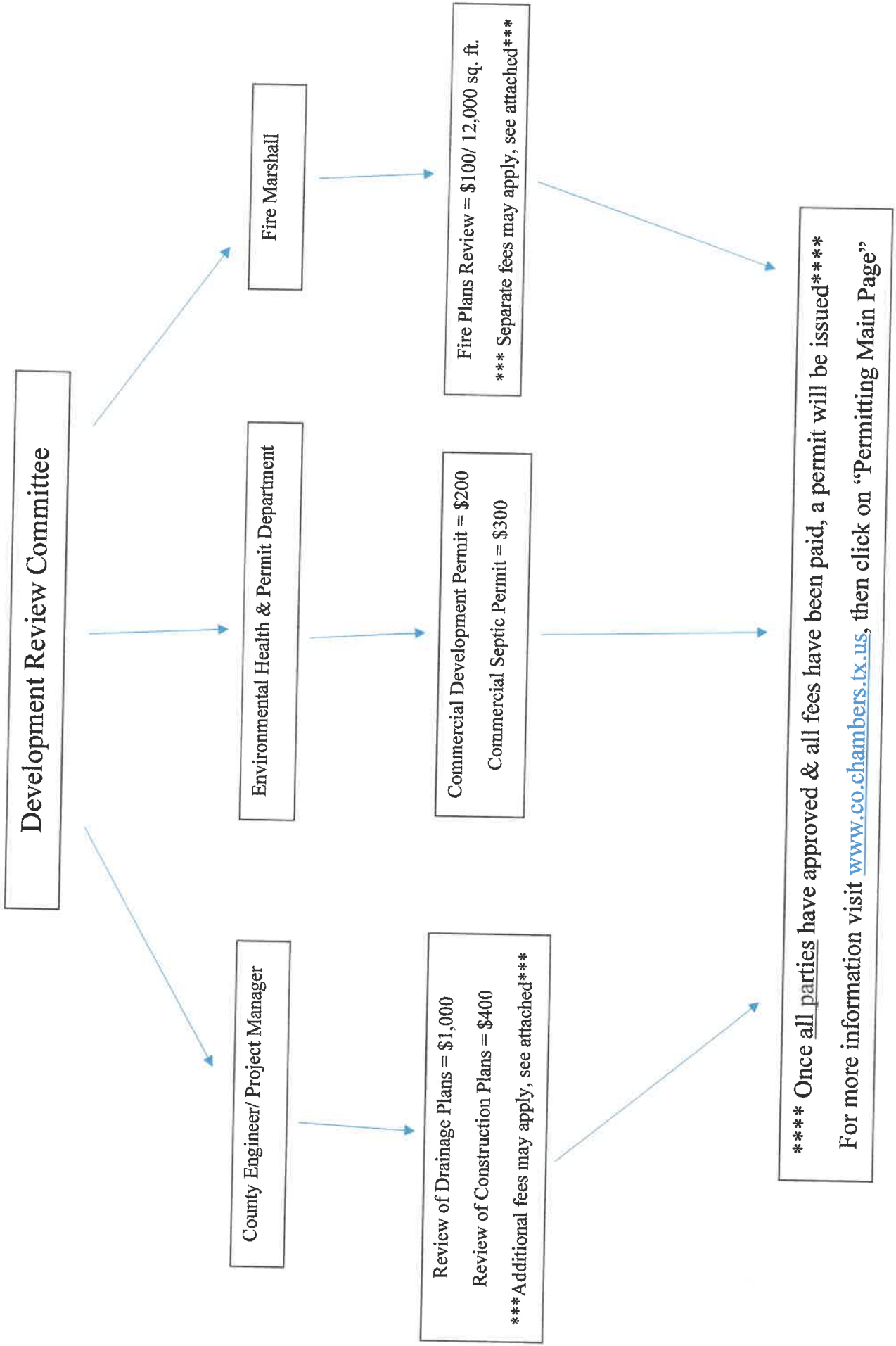


# CHAMBERS COUNTY COMMERCIAL PERMITTING PROCESS



**Commercial & Residential Development Fee Schedule**

<b>FEE TYPES</b>	<b>DESCRIPTION</b>	<b>CALCULATION FACTOR</b>	<b>FEE</b>
<b><u>Permit Fee</u></b>			
Development	Any type of construction or development	Per building	\$200
Septic	Septic installation review and permit	Per septic system	\$300
Utilities	Electricity or TBCD Water or Sewer	Per site	\$20
Culvert	Installation of culvert in county ROW, if 1 <sup>st</sup> time culvert installed	Each	\$20 & Contact R&B 409-267-2708
<b><u>Subdivision Development</u></b>			
Review of preliminary and final plat		Each	\$200
Review of Construction Plans		Per site	\$400
Review of Drainage Plan	Review fee subject to change if consultation exceeds \$1,000 charge	Per site	\$1000
<b><u>Commercial Development</u></b>			
Review of preliminary and final plat		Each	\$200
Review of Construction Plans		Per site	\$400
Review of Drainage Plan	Review fee subject to change if consultation exceeds \$1,000 charge	Per site	\$1000
<b><u>Fire Code Fees</u></b>			
Plans Review & Inspection for Construction, Substantial Improvement, and Remodeling	Plans review for buildings and structures. Includes pre-fabricated buildings and buildings moved into the county.	Sq. footage divided by 12,000	\$100 per 12,000 sq. ft. or fraction thereof

	*Includes 1 inspection and 1 re-inspection for Certificate of Compliance/Occupancy. Also includes fire inspection for permanent power.		\$100 for RV parks without a structure
Fire Systems Permit	Plans review and permit for fire alarms, fire sprinkler systems, kitchen hood systems, or other fire protection systems.  *Includes 1 inspection and 1 re-inspection	# of devices (horns, strobes, or heads, etc.) in the system:	
		1-10	\$50
		11-25	\$75
		26-100	\$100
		101-200	\$200
		201-600	\$300
		600+	\$300+\$50/additional 100
		Alarm panel or sprinkler riser (each)	\$50
Underground Storage Tank Permit	For underground storage tank (flammable or combustible liquids) installation or removal.	Each tank	\$75
<b><u>Operational Permits</u></b>			
Fireworks or Pyrotechnic Permit	For fireworks or pyrotechnic displays.	Each Display	\$50
