



**COMMERCIAL  
BUILDING PERMIT APPLICATION**

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Permit Applicant/Owner: \_\_\_\_\_

General Contractor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Type of Construction: Shell Only \_\_\_\_\_ Finish Out \_\_\_\_\_ New \_\_\_\_\_ Remodel \_\_\_\_\_

Total Sq. Footage: \_\_\_\_\_ Asbestos Report: Yes \_\_\_\_\_ No \_\_\_\_\_

TDLR: \_\_\_\_\_ Zoning: \_\_\_\_\_ PD# \_\_\_\_\_

*(under 50k not applicable)*

Fire Sprinkler System? Yes \_\_\_\_\_ No \_\_\_\_\_ Irrigation System? Yes \_\_\_\_\_ No \_\_\_\_\_

Water Meter(s): Domestic: \_\_\_\_\_ Size: \_\_\_\_\_ Irrigation: \_\_\_\_\_ Size: \_\_\_\_\_

Sewer Tap Size: \_\_\_\_\_ Septic? \_\_\_\_\_

Total Square Footage Under Roof: \_\_\_\_\_ Total Value of Project: \_\_\_\_\_

**SUB CONTRACTORS REGISTRATION**

*(All contractors must be registered and subcontractor validation forms provided to the City before we will release permit)*

Electrical Contractor: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_

Concrete Contractor: \_\_\_\_\_

***Applications must be approved and picked up within 90 days or they become null and void***

This permit becomes null and void if 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 has 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 or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state of Texas or local law regulating construction or the performance of construction.

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

## COMMERCIAL SUBMITTALS

**This checklist is Required with All Building Permit Applications. A Plan Review will NOT be performed until All Applicable Items are Submitted**

**Address:** \_\_\_\_\_ **Project Name:** \_\_\_\_\_

\_\_\_\_\_ Plan Review Checklist

\_\_\_\_\_ Commercial Building Permit Application

\_\_\_\_\_ Sub-Contractor Validation Forms Complete

\_\_\_\_\_ Com-Check Compliance Report

\_\_\_\_\_ Asbestos Survey (all commercial remodels)

\_\_\_\_\_ TDLR# - Texas Accessibility Standards (all commercial projects valued \$50,000 and larger)

\_\_\_\_\_ Approved Site Plan to include: (New Commercial – unless requested by Building Department)

- Legal Description (lot block, subdivision)
- Property lines and Lot Dimensions
- Proposed Structure and Existing Buildings
- Proposed Flatwork
- All Easements and proposed location of utilities
- North Arrow and scale
- Sq. Ft Totals
- Lot Coverage Calculations Including %

\_\_\_\_\_ Plot Plan with Finished Floor (new commercial only)

\_\_\_\_\_ Detailed Plans

- Erosion Control Plan
- Engineered foundation letter (must be sealed by PE)
- Engineered foundation design (must be sealed by PE)
- Approved Civil Plans
- MEP's
- Approved Landscape Plans with photometrics
- Exterior Elevations

\_\_\_\_\_ Septic System: (New Homes: MUST provide an acceptance letter from Dallas County)

\_\_\_\_\_ Electronic Copy on thumb Drive (EACH FILE CANNOT BE LARGER THAN 25MB)

\_\_\_\_\_ Must list meter sizes, quantity and sewer tap sizes on application.



City of DeSoto – BUILDING INSPECTIONS DIVISION

Subcontractor Validation Form

Subcontractors must validate on the building permit instead of securing individual permits for each trade. The validation form must be submitted by the registered subcontractor or one of the authorized designees of that subcontractor. The validation form must be submitted with building permit and prior to the commencement of work by that subcontractor. Please specify trade. Subcontractor validations may only be rescinded in writing.

ADDRESS OF PERMIT: \_\_\_\_\_

NAME OF GENERAL CONTRACTOR: \_\_\_\_\_

NAME OF SUBCONTRACTING COMPANY: \_\_\_\_\_

SUBCONTRACTOR ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ LICENSE # (if applicable) \_\_\_\_\_

NAME OF PERSON SUBMITTING THIS FORM: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ TYPE

OF SUBCONTRACTOR WORK VALIDATING:

- Electrical
- Plumbing
- HVAC - A or B License
- Refrigeration
- Mechanical (No License Required other than HVAC)

Specific description of work you are validating for: \_\_\_\_\_

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Submit this form to the Building Inspections Office:

1. In person at 211 E Pleasant Run Rd, DeSoto TX
2. Via email to [buildinginspections@desototexas.gov](mailto:buildinginspections@desototexas.gov), Subject line 'Validation'
3. Via online portal with permit submission