

City of Lubbock, Texas
Building Inspection Department
1625 13th Street, Suite 106
Lubbock, Texas 79457
(806) 775-2087
(806) 775-2088
http://buildinsp.ci.lubbock.tx.us/

Commercial Building Permit Application & Submittal Guidelines

(For all projects EXCEPT those involved with one and two family dwellings not exceeding three stories in height)

In addition to the permit application form, this brochure contains useful information regarding the minimum requirements for a complete and accurate submittal package necessary for an efficient plan review process that will translate into the shortest possible permit turn-around time. In addition to a complete and accurate submittal package, plan review turn-around time is a function of current work volume. The City of Lubbock endeavors to complete reviews in the minimum time possible, but the average processing time does vary. Please contact the Senior Plans Examiner for current updates on typical processing time as well as the status of your particular application.

Thank You.

Requirements By Project					Documentation Required as Part of a Complete Commercial					
Category: (See description at right for					Permit Submittal Package					
corresponding letter type)					Project Category:					
Always Required Conditional- See text					(B) Ne	w Construction w Construction (Shell Only) dition to Existing Building	 (F) □ Foundation Only (G) □ Demolition (H) □ Other 			
A, B, F	၁	Q	ð	н, Е	(E.1) T	model/Alteration Tenant Finish-Out White Box Finish-Out				
•	•	•	•	•	Commercial Buil	ding Permit Application Form				
	•	•	•		Asbestos Survey Certification: Required where existing construction materials are to be disturbed through remodeling or demolition activities. Survey must be done by a licensed asbestos inspector prior to City acceptance of a permit application. Signing and dating of the certification statement on this application form is sufficient (See "Statutory Compliance Section"). More information pertaining to the law can be found at http://www.dshs.state.tx.us/asbestos/					
•	•	•	•	•	Construction Documents: Two (2) complete sets of construction documents (plans and specs) sufficient to clearly and completely demonstrate the scope of work. See the "Minimum Information for Typical Construction Plans and Specifications" for guidance as to the type of information that should be included. Also check engineering and architectural requirements.					
•	•				registered profess certificate must al	ional engineer that the property	om a licensed professional land surveyor or has been surveyed and monuments set. The is located within any special flood hazard area os.			
0					TCEQ Notice of Intent (NOI): Required for any ground disturbance equal to or greater than one acre or part of a larger common plan totaling one acre or more (i.e. a subdivision). Fill out a separate application for TPDES permit, where required.					
0	0	0		0	TDLR/EAB Registration Form: Required if your project valuation is \$50,000 or more. The Texas Department of Licensing and Regulation Architectural Barriers Division requires registration of these projects. In these cases, the City of Lubbock must verify that this has been done by requiring that you include a copy of your TDLR registration form, bearing the EAB registration number, with this application. Projects of less than \$50,000.00 valuation are not required to register with TDLR, and the form does not need to be submitted, though compliance with applicable accessibility laws is still required. See Texas Accessibility Standards at http://www.license.state.tx.us/ab/abrules.htm for more information.					
0	0				FEMA Form #81-31 (Elevation Certificate): Required where the survey certificate has identified the property in a special flood hazard area, the preparer of the survey certificate must complete FEMA Form # 81-31. It must include Base Flood Elevation data as well as minimum finished floor elevations to comply with local and Federal regulations. A second such certificate, based on as-built conditions, will be required prior to requesting a final building inspection.					
							equired unless exempt as indicated. A- Hospital or Medical Research Facility			
				_	Type of Report	New Const/Additions	Other			
0	0	0		0	Envelope: Mechanical:		□ N/A- No alteration, no change in use water heating system existing or proposed			
					Lighting:	N/A- No HVAC or service v Required (No exemptions)	water heating system changes proposed N/A- No lighting system changes			
STATUTORY COMPLIANCE SECTION (This MUST be filled out by applicant)										
Texas Accessibility Standards (TAS): The Texas Department of Licensing & Regulation registration and issuance of an EAB # for										
all projects valued at \$50,000 or greater. DOES NOT APPLY TDLR REGISTRATION FORM ATTACHED Effective January 1, 2002- Renovations & Demolitions to Commercial Buildings: DOES NOT APPLY										
☐ I hereby certify that an asbestos survey has been done in accordance with the Texas Asbestos Health Protection Rules (TAHPR)										
and the National Emission Standards for Hazardous Air Pollutants (NESHAP) for the area(s) being renovated and/or demolished. REQUIRED: Call the TEXAS ONE CALL SYSTEM at 1-800-344-8377, or 1-800-DIG-TESS, 2 days prior to any excavation.										

Commercial Ruilding Permit Application (Rev. Feb 2007)

		illici Ciai Dullulli	g i ci ii	т Арриса	HOII (Re	v. Feb 200	<i>')</i>			
Office Use Only: Plan Check Type and #: Review Deposit: \$ Received By: Payment Method:	Comments Due NL	Pheck By: NLT: d to: Date and Time Received								
Type of Construction: (Letters correspond to submittal requirements on table on facing page) Applie	(B) □ Ne (C) □ Ad (D) □ Re (E.1) □ Te (E.2) □ W	w Construction w Construction (Shel dition to Existing Bu model/Alteration enant Finish-Out hite Box Finish-Out in all information.	ilding	(1)	G) □ De H) □ Otl	undation O molition ner (Specif o not appl	y below)	roject.		
Project Title:										
Project Address:								Suite #:		
Legal Description:	Subdivision:	livision:				Lot:		Block:	1	
LCAD	Property ID No.	(Available at www.lu	bbockca	nd.org):		R-				
			Contact Information				DYANE #			
OWNER:		NAME		ADDRESS, CITY, ZIP				PHONE #		
CONTRACTOR:										
ENGINEER:										
ARCHITECT:										
PROJECT CONTAC	T:									
E-Mail Address:	E-Mail Address:			Cell Phone #:						
		Summa	ary of s	scope of wor	k:					
Pro (A		Sq. Ft.								
I (A		\$00				0				
By my signature I certify the owner for the purposes all subsequent communic further certify that all of the accompanying documents read and understand the understand that the application does not guarantee approvissued, it does not constitute of the technical codes gorpursuant to plan review or	Sig Pri Na	nature:inted me:								
parsault to plan leview of			Date:							

INTERDEPARTMI	ENTAL REVIEW COM	MENTS SECTION (Office Use Only)
Planning & Zoning Department	□ N/A	
Comments:	□ Not Platted	
Approved By:		Date:
Floodplain Administration:	□ N / A	
Comments:		
		_
Approved By:		Date:
Public Works Engineering: Comments:	□ N/A	
Comments.		
Approved By:		Date:
Water & Wastewater Utilities En	gineering ¬ N/A	
Comments:	gmeering	
Approved By:		Date:
Fire Marshal	□ N /A	
Comments:		
		D 4
Approved By:		Date:
Industrial Waste Monitoring & P Comments:	re-Treatment \square N/A	
Comments.		
Approved By:		Date:
Backflow	□ N/A	
Comments:		
Approved By:		Date:
Health Department	□ N / A	
Comments:		
Approved By:		Date:
Approved by.		Datt

Attention Reviewing Departments: Your portion of the review of this submittal may or may not run concurrently with others. Since the overall processing time for the permit is limited, time is of the essence. We appreciate your efforts at expediting your comments, but fully understand your normal duties might need to take priority. If your workload will not allow a timely review, please notify the assigned plan examiner in Building Inspection as soon as possible so that adjustments can be made accordingly.