<b><u>Annual License Inspections</u></b>			
Hospitals, Nursing Homes, Dialysis, Medical Facilities, etc.	*Includes 1 inspection and 1 re-inspection	<50 beds	\$50
		500-100 beds	\$100

		100+ beds	\$150
Day Cares	*Includes 1 inspection and 1 re-inspection	Each	\$75
Foster Homes/Group Homes	*Includes 1 inspection and 1 re-inspection	Each	\$50
<b><u>Misc. Inspections</u></b>			
Temporary Food or Outdoor Event Vendor	If using a generator or heat source, cooking, etc. Includes mobile concessions.	Each booth	\$25
Traveling Carnivals, Circuses, Fairs	Inspection and site plans review.	Each event	\$150
Permanent Power	Fire inspection for permanent power, if not part of a plans review/permit.	Each service connection	\$35
Tar Pot/Kettle	For roofing operations.	Per kettle	\$75 (\$225 max)
Second re-inspection		Per hour, minimum 1 hour or cost to County	\$35
Other Inspection/Activity/Standby	Other inspection not specifically indicated above.	Per hour, minimum 1 hour or cost to County	\$35
After Hours Inspection	Cost for after-hours inspection.	Per hour, minimum 2 hours or cost to County	\$50
<b><u>Working Without a Permit</u></b>	Construction, installation, or operations without first obtaining a permit.	Applies to all fees on this schedule.	All Fees Double.

# Chambers County Environmental Health & Permitting

## COMMERCIAL PERMIT APPLICATION



PLEASE MAKE CHECKS PAYABLE TO: **CHAMBERS COUNTY**  
 PO BOX 1180 / 201 AIRPORT RD, SUITE #1-ANAHUAC, TX 77514  
 (409) 267-2700 Voice (409) 267-3623 Fax

ID#: \_\_\_\_\_  
 APP#: \_\_\_\_\_  
 PMT#: \_\_\_\_\_  
 RCPT#: \_\_\_\_\_  
 LINK#: \_\_\_\_\_

**THIS IS NOT A PERMIT-**  
 A request for additional information may be required or your permit  
 will be mailed to you in **5 TO 7 BUSINESS DAYS!**

**\*\*\*ALL INFORMATION IS REQUIRED\*\*\***

\*CONTRACTOR /APPLICANT'S NAME: \_\_\_\_\_  
 PRESENT MAILING ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE#: \_\_\_\_\_ DAYTIME PHONE#: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

\*PROPERTY OWNER'S NAME: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE#: \_\_\_\_\_ DAYTIME PHONE#: \_\_\_\_\_

\*PHYSICAL ADDRESS: \_\_\_\_\_  
 (FOR PROPOSED DEVELOPMENT) \*(ACREAGE)

