



Business License Application

09/2017

Building Department
400 S. Ohio Ave, Mercedes, TX 78570

Tel. (956) 565-3114 ext. 128
Fax (956) 565-5184

Property Information (PLEASE PRINT CLEARLY):

Applicant: \_\_\_\_\_ DL#: \_\_\_\_\_ Phone #: \_\_\_\_\_
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_
Email Address: \_\_\_\_\_
Name of Proposed Business: \_\_\_\_\_
Proposed Business Address: \_\_\_\_\_
Proposed Use of Property: \_\_\_\_\_
Former Use of Property (Please be specific): \_\_\_\_\_
Will an advertising sign be installed? [ ] Yes [ ] No Sign Size: \_\_\_\_\_ Is the property vacant? [ ] YES [ ] NO
If so how long has property been vacant? \_\_\_\_\_ YRS \_\_\_\_\_ MTHS Does the Building have power? [ ] YES [ ] NO
ESID# 100327894 \_\_\_\_\_ Total Sq. Ft. of Building: \_\_\_\_\_ Area of space to be occupied \_\_\_\_\_ Sq. Ft.

Property Owner Information (PLEASE PRINT CLEARLY):

Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_
Email Address: \_\_\_\_\_ Property Owner Signature: \_\_\_\_\_

THE FOLLOWING FEES ARE REQUIRED:

- [ ] APPLICATION FEE \$25.00
[ ] HEALTH INSPECTION FEE \$50.00 (IF APPLICABLE)
ALL FEES ARE NON-REFUNDABLE
A RE-INSPECTION FEE OF \$35.00 WILL APPLY IF INSPECTION IS DENIED

Required information:

- Any remodeling may require a building permit
Water Service must be connected prior to Building Dept. conducting an inspection

I understand that a certificate of occupancy (CO) from the City is required prior to the commencement of operation of the proposed business/service and that electric power may be disconnected if such business operation occurs without "CO". A "CO" will not be issued until all requirements have been completed and approved by the City.

I understand that I am requesting a re-occupancy for an existing structure within the city limits of Mercedes and that compliance with various City, State and Federal laws may be required.

I understand that the proposed use or proposed change in use(i.e. proposed use is different from the previous use) may require compliance, I may be required to retain the service of one or more licensed contractors to upgrade and /or install the applicable items. The appropriate permits from the City are required prior to the commencement of any such upgrades and /or installations.

I understand that the City will review my submittal and schedule in inspection within 48 hours; however, I may be asked to submit additional information

I hereby certify that I am the owner and /or duly authorized agent of the owner for the purposes of the application. I further certify that I have read and know the same to be true and correct. If any of the information provided on this application or the submittal checklist is incorrect, the permit or approval may be revoked. I also understand that the submittal of and payment for this application to the City does not guarantee the reconnection of electricity or a certificate of occupancy.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY:

[ ] APPROVED [ ] DENIED

Eddie Olvera, Building Official

Rolando Maldonado, Fire Marshal

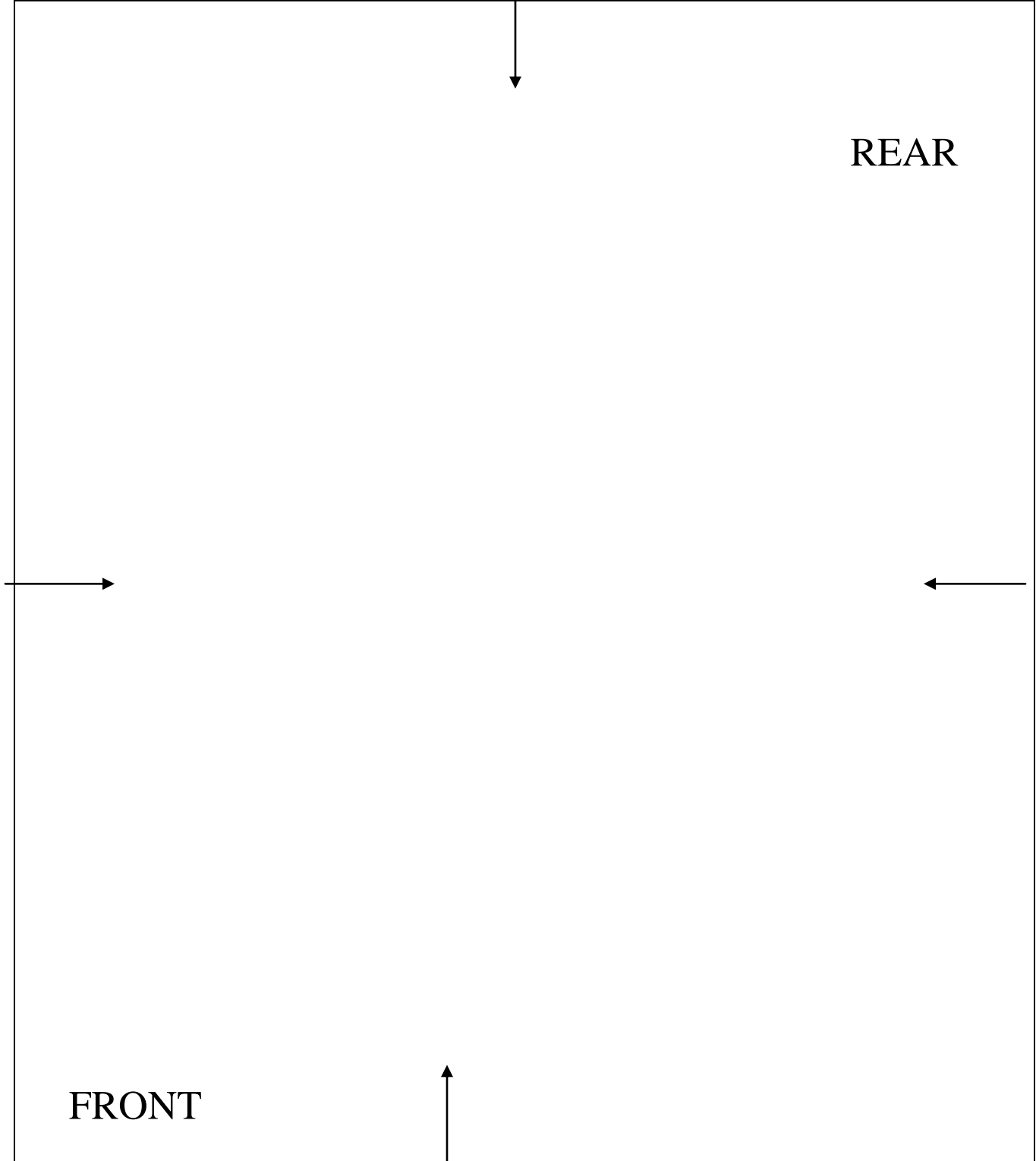
Sergio Zavala, City Manager

## **BUILDING LAY-OUT**

**NOTE:** This square indicates your property lines

**A lay out plan detailing the inside of Building with Dimensions of rooms;  
parking spaces & cross streets MUST BE drawn in the box**

**PROPERTY OWNER IS RESPONSIBLE FOR LOCATION OF ALLEYS AND EASEMENTS ON SITE PLAN**



**EXAMPLE OF BUILDING LAY-OUT**

