



CITY OF VIDOR
1395 NORTH MAIN STREET
VIDOR, TX 77662
Phone 409-769-0150 • Fax 409-769-0098

GENERAL PERMIT APPLICATION

OWNERS NAME _____ DATE _____

ADDRESS OF WORK _____ PHONE # _____

CONTRACTOR _____ PHONE # _____

DESCRIPTION OF WORK _____

PERMIT FEES

RESIDENTIAL

COMMERCIAL

FEES: Minimum Work (Includes one inspection) (\$25.00)

Each additional inspection (\$25.00)

Re-Inspection (\$25.00)

VALUATION _____ TOTAL FEE _____

Fees for general work shall be taken from the permit fee schedule per valuation.

CERTIFICATION: I certify that all statements made herein or otherwise in connection with this permit are true and correct. I also understand that any person who knowingly or willfully falsifies a permit application or received a permit through willful omission or deception is guilty of a crime and may be subject to fines.

Contractors Signature _____

Owners Signature _____

Method of Payment: Cash Credit Card Check # _____ Permit # _____