



**Department of Building Safety**  
1625 13<sup>th</sup> Street, Suite 106  
Lubbock, Texas 79457  
(806) 775-2087  
(806) 775-2088  
<https://ci.lubbock.tx.us>

## **Commercial Building Permit Application**

*(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.*

***“Partnering to Build the Model Community”***

**Office Use Only:**

Plan Check Type and #: \_\_\_\_\_ Completeness Check By: \_\_\_\_\_

Received By: \_\_\_\_\_ Payment Method: \_\_\_\_\_

Review Deposit \$ \_\_\_\_\_

Date and Time Received

**Type of Construction:**

- New Construction  
 New Construction (Shell Only)  
 Addition to Existing Building  
 Remodel/Alteration  
 Tenant Finish-Out  
 White Box Finish-Out  
 Commercial Swimming Pool

- Demolition  
 Approach/Flatwork  
 Other \_\_\_\_\_  
 \* Facilities serving food or ice, breweries, commercial pools, smoking establishments, tattoo/piercing facilities are required to complete the Health Department. Supplement.

**Applicant: Please fill in all information. Place "N/A" in blanks that do not apply to your project.**

<b>Project Title:</b>						
<b>Project Address:</b>					<b>Suite #:</b>	
<b>Legal Description:</b>	<b>Subdivision:</b>		<b>Lot:</b>		<b>Block:</b>	
<b>LCAD Property ID No. (Available at www.lubbockcad.org):</b>			<b>R-</b>			

**Contact Information**

	<b>NAME</b>	<b>ADDRESS, CITY, ZIP</b>	<b>PHONE #</b>
<b>OWNER:</b>			
<b>CONTRACTOR:</b>			
<b>ENGINEER:</b>			
<b>ARCHITECT:</b>			
<b>PROJECT CONTACT:</b>			
<b>E-Mail Address:</b>	<b>Cell Phone #:</b>		

**Summary of scope of work:**

<b>Project Square Footage:</b>		_____ <b>Sq. Ft.</b>
<b>Project Valuation: (All Trades Inclusive)</b>		<b>\$</b> _____ <b>.00</b>

By my signature I certify that I am the legally authorized agent of the owner for the purposes of obtaining the permit requested and all subsequent communication and business related thereto. I further certify that all of the information included above and in accompanying documents is true and complete, and that I have read and understand the information therein, and I further understand that the application for a permit and payment of fees does not guarantee approval of a permit, and that if said permit is issued, it does not constitute permission to violate any provision of the technical codes governing the work, whether identified pursuant to plan review or not.

**Authorized Agent:****Signature:** \_\_\_\_\_**Printed Name:** \_\_\_\_\_**Date:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

<b>STATUTORY COMPLIANCE SECTION (This MUST be filled out by applicant)</b>	
<b>Texas Accessibility Standards (TAS):</b> The Texas Department of Licensing & Regulation registration and issuance of an TABS # for all projects valued at \$50,000 or greater.	
<input type="checkbox"/> <b>DOES NOT APPLY</b>	<input type="checkbox"/> <b>TDLR REGISTRATION FORM ATTACHED</b>
<b>Effective January 1, 2002- Renovations &amp; Demolitions to Commercial Buildings:</b>	
<input type="checkbox"/> <b>DOES NOT APPLY</b>	
<input type="checkbox"/> 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.	
Printed Name: _____	
Signature: _____ Date: _____	
<b>REQUIRED: Call the TEXAS ONE CALL SYSTEM at 1-800-344-8377, or 1-800-DIG-TESS, 2 days prior to any excavation.</b>	

<h2 style="margin: 0;">Environmental Health Department Supplement</h2> <p style="margin: 0; color: green;"><i>(Required for facilities that will serve food or ice, breweries, commercial swimming pools, smoking establishments and tattoo/body piercing facilities)</i></p>
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Project Name and Address: \_\_\_\_\_

Project Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone # \_\_\_\_\_

**Please answer the following questions for this project:**

<b>Will this facility serve food or ice?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Will smoking be allowed in facility?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Will this facility house a Tattoo or Body Piercing establishment?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Is this project a commercial pool, spa or recreational water facility?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

**If you answered “Yes” or “Unknown” to the above, please be advised of the following:**

1) An additional set of stamped plans (digital or paper copy), a plan review packet and fee must be submitted. This is in addition to any fees and plans submitted to the Building Safety Department for the basic plan review. Your building permit will not be approved without this information. Please contact Environmental Health for more information:  
806-775-2928  
[environmentalhealth@mylubbock.us](mailto:environmentalhealth@mylubbock.us)  
[www.mylubbock.us/eh](http://www.mylubbock.us/eh)

I hereby acknowledge my receipt and understanding of the information above:

