

**TOWN OF CROSSROADS**  
**1401 FM 424      CROSS ROADS, TX 76227**  
**Tel: (940) 365-9693 Fax (940) 665-6898**

**Temporary Construction/Sales Trailer Permit Application**  
**One application per trailer is required**

Date of Application: \_\_\_\_\_ Original Application good for six (6) months with one renewal allowed without additional charge. If Trailer is moved, full fee will be charged for new location.

Address and/or Location of Request \_\_\_\_\_

Legal

Description \_\_\_\_\_

\_\_\_\_\_

Existing

Zoning \_\_\_\_\_

Applicant/s Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Applicant/s Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Property Owner's

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

Owner/s

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

I certify that I am the owner of the property described in this petition and \_\_\_\_\_ is authorized to file this application on my behalf.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

The following must be submitted along with the completed petition before processing and issuing permit:

- 1) **Site Plan** Drawn to acceptable scale showing existing and temporary utilities, parking and refuse deposit.
- 2) **Location Map** Showing the site in relation to adjacent streets and distance to nearest thoroughfare and construction traffic access.
- 3) **Application and Inspection Fee of \$120.00** This amount includes application fee and one inspection. Additional needed inspections will be charged at \$70 each. Re-inspections will be charged at \$35 each. Needed inspections must be requested within two (2) weeks of the date trailer is placed on site. Trailer may not be occupied until all inspections are requested and passed. Needed inspections may include: tie-down \_\_\_\_\_; electrical \_\_\_\_\_; water \_\_\_\_\_; sewer/septic hook up \_\_\_\_\_. Requests

inspections are to be called in to Town Hall at 940-365-9693.

**Office Use**

**Application**

**Approval**

**Date**                      **Check #**                      **Amt.\$**                      **Rect.#**                      **Date**

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**Town Secretary's Signature (Katherine Ritchie)**\_\_\_\_\_