



CITY OF SUGAR LAND
Department of Building Safety

COMMERCIAL BUILDING - M PERMIT APPLICATION

APPLICATION # _____

PROJECT ADDRESS: _____

PROJECT NAME/OWNER: _____

VALUATION AMOUNT: \$ _____

HVAC COMPANY NAME: _____ PHONE:() _____

ADDRESS _____ CITY/STATE _____ ZIP _____

EMAIL: _____

HVAC LICENSE HOLDER: _____ LICENSE #: _____

DESCRIPTION OF WORK: _____

Fee Schedule:

Valuation Amount	Fee
\$1 to \$1,000-----	\$34.00 BUILDING PERMITS and MECHANICAL SERVICES FEE
\$1,001 and up -----	\$34.00 Services fee plus \$10.00 for each additional thousand or fraction thereof.

PAY BY ESCROW ACCOUNT

I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type work will be compiled with whether specified herein or not. 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.

APPLICANT SIGNATURE

DATE



FOR OFFICE USE ONLY
PAYMENT CODE:
REG

CITY OF SUGAR LAND
Department of Building Safety

CONTRACTOR REGISTRATION

- GENERAL
 PLUMBING
 MECHANICAL
 ELECTRICAL
 FIRE
 IRRIGATION
 SIGN

COMPANY NAME: _____ PHONE: _____

ADDRESS _____ CITY/STATE _____ ZIP _____

EMAIL ADDRESS: _____ FAX #: _____

STATE LICENSE HOLDER'S NAME: _____
(IF REQUIRED)

STATE LICENSE NO: _____ EXPIRATION DATE: _____

DRIVER'S LICENSE NO: _____ STATE ISSUED: _____
(STATE LICENSE HOLDER OR COMPANY OFFICIAL)

REGISTRATION FEE: \$33.50 (Electrical, Plumbing & Fire Contractors are exempt)

**** REGISTRATION WILL EXPIRE ONE YEAR AFTER DATE OF ISSUANCE ****

NOTE:

1. Please complete a new form if there are any changes to the above information.
2. Revocation or Suspension of Registration
 - Repeated violations of any laws or regulations relating to any construction work (including City Ordinances, City Building Codes or any technical codes)
 - Intentional falsification of registration or permit information
3. Insurance Requirements
 - Submit proof that the contractor has: Workers' Compensation insurance as required by law; general liability insurance of at least \$100,000.00 for any one accident for property damage and \$300,000.00 for any one person for injuries or death; and \$5,000.00 for medical expenses for any one person.

I hereby certify that I have read and examined this document and know the same to be true and correct.

APPLICANT SIGNATURE

DATE

APPLICANT NAME (PRINT)

POSITION WITH COMPANY



Insurance Requirements

**Sugar Land Development Code
Chapter 7
Article II. Buildings**

Section 7-16. Code Amendments

105.8. *Insurance Required.* As a condition to the issuance of the permit, the Contractor shall submit proof that the contractor has: Workers' Compensation insurance as required by law; general liability insurance of at least \$100,000 for any one accident and \$300,000 for any one person; and property damage insurance of at least \$50,000 for any one accident and \$1,000 for any one piece of property.

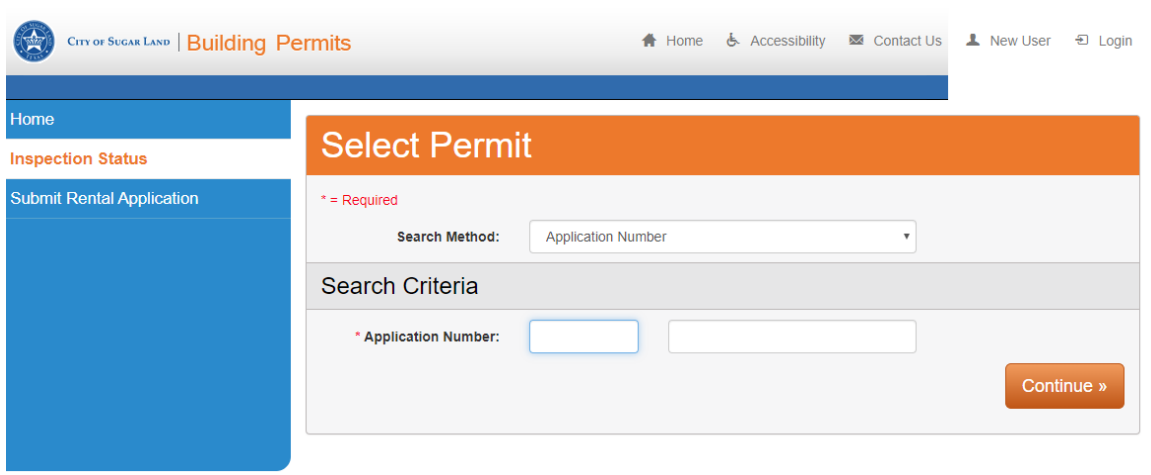
**Proof of insurance can be faxed to
Permits & Inspections Department (281) 275-2271**

TO SCHEDULE AN INSPECTION ONLINE www.sugarlandtx.gov

YOU WILL NEED YOUR APPLICATION NUMBER TO PROCEED

BUSINESS —> INSPECTION SCHEDULING

Select **Online Building Permits system** and then Select **INSPECTION STATUS**



The screenshot shows the 'City of Sugar Land | Building Permits' website. The navigation bar includes 'Home', 'Accessibility', 'Contact Us', 'New User', and 'Login'. A left sidebar contains 'Home', 'Inspection Status', and 'Submit Rental Application'. The main content area is titled 'Select Permit' and features a search form. The form includes a 'Search Method:' dropdown menu set to 'Application Number'. Below this is a 'Search Criteria' section with a label '* Application Number:' followed by two empty input fields. A 'Continue »' button is located at the bottom right of the form.

Enter **APPLICATION NUMBER**

Select **SCHEDULE / CANCEL INSPECTIONS** in **blue** to the right of the permit type

Select **INSPECTION DESCRIPTION** (Ex: [BLDG, FINAL](#))

Select **INSPECTION DATE** from available dates listed. Please print confirmation page & retain for your records.

TO CHECK INSPECTION RESULTS ONLINE www.sugarlandtx.gov

YOU WILL NEED YOUR APPLICATION NUMBER TO PROCEED

BUSINESS —> INSPECTION SCHEDULING

Select **Online Building Permits system** and then Select **INSPECTION STATUS**

The screenshot shows the City of Sugar Land Building Permits website. The header includes the city logo, 'CITY OF SUGAR LAND | Building Permits', and navigation links for Home, Accessibility, Contact Us, New User, and Login. A blue sidebar on the left contains links for Home, Inspection Status, and Submit Rental Application. The main content area is titled 'Select Permit' and features a search form. The form includes a 'Search Method' dropdown menu set to 'Application Number', a 'Search Criteria' section with two input fields for the 'Application Number', and a 'Continue »' button. A red asterisk indicates that the application number is a required field.

Enter **APPLICATION NUMBER**

Select **INSPECTION STATUS** from **blue** column on the left (under **PERMIT STATUS**)

Select **PERMIT TYPE** (Ex: [000/000/ELEC.00](#)) that you are checking results on

You will then be able to view Inspection Type, Scheduled Date, Status & Date Resulted

For more information (Ex: Inspector & any notes):

Select **INSPECTION TYPE** (Ex: [ELEC, COMPLETE COVER](#)) for any notes

For more information you may call the Inspection Request Line at 281-275-2320.



CITY OF SUGAR LAND
Department of Building Safety

CREDIT CARD AUTHORIZATION FORM

FAX: (281) 275-2271

I authorize the City of Sugar Land to use my credit card to process the following payment:

Date: _____

Amount: _____

Jobsite address: _____

Application No: _____

Contractor: _____

Contact Name: _____

Phone: _____ Fax No: _____

Email: _____

Last 4 digits of Credit Card Number: _____

Exp Date: _____ Card Code: _____

Signature: _____

Credit Card: Visa Master Card American Express

**** Please enter Credit Card Number below ****

***** Cut Here*****

Card Number: _____