



# BUILDING PERMIT APPLICATION

## Town of Cedar Bluff, Alabama

Phone (256) 779-6121 Fax (256) 779-6148

Received by \_\_\_\_\_

Date \_\_\_\_\_

Owners name \_\_\_\_\_ Phone \_\_\_\_\_  
 Contractors name \_\_\_\_\_ Phone \_\_\_\_\_  
 Job Address \_\_\_\_\_

Permit # \_\_\_\_\_  
 Zone \_\_\_\_\_

### Residential

- Single family detached
- Townhouse
- Duplex
- 3+ family dwelling (# of units \_\_\_\_\_)
- Other \_\_\_\_\_
- New dwelling
- Addition
- Alteration
- Repair/replacement
- Renovation (no structural changes)
- Conversion of +/- dwelling units (# of units \_\_\_\_\_)
- Other \_\_\_\_\_
- Condo
- Modular home
- Manufactured / Mobile home
- Deck
- Shed
- Swim pool
- Garage
- Carport

### Commercial

- Office/bank/professional
- Hospital/medical
- Industrial/warehouse
- Restaurant
- Other \_\_\_\_\_
- New building
- Addition
- Alteration
- Repair/replacement
- Renovation (no structural changes)
- Conversion from residential to commercial space
- Other \_\_\_\_\_
- Garage
- School
- Store
- Utility
- Deck
- Shed
- Swim pool
- Interior demo

### Total Cost of Project

Include plumbing, electrical, mechanical, fire suppression, elevator, etc.

\$ \_\_\_\_\_

Electrical Service Amps: \_\_\_\_\_ Electrical Contractor: \_\_\_\_\_  
 Number of Baths: \_\_\_\_\_ Plumbing Contractor: \_\_\_\_\_  
 Number of Heating Units: \_\_\_\_\_ HVAC Contractor: \_\_\_\_\_  
 Type of Heating Fuel:  Electric  Natural Gas  Propane  Diesel Fuel  
 Gas Fitter: \_\_\_\_\_

Does this request entail The establishment of additional dwelling units?  Expansion of use?   
 Change of use?  If yes, indicate past use \_\_\_\_\_

**Square Footage** Footprint \_\_\_\_\_ Renovated / added \_\_\_\_\_ Number of stories \_\_\_\_\_  
 Living area of new home (exclude unfinished areas and garage) \_\_\_\_\_ Total area of building \_\_\_\_\_

**Fire Suppression** Does this building have:  sprinkler system  fire alarm  other suppression \_\_\_\_\_

	Owner	Lessee	Contractor	Architect	Engineer
Name	_____	_____	_____	_____	_____
Address	_____	_____	_____	_____	_____
City/St/Zip	_____	_____	_____	_____	_____
Phone	_____	_____	_____	_____	_____
Email	_____	_____	_____	_____	_____

I hereby certify the owner of record authorizes the proposed work and / have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of the Town of Cedar Bluff. / hereby attest all statements made on this application are true to the best of my knowledge.  
 Applicants are advised that the making of a false statement on this form is a criminal offense.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_

