

BASTROP COUNTY DEVELOPMENT SERVICES APPLICATION SUPPLEMENTAL INFORMATION

OFFICIAL USE ONLY
File #: _____
Rec'd: _____

EXISTING BUILDING(S) –Provide the following information for each existing structure. Use additional sheets if necessary.

Description: _____	To be demolished/removed?	No	Yes	Date: _____
Description: _____	To be demolished/removed?	No	Yes	Date: _____
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Description: _____	To be demolished/removed?	No	Yes	Date: _____
Description: _____	To be demolished/removed?	No	Yes	Date: _____
Description: _____	To be demolished/removed?	No	Yes	Date: _____

NEW DEVELOPMENT INFORMATION –Provide the following information for each proposed structure. Use additional sheets if necessary.

Classification:	Single Family Residential <input type="checkbox"/> <small>select one</small> →	Main	Guest/Secondary	Duplex	Accessory Building
	Non Single-Family Residential <input type="checkbox"/> <small>select one</small> →	Multi-Family	Single-Unit Commercial	Multi-Unit Commercial	
Construction:	Site-Built	Mobile/Pre-manufactured	RV/Travel Trailer	Other: _____	
Foundation:	Slab	Pier and Beam	Basement	Other: _____	
Dimensions:	Total Square Footage: _____		Occupied Square Footage (heat/cool): _____		
	Number of:	Floors/Subfloors:	Apts/Stes:	Bedrooms:	Bathrooms: Kitchens:
Contractor:	_____				
	Daytime Phone #: _____		Email: _____		

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