# Irrigation Permit Application

Permit #: _____

Permit Fee: $ _____


***CITY OF OVERTON, TEXAS***
1200 S. Commerce St. ✯ Overton, TX 75684
Phone: 903-834-3171

Inspections require 24 Hour Notice

*Incomplete application and/or submittal will delay the review process.*
***For New Commercial construction only, provide job copy set of approved stamped landscape/irrigation plans, or two (2) sets of proposed landscape/irrigation plans and a digital copy of the plans in .pdf format.***
***If electronic version is not provided, a $5.00 per page archiving fees will be assessed.***

***THIS APPLICATION IS FOR COMMERCIAL OR RESIDENTIAL LAWN SPRINKLERS.***

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**Permit Type**

❒ **Commercial** ❒ **Residential**

**Type of Work**

❒ **New Installation** ❒ **Addition** ❒ **Repair** ❒ **Replace**

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Job Address: _____ Suite / Unit #: _____

Description of work: _____ Valuation of work: _____

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**Backflow Prevention Device Information:** **Existing SN:** _____ **to be replaced**

***Final Irrigation Inspection must include an original copy of the completed City of Overton Backflow Test Report***

Water Meter: ❒ New ❒ Existing Size _____

Type of Assembly: ❒ Reduced pressure ❒ Double check ❒ Pressure vacuum breaker

***Property Owner***

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

***Contractor Type*** ***❒ Irrigator*** ***❒ Plumber***

Company Name _____ Office Phone _____

Irrigator or Master Plumber _____ Cell Phone _____

E-mail _____ Fax Number _____

## WORK TO BE PERFORMED

### PROPOSED WORK:

Backflow Device - 2" (51 MM) or less _____

Backflow Device - Over 2" (51 MM) _____

Lawn Sprinkler System - On Any One Meter _____

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***Applicant Acknowledgement:*** *I hereby certify by my signature below that: 1) I understand that I am the person responsible for inspections and all related fees and charges. 2) I agree to abide by all laws and ordinance governing this type of work whether specified herein or not 3) Where no work has been started within 180 days after the issuance of a permit or when more than 180 days lapses between approval of required inspections, such permit shall be void, and 4) I have read and examined this application and know the same to be true and correct.*

Applicant / Contractor Name (PRINT) _____

Applicant / Contractor Signature _____ Date _____