

Building Permit Application Ph.: 205-248-5110

Project Name	Required for Multi-Family Buildings
Project Name:Or	# of Units # of Bedrooms
Subdivision: Lot #	Total Finished: Sq. Ft. (Heated) Floor Area
Site Address:	Total Unfinished: Sq. Ft.
City: State: Zip:	(Unheated) Floor Area Sprinkled Building: □ Yes □ No
Property District: □ City □PJ # Bldgs	Full Estimated Value of work: (Material and Labor)
Owner Information:	\$
Name:	Foundation: □ Crawl □ Slab □ Basement □ Footing □ Pier □ Other □ N/A
Address:	Sewer Service Required: ☐ City Sewer ☐ Septic Tank
City: State: Zip:	□ N/A Other:
PH:	If Gas required, type:LPNGN/A
Contractor Information:	ENERGY COMPLIANCE METHOD - SELECT ONE:
Name:	☐ Prescriptive ☐ Alternative ☐ Performance ☐ N/A
Address:	Has any construction work been performed before
City: State: Zip:	permitting? (Excluding site work). YES NO
PH:	
License Information: City: #	Applicant's Name:
GC: #HB: #	Signature: Date: Phone:
E-Mail:	Do Not Write Below, To Be Filled Out By Staff
Will you be purchasing any Water Meters for this project? Y N	Occupancy Classification:
If so, what size? 3/4" 1" 1 1/2" 2" # of Meters: Contact Name	Construction Type:
PH.	Inspection District:
Type of Permit Requesting: Please Mark One	In a Flood Zone: Yes None
☐ Commercial ☐ Residential ☐ Mobile Home ☐ Gas	Parent's Classes
☐ Electrical ☐ Plumbing ☐ Government ☐ Mechanical	Permit Class: Residential □ Commercial Industrial Hazardous
☐ Job Trailer ☐ Demo ☐ Move	Approvals Needed: Fire Dept. TDOT
Other:	☐ Grease Trap ☐ Health Dept. ☐ Planning ☐ OCE
Work Class: ☐ New Construction ☐ Addition ☐ Alterations	☐ Plan Review ☐ Historic (HPC) ☐ Revenue
\square Mobile Home \square Repairs \square Move \square Move Setup	☐ Flood & Elevation Certificate
\square Elec-Upgrade \square Gas Upgrade \square Remodel \square Demo	Fees to be Collected:
Purpose/Use of Building Structure:	☐ Permit ☐ Penalty ☐ Sewer Tapping ☐ Temp Power ☐ Temp Gas ☐ Water Meter Service Fees ☐ Other: