



New Residential Building Permit Application

Permit Number

PROJECT INFORMATION						
Project Address		Apt #	Subdivision		Lot	Block
Property Owner Name		Property Owner Address (if different)		Phone		
Contractor Name		Contractor Address		Phone		
Contact Email:						
DESCRIPTION OF WORK						
Description of work to be done:						
Circle One:	Single-family (detached)	Zero-lot line	Duplex	Townhome	Manufactured Home	
Lot Size (if known)		Total Square Footage	A/C Square Footage		Number of Floors	
Gas <input type="checkbox"/>	Number of Bedrooms	Number of Bathrooms	Garage Square Ft		Porch/Other Square Ft	
Propane <input type="checkbox"/>						
Electric <input type="checkbox"/>						
CONTRACTOR TRADES (COMPANY NAME)						
Contractors must validate on this permit before starting work						
Plumbing Contractor		Mechanical Contractor		Electrical Contractor		
Irrigation Contractor		Fence Contractor		Other		
NOTICE						
I certify that I have read this application and state that the above information is correct. I agree to comply with all city ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.						
This permit becomes null and void if work or construction authorized is not commenced within 180 days, or construction on work is suspended or abandoned for a period of 180 days at any time after work is commenced.						
Applicant Name (print)		Applicant Signature		Date		

For inspections, please email your request to: inspections@annatexas.gov

Development Services Department ▪ 120 W. 7th Street, Suite 142, Anna, TX 75409 ▪ 972.924.2616 ▪ permits@annatexas.gov ▪ www.annatexas.gov