

## Public Works Permit Application Instructions

- 1.) All Public Works Permit Applications are to be submitted at the Public Works Department at the City of Schertz:

10 Commercial Place Bldg. #2  
Schertz, TX 78154  
pwpermits@schertz.com

- 2.) Applications will only be accepted if all items on the Public Works Permit Checklist are included in the submittal. These items are:

- Completed Public Works Application Form
- Payment only on Street Cuts, Water Taps and Sewer Taps \$25 per Street cut, Water Taps, and Sewer Taps (Check Only). All other Utility permits are free.
- A map of the requested area where the work is being done.

- 3.) The applicant will be notified within a minimum of 5 business days if any additional information will be needed for the review.

- 4.) Approved permits will be emailed, faxed, or picked up at Public Works at the above address. The permit shall remain on-site while work is performed. The permit is non-transferrable and expires 6 months from date issued. Water and Sewer locates will be notified to the Water Division when the permit is issued and they will have 48 working hours to complete locates. Locates are only good for 14 days and must be requested again within 14 days.

- 5.) Contact information:

Water/Sewer locates: **Please call 811**

City contact: **Paul Lopez, Water/ Wastewater Supervisor**  
**210-619-1819 or plopez@schertz.com**

General Questions: **210-619-1800**



CITY OF SCHERTZ  
 PUBLICWORKS  
 10 COMMERCIAL PLACE, BLDG. #2  
 SCHERTZ, TEXAS 78154  
 (210) 619-1800, FAX (210) 619-1849  
 pwpermits@schertz.com

### PUBLIC WORKS PERMIT APPLICATION

JOB ADDRESS/DESCRIPTION:		COUNTY:	
ZONING:	BLOCK:	LOT:	SUBDIVISION:
OWNER NAME:	ADDRESS, CITY, ST. ZIP:		PHONE: CELL: EMAIL:
CONTRACTOR:	ADDRESS, CITY, ST. ZIP		PHONE: CELL: EMAIL:
ENGINEER:	ADDRESS, CITY, ST. ZIP		PHONE: CELL: EMAIL:
DESCRIPTION OF WORK BEING PERFORMED:			
PROOF OF REGISTRATION WITH STATE AND/OR CITY:			
WILL THERE BE ANY OF THE FOLLOWING PERFORMED:		TRENCHING	
ROADBORING: YES <input type="checkbox"/> NO <input type="checkbox"/>	STREET CUTS: YES NO		TRENCH DEPTH _____ IS SHORING NEEDED: **NOTE: IF TRENCH IS OVER 5 FEET SHORING MUST BE USED.
WHAT TYPE OF UTILITY LOCATES WERE MADE? WATER <input type="checkbox"/> SEWER <input type="checkbox"/> ELECTRIC <input type="checkbox"/> GAS <input type="checkbox"/> PHONE <input type="checkbox"/> CABLE <input type="checkbox"/> TV _____ OTHER <input type="checkbox"/>			
<b>A \$200.00 FINE WILL BE IMPOSED IN VIOLATION OF WORKING WITHOUT A PERMIT.        PERMITS NOT POSTED ON SITE WILL BE ASSESSED A 50\$ INSPECTION FEE.</b>			
NOTICE		FOR DEPARTMENT USE ONLY	
THIS APPLICATION FOR PERMIT SHALL BECOME NULL AND VOID WITHIN 6 MONTHS OF ISSUANCE. PERMITS ARE NON-TRANSFERABLE FROM ONE PERSON TO ANOTHER. EXTENSION OF THIS PERMIT SHALL BE FOR UP TO ONE MONTH AFTER ORIGINAL EXPIRATION DATE.		PERMIT NUMBER: _____	
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER FEDERAL, STATE OR LOCAL LAW REGULATING CONSTRUCTION OR PERFORMANCE OF CONSTRUCTION.		PERMIT FEE: _____	
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT _____ DATE _____		TOTAL AMOUNT DUE: _____	
PRINT NAME OF CONTRACTOR OR AUTHORIZED AGENT _____ DATE _____		APPLICATION ACCEPTED BY _____ DATE _____	
SIGNATURE OF OWNER OR AUTHORIZED AGENT _____ DATE _____		CITY AUTHORIZATION BY _____ DATE _____	
PRINT NAME OF OWNER OR AUTHORIZED AGENT _____ DATE _____			