



CIVIL CONSTRUCTION PERMIT APPLICATION

Renovation: Yes No

Project Name: _____

Address / Location: _____ Lot # _____

Proposed Use: _____

Contracting Company: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: (____) _____ Email: _____

State General Contractors License # _____ CONTRACT JOB COST: _____

Property Owner: _____ Phone: (____) _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Description of Job: _____

Signature

By signing this application, I hereby certify that all information herein is true and correct and I agree to be personally responsible to the City of Alabaster for any and all code violations and code enforcement actions associated with this building application and the construction contemplated herein, whether such actions or inactions were performed by me, my company, employees, contractors or sub-contractors.

Name (print): _____ Signature: _____ Date: _____

Is this property in the 100-year flood plain? Yes	No	Plan Review Fee \$ _____
		Flood Plain Review Fee \$ _____
		Permit Cost \$ _____
		Issuance Fee \$ 50.00
		CICT Fee \$ _____

Permit # _____ Report code **220** Total Permit Cost \$ _____

*** A list of all sub-contractors for this job must be provided within 15 days of this permit being issued. ***