\*NAME & TYPE OF BUSINESS: \_\_\_\_\_  
 \*SQUARE FOOTAGE: \_\_\_\_\_ \*DEV COST: \_\_\_\_\_

\*SUBDIVISION: \_\_\_\_\_  
 \*SECTION #: \_\_\_\_\_ \*LT/TR #: \_\_\_\_\_ \*BLOCK#: \_\_\_\_\_ \*PARCEL#: \_\_\_\_\_  
 \*ABTRACT #: \_\_\_\_\_ \*SURVEY: \_\_\_\_\_

\*OTHER \_\_\_\_\_

\*SEPTIC INSTALLER: \_\_\_\_\_ \*CERTIFICATION #: \_\_\_\_\_

\*ELECTRICAL SRVC PROVIDER ACCT/ESI ID#: \_\_\_\_\_

**PERMIT FEES**

**CULVERT\***  
 CONTACT ROAD &  
 BRIDGE @ 409-267-2708

**UTILITIES**  
**\$20.00**

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**DEVELOPMENT**  
 (ANY TYPE)  
**\$ 200.00**

IN OR OUT OF  
 FLOODZONE

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**SEPTIC**  
**\$300.00**

**NOTE:** Commercial projects require the approval of Environmental Health, County Engineer, and County Fire Marshal. Each department will have specific information for their approval and review process. Once all three (3) signatures are obtained, please present the permit application to the Environmental Health and Permitting Office, along with permit fee(s), to obtain your permit. If septic and development permits needed, a fee will have to be paid separately for each permit.

\_\_\_\_\_  
 Environmental Health and Permitting (Septic, Floodzone, Food Service Standards) \_\_\_\_\_ Date

\_\_\_\_\_  
 County Engineer (Drainage Review, Plat Approval) \_\_\_\_\_ Date

\_\_\_\_\_  
 County Fire Marshal (Fire & Building Code Review) \_\_\_\_\_ Date

**SIGNATURE OF APPLICANT AND/OR OWNER REPRESENTATIVE:** \_\_\_\_\_  
 \_\_\_\_\_ **\*DATE:** \_\_\_\_\_



# Chambers County Road & Bridge

## Commercial Development Application

Road & Bridge  
201 Airport Rd.  
Anahuac, TX 77514  
Phone: 409-267-2708  
Fax: 409-267-4499

Please complete applications to the fullest.  
Indicate "NA" when an item does not pertain to your application.

### CHECK APPROPRIATE BOX(ES) BELOW

#### SUBDIVISION DEVELOPMENT

- Review of Preliminary Plat and Final Plat \$200.00
- Review of Construction Plans \$400.00
- Review of Drainage Plan \$1000.00

IF THE SUBDIVISION IS LESS THAN 5 ACRES A DRAINAGE PLAN WILL NOT BE REQUIRED. IF THE SUBDIVISION IS TO BE A PART OF A LARGER TRACT OF LAND TO BE DEVELOPED AT A LATER DATE AS A AN ADDITION TO ORIGINAL SUBDIVISION AN OVERALL DRAINAGE PLAN WILL BE REQUIRED.

#### COMMERCIAL DEVELOPMENT

- Review of Preliminary Plat and Final Plat \$200.00
- Review of Construction Plans \$400.00
- Review of Drainage Plan \$1000.00

FOR DRAINAGE PLAN REVIEW IF THE COST FOR OUTSIDE CONSULTANT TO REVIEW EXCEEDS THE \$1000.00, THE DEVELOPER WILL BE RESPONSIBLE FOR THE ADDITIONAL COST.

### PROJECT INFORMATION

Project/Subdivision Name: \_\_\_\_\_  
 Project Address/Location: \_\_\_\_\_  
 Brief Description of Project: \_\_\_\_\_

### PROPERTY INFORMATION

Legal Description & Recording Info: \_\_\_\_\_  
 Parcel(s) Tax ID#(s): \_\_\_\_\_ Property platted:  YES  NO  DON'T KNOW  
 Type (acres):  Residential \_\_\_\_\_,  Commercial \_\_\_\_\_, # of Existing Units \_\_\_\_\_  
 Total Acres: \_\_\_\_\_ ETJ  Yes  NO

You will be **required** to attend a meeting with the Development Review Committee (DRC)

**APPLICANT & OWNER INFORMATION**

(PLEASE PRINT OR TYPE-PRIMARY CONTACT WILL BE NOTIFIED)

Owner Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person (if different from applicant): \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

By signing this application, staff is granted access to your property to perform activities related to your case.

