



## APPLICATION FOR

MISCELLANEOUS PERMIT  
(PLEASE PRINT OR TYPE ALL INFORMATION)4301 City Point Dr.  
N Richland Hills, TX 76180  
Office: (817) 427-6330  
Fax: (817) 427-6303  
email: nrhpi@nrhtx.com

## PART 1. PROPERTY INFORMATION

Address 7905 IRISH DR.

Suite # \_\_\_\_\_

## PART 2. PROPERTY OWNER INFORMATION

Company Name \_\_\_\_\_

Agent/Homeowner JIM FENTRESSMail Address 7905 IRISHCity, State, ZIP N. RICHLAND HILLS, TX 76180Telephone ( 972 ) 965-6243

Facsimile ( ) \_\_\_\_\_

jim@jedstrategies.com

## PART 3. CONTRACTOR

LICENSE#: \_\_\_\_\_

REGISTRATION EXP: \_\_\_\_\_

Company Name SELF

Agent \_\_\_\_\_

Mail Address 6001 AVALON ST.City, State, ZIP N. RICHLAND HILLS, TX 76180Telephone ( 972 ) 965-6243

Facsimile ( ) \_\_\_\_\_

NOTE: Submit 2 sets of plans.

PART 6. CLASS OF WORK (Check One Only): ☐ Commercial ☐ Multi-Family ☒ Residential  
(Check One Only): ☐ Accessory Building (>200 sq. ft.) ☐ Detached Garage ☐ Carport ☐ Deck/Patio w/ Cover  
☐ Deck/Patio (> 30" in height) ☐ Fence ☐ Retaining Wall ☐ Fill/Grading/Excavation ☐ Revised Grading Plan  
☒ Other CAR PORT Separate permits required for all trade work

## PART 7. DESCRIPTION OF WORK

ADDITION OF CARPORT ON WEST SIDE OF HOUSE & DETACHED GARAGE

VALUE OF WORK \$ \_\_\_\_\_

NOTICE: This permit becomes null and void if work or construction authorized 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.

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. The issuance of a permit neither exempts nor modifies any covenants, deed restrictions, City ordinances or State or Federal Laws, whether herein specified or not.

Signature of Applicant [Signature] Date 3-17-2021Applicant is ☐ Owner ☒ Contractor

If owner: attach Homeowner Affidavit. Owner is responsible for calling in for inspection.

If Contractor: contractor is responsible for calling in inspection and making arrangements with homeowner for work to be accessible for inspection.

NOTE: If application denied, do you want construction plans placed in "archive"? Yes ☐ No ☐

## \*\*\*OFFICE USE ONLY\*\*\*

Application # 21 0000 2755 // Date Rec'd 4/5/21 // Date Approved \_\_\_\_/\_\_\_\_/\_\_\_\_ By \_\_\_\_Csa: [Signature]  
Contractor Notified \_\_\_\_/\_\_\_\_/\_\_\_\_ By \_\_\_\_Permit Fee: \$ \_\_\_\_\_  
Plan Review: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_