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

# COMMERCIAL APPLICATION CHECKLIST & GUIDELINES

## MINIMUM INFORMATION FOR TYPICAL CONSTRUCTION PLANS AND SPECIFICATIONS

(Guideline for Typical New Commercial Building - Actual Requirements Will Vary with Scope of Work)

**REQUIRED CONSTRUCTION DOCUMENTS:** Two (2) full sets of blue-line or black-line construction drawings, fully-dimensioned and drawn to a 1/4" or 1/8" scale on media no smaller than 18" x 24". Provide all information necessary to describe the entire scope of work. The following information is typical for a new building, though not all-inclusive:

- **Cover Sheet with Code Study:** Indicating design criteria and code documents, specifically but not limited to building heights & areas (actual vs. allowed), construction type, occupancy classifications and square footage, occupant loads, fire-resistance of elements, structural design loads, provisions for automatic fire suppression and alarm systems, etc. *Aside from the structural design criteria, actual building areas and code documents used for design, the code study information is optional; however, its inclusion will vastly speed processing. Where a building of mixed occupancy classifications is proposed, it will be necessary to identify whether the designer intends to utilize the non-separated use provisions, the separated use provisions, or a combination of the two, as anticipated by Chapter 5 of the International Building Code.*
- **Site Plan:** Showing all property lines, easements, setbacks, existing and proposed building and appurtenance locations, utility lines, service lines, driveway entrances, sidewalks, parking spaces, etc. (See Separate Site Plan Checklist). Review of the site plan by the Site Plan Committee is required as a preliminary step to building permit application for new buildings and significant additions to existing buildings. See a Plan Examiner to be scheduled for the next weekly site plan meeting.
- **Foundation plans:** Dimensioned footing and foundation plans and details including soil bearing capacity information, dimensions, reinforcing information, typical elevations, lowest floor elevation relative to curb height and base flood elevation (where applicable), imbeds, concrete mix, etc.
- **Structural framing plans:** Floor and roof framing plans and structural sections/details necessary to properly inspect the installed work. Depending upon project scope, this might include shop drawings for structural steel, pre-engineered metal buildings, open-web truss layouts, etc.
- **Floor Plans:** Dimensioned, showing the full extent and size of all partitions, walls, doors, windows and other openings. Individual spaces must be identified as to proposed use. Show the location of all fixed equipment, permanent appliances, fixtures and appurtenances, as well as any fixed seating. Identify existing and proposed fire-resistance rated elements.
- **Building Elevations:** Show the extent and location of all windows, doors and other architectural features significant to exterior design. Building Height to be indicated as well as finished floor elevations.
- **Roof Plan:** Showing access and location of equipment and any smoke venting requirements as may be mandated for specific occupancies. Show roof covering classifications.
- **Details and Sections:** Provide as necessary to clearly indicate the scope of work and the sizing, spacing and grades of all structural elements. Provide window, door and hardware schedules. Provide U.L. classification numbers and details of all elements required to have a fire-resistance rating. Provide cross sections of all corridors, shaft enclosures, and exit enclosures.

□ **Electrical Plan:** Showing outlets, lighting fixtures, equipment and all devices. Identify home runs, wiring methods, classified (hazardous) locations, and locations of emergency lighting, exit signs, GFCI's, smoke and heat detectors. Indicate service entrance location and size in amps. Provide a load analysis, panel schedule, and an electrical service equipment riser diagram. Show or describe proposed protection methods for cable and conduit penetrations of fire-resistant assemblies.

□ **Plumbing Plans:** Schematic floor plans with DWV, water distribution and gas pipe sizes and routing clearly indicated. DWV riser, plumbing fixture schedules, and minimum facility requirements as per the plumbing code. Show or describe proposed protection methods for pipe penetrations of fire-resistant assemblies. Gas venting, combustion air, pressure regulators and shut-offs shall be indicated for gas-fired appliances.

□ **Mechanical Plans:** Indicate layout, sizing and classification of ductwork and location of make-up air. Provide mechanical equipment schedules showing all equipment ratings in CFM, BTUH, KW, SEER, etc. Indicate method of automatic fan shutdown, where required. Identify locations and types of dampers when required through fire or smoke rated assemblies.

□ **Landscaping Plan:** Scaled plan showing landscaped area and material meeting the requirements of the Zoning District, and listing the square foot area of all areas to be landscaped. For more information call Planning at (806) 775-2108.

□ **Environmental Health Supplement:** To be filled out if any of the following apply: Facilities that will serve food or ice, breweries, commercial swimming pool, smoking establishments and tattoo/body piercing. An additional set of stamped plans is required along with an environmental health plan review packet and additional fees. Contact Environmental Health at (806) 775-2928 for further information.