Signature(s): \_\_\_\_\_

Printed/Typed Name(s): \_\_\_\_\_

**NOTE: FOR THE INSPECTION OF THE SUBDIVISION BEING CONSTRUCTED WE HAVE A CONTRACT WITH HUTCHINSON AND ASSOCIATES TO PROVIDE THE INSPECTION. THEY BILL US FOR THEIR TIME AND MATERIALS AND WE BILL DEVELOPER FOR COST. WE DO NOT CHARGE FOR BILLING.**



# PLANS REVIEW APPLICATION - BUILDING

Chambers County Fire Marshal's Office

2128 SH61/PO Box 957, Anahuac, TX 77514

Phone: 409-267-2445 FAX: 409-267-8497 Email: [rdholzaepfel@chamberstx.gov](mailto:rdholzaepfel@chamberstx.gov)

### Applicant Information

### Project Information

Name:	Facility Name:		
Address:	Address:		
City:	State:	Zip:	City: State: Zip:
Phone:	Phone:		
Email:	Email:		

### Designer/Engineer

### Contractor/Builder

Name:	Name:
Phone:	Phone:
Email:	Email:

### Applicable Standards

1. Fire Code: IFC 2015 & Chambers County Fire Code Amendments  
Building Code: IBC 2015
2. A building permit will not be granted for commercial buildings, public buildings, or multi-family dwellings of four or more units until this document is completed and signed by the County Fire Marshal, and applicable fees are paid.
3. Once construction is complete, a request for final inspection must be made to the Fire Marshal and a Certificate of Compliance/Occupancy must be granted in order to occupy the building.

**Please complete the section below and indicate plan page numbers where applicable. These items have to be verified in order to complete the review. Please ensure each item is addressed.**

### Construction/Design IBC 2015

Occ. Classification(s) (Ch. 3):	Occ. Load(s) (1004):
Construction type (Ch. 6):	Number of Stories:
Area Limitation (503):	Actual Area:
Height Limitation (503):	Actual Height:
Unlimited Area? (507):	Required Separations (IBC 508.4):
Exterior Fire Resistance Rating (602):	Distance from other structures:
Corridor Fire Rating (1020):	

### Plan Information \*Non-required items may be marked "NR"

Fire Lanes indicated page:	Fire Hydrant locations page:
Exits & Egress indicated page:	Fire Separations indicated page:
Accessible Routes Indicated page:	Hazmat Provisions (hazmat in building?):
Exit Signs indicated page:	High Piled Storage?:
Emergency Lighting indicated page:	Other:
Fire Alarm System indicated page:	Fee Due:
Sprinkler System indicated page:	Paid On:

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_





# PLANS REVIEW APPLICATION– FIRE ALARM/SPRINKLER

Chambers County Fire Marshal's Office

2128 SH61/PO Box 957, Anahuac, TX 77514

Phone: 409-267-2445 FAX: 409-267-8497 Email: [rdholzaepfel@chamberstx.gov](mailto:rdholzaepfel@chamberstx.gov)

### Applicant

### Project Information

Name:	Facility Name:		
Address:	Address:		
City:	State:	Zip:	City: State: Zip:
Phone:	Phone:		
Email:	Email:		

### Designer/Engineer

### Contractor/Installer

Name:	Name:
Phone:	Phone:
Email:	Email:

### Applicable Standards

- Fire Code: IFC 2015 & Chambers County Fire Code Amendments
- Building Code: IBC 2015
- NFPA 13, 2013
- NFPA 70, 2014
- NFPA 72, 2013

### Construction/Design IBC 2015

Occ. Classification(s) (Ch. 3):	Occ. Load(s) (1004):
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### Plan Information

### Fees

<input type="checkbox"/> Fire Alarm or <input type="checkbox"/> Sprinkler or <input type="checkbox"/> Vent Hood	# of Devices (horns, strobes, heads, etc.) _____
Fire Alarm System indicated page:	
Sprinkler System indicated page:	
FDC Location:	
FDC Type (5" Storz or 2 1/2" NST?):	
Control Valve Location:	Total Fee:
Control Valve Type (Wall, OS&Y, or PIV):	Paid On (date):

### Note:

1. Fire alarm systems must be monitored.
2. FDC and PIV must be located remote and out of the collapse zone. Further information may be obtained from Fire Marshal.
3. Signs required to identify FDC, Control Valve doors, and Fire Alarm System rooms.
4. Control Valve/PIV sign required if it is not located in close proximity to the FDC.
5. Fee must be paid before permit is issued.

### Applicant Signature:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

