTRACTOR	MAIL ADDRESS Valle Del Sol 405 N. Blvd./Donna	PHONE 464-5954	REGISTRATION NO.
4 ARCHITECT OR DESIGNER	MAIL ADDRESS Texas Plan Service 2524 W. Pecan McAllen	PHONE 687-4072	REGISTRATION NO.
5 ENGINEER	MAIL ADDRESS	PHONE	REGISTRATION NO.
6 LENDER	MAIL ADDRESS	BRANCH	
7 USE OF BUILDING Church			
8 Class of work: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> MOVE <input type="checkbox"/> REMOVE			
9 Describe work: Will be constructing a new Church 1000 Sq. ft.			

JOB ADDRESS  
OWNER

10 Valuation of work: \$ 45,000.00		PLAN CHECK FEE	PERMIT FEE \$124.00	
SPECIAL CONDITIONS		Type of Const. VI	Occupancy Group	
		Division		
APPLICATION ACCEPTED BY <i>JRMA</i>		Size of Bldg. (Total) Sq. Ft. 1600	No. of Stories 1	
		Max. Occ. Load		
PLANS CHECKED BY	APPROVED FOR ISSUANCE BY	Fire Zone	Use Zone	
		Fire Sprinklers Required <input type="checkbox"/> Yes <input type="checkbox"/> No		
<p style="text-align: center;"><b>NOTICE</b></p> <p>SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATING OR AIR CONDITIONING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 1 YEAR AT ANY TIME AFTER WORK IS COMMENCED.</p> <p>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 HEREIN 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.</p>		No. of Dwelling Units N/A	OFFSTREET PARKING SPACES: Covered      Uncovered	
		Special Approvals	Required	Received
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT <i>[Signature]</i> 6-4-81		ZONING		
		HEALTH DEPT.		
SIGNATURE OF OWNER (IF OWNER BUILDER) <i>[Signature]</i> 6-4-81		FIRE DEPT.		
		SOIL REPORT		
		OTHER (Specify)		

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION      CK.      M.O.      CASH      PERMIT VALIDATION      CK.      M.O.      CASH

APPLICANT

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