□ **Fire Protection System Plans:** Where applicable indicate the intent to provide a fire suppression and/or fire alarm system on the code study portion of the cover sheet, and indicate the design document (NFPA 13, NFPA 13R, NFPA 72, etc.). *It is also important to the review process that you indicate your intent with regard to the fire suppression system. In other words, is it solely to gain additional height and/or area or egress travel distance, is it an occupancy requirement, is it being used for a structural fire resistance reduction, etc.* This will greatly speed the plan review process. Actual system shop drawings will be reviewed by the Fire Marshal's office once developed. These must be submitted to the FMO at the time of building permit application or as soon as possible thereafter to avoid potential project scheduling issues. There is currently no permit requirement for these systems through the Building Safety office. Contact the FMO for details at (806) 775-2646.

**ENGINEERING AND ARCHITECT'S SEALS AND STAMPS:** Where the plans are required by State law to be prepared by a licensed engineer and/or architect (see a Plan Examiner for this determination). All documents must be appropriately sealed. The seal must be signed and dated by the design professional. All plan sets must bear an original seal.

Requirements By Project Category: (See description at right for corresponding letter type)					Documentation Required as Part of a Complete Commercial Permit Submittal Package															
A, B	C	D	G	H, E, F																
<ul style="list-style-type: none"> <li>● Always Required</li> <li>○ Conditional- See text</li> </ul>					<p style="text-align: center;"><b>Project Category:</b></p> <p>(A) New Construction                      (E) Tenant Finish-Out            (B) New Construction (Shell Only)    (F) White Box Finish-Out            (C) Addition to Existing Building      (G) Demolition            (D) Remodel/Alteration                  (H) Other</p>															
●	●	●	●	●	<b>Commercial Building Permit Application Form and Deposit</b>															
	●	●	●		<b>Asbestos Survey Certification:</b> <i>Required where existing construction materials are to be disturbed through remodeling or demolition activities.</i> 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 <a href="http://www.dshs.state.tx.us/asbestos/">http://www.dshs.state.tx.us/asbestos/</a>															
●	●	●	●	●	<b>Construction Documents:</b> Two (2) complete sets of construction documents (plans and specs) sufficient to clearly and completely demonstrate the scope of work. See the “ <b>Minimum Information for Typical Construction Plans and Specifications</b> ” for guidance as to the type of information that should be included. Also check engineering and architectural requirements.															
●	●				<b>Survey &amp; Flood Certificate:</b> A certificate from a licensed professional land surveyor or registered professional engineer that the property has been surveyed and monuments set. The certificate must also identify whether the property is located within any special flood hazard area as determined by FEMA Flood Insurance Rate Maps.															
○	○	○	○	○	<b>TCEQ Construction General Permit:</b> Required for any ground disturbance including, equipment storage, material storage, demolition and stock pile of soil that in combination is greater than one acre or part of a larger common plan totaling one acre or more. Fill out the separate application for TPDES permit, where required.															
○	○	○		○	<b>TABS Registration Form:</b> <i>Required if your project valuation is \$50,000 or more.</i> 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 TABS 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, <i>though compliance with applicable accessibility laws is still required.</i> See Texas Accessibility Standards at the following website for more information. <a href="https://www.tdlr.texas.gov/ab/abforms.htm">https://www.tdlr.texas.gov/ab/abforms.htm</a>															
○	○				<b>FEMA Form #81-31 (Elevation Certificate):</b> <i>Required where the survey certificate has identified the property in a special flood hazard area,</i> 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.															
○	○	○		○	<p><b>Energy Code Compliance Report (ComCheck):</b> <i>Required unless exempt as indicated.</i></p> <p><input type="checkbox"/> N/A- Historical Building (Provide letter)    <input type="checkbox"/> N/A- Hospital or Medical Research Facility</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Type of Report</th> <th style="width: 40%;">New Const/Additions</th> <th style="width: 40%;">Other</th> </tr> </thead> <tbody> <tr> <td>Envelope:</td> <td><input type="checkbox"/> N/A- Unconditioned space</td> <td><input type="checkbox"/> N/A- No alteration, no change in use</td> </tr> <tr> <td>Mechanical:</td> <td colspan="2"><input type="checkbox"/> N/A- No HVAC or service water heating system existing or proposed</td> </tr> <tr> <td></td> <td colspan="2"><input type="checkbox"/> N/A- No HVAC or service water heating system changes proposed</td> </tr> <tr> <td>Lighting:</td> <td>Required (No exemptions)</td> <td><input type="checkbox"/> N/A- No lighting system changes</td> </tr> </tbody> </table>	Type of Report	New Const/Additions	Other	Envelope:	<input type="checkbox"/> N/A- Unconditioned space	<input type="checkbox"/> N/A- No alteration, no change in use	Mechanical:	<input type="checkbox"/> N/A- No HVAC or service water heating system existing or proposed			<input type="checkbox"/> N/A- No HVAC or service water heating system changes proposed		Lighting:	Required (No exemptions)	<input type="checkbox"/> N/A- No lighting system changes
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