## APPLICATION FOR RESIDENTIAL BUILDING PERMIT **JEFFERSON COUNTY INSPECTION SERVICES**

Application is hereby made for a building permit

	PERMIT NUMBER
DO NOT WRITE IN THIS SPACE	CENSUS TRACT
	ZONING APPROVAL
	OCCUPANCY GROUP
	SEWER
N F	PARCEL I.D.
_	UTILITIES P E G N

to accomplish the work as herein described in  B-200 COURTHOUSE accordance with duplicate plans and/or  BIRMINGHAM, ALABAMA 35203 specifications submitted herewith.  TELEPHONE 325-5321  to accomplish the work as herein described in  accordance with duplicate plans and/or  specifications submitted herewith.  APPROVED											
					ADDR	ESS					
	NAME										
PERSON, FIRM OR CORP. MAKING APPLICATION	ADDRESS			Z	LEGAL						
M OR				LOCATION	DESCRIPTION LOTBLOCK						
N, FIR	CITY STATE ZIP IS APPLICANT YES NO				SURVEY						
ERSO	LICENSED CONTRACTOR     PHONE					-					
•	IF YES, PROVIDE LICENSE NUMBERS-										
	JEFFERSON COUNTY ALA										
	WORK CLASSIFIED SIZE, ETC.				T\	TYPE CONSTRUCTION				OCCUPANCY	
	☐ NEW CