



Development Permit Application

City of Huntsville | 448 State Highway 75 North | Huntsville, TX 77320 | 936-294-5782

This application is for a Certificate of Compliance. You must **FILL THIS FORM OUT COMPLETELY** (including signatures) **AND** attach the required documents or this application cannot be accepted. Allow up to 7-10 business days to process. Do not submit payment at this time.

Property Information

Is Property in Floodplain? Yes No

Physical Address _____

City Limits or ETJ

If the physical address is not known give a legal description of the property below:

Residential or Commercial

Development Type

Describe what you are doing on this property:

Submissions should include:

*Staff may request Proof of Ownership

One (1) site plan on letter size (8-1/2x11) paper:

- Drawn to a measurable scale
- Clear Property lines
- Adjacent Street names
- Dimensions from property lines to structures
- Dimensions for the structure

Manufactured Home Placement

Year Model _____

Sewer Tap New Existing OSSF Other

Water Tap New Existing Well

Sign Placement

Electricity to sign

911 Address for Utility Purposes Only

Change of Use

Current Use _____

Proposed Use _____

Building Construction

Construction: New Add-on Remodel

Sewer Tap: New Existing OSSF

Water Tap: New Existing Well Other

Accessory Building or Construction

Storage Building Carport/Garage Swimming Pool

Driveway Construction

Driveway Culvert – for non-curb & gutter streets

On-Site Sanitary Sewer Facility

(You must submit a design by a Registered Sanitarian)

Property Owner Information

– By signing below, I acknowledge that I am the rightful owner of the property proposed for development; and, if different, I authorize the “Applicant” to serve as my agent to file and execute this application on my behalf.

Property Owner Name _____

_____ Mailing Address

_____ City

_____ State

_____ Zip Code

Phone Number _____

E-mail _____

PROPERTY OWNER PRINTED NAME

REQUIRED

PROPERTY OWNER SIGNATURE

REQUIRED

Date

Applicant Information

- As authorized by the property owner or if same as the property owner write in “Same as above”.

Name or Company _____

_____ Mailing Address

_____ City

_____ State

_____ Zip Code

Phone Number _____

E-mail _____

APPLICANT PRINTED NAME

REQUIRED

APPLICANT SIGNATURE

REQUIRED

Date

FOR STAFF USE ONLY

Signatures

Site Plan(s)

OSSF Design

Received/By: _____

Date Received: _____

GEO ID _____ - _____ - _____

PD-DA-1

Revised: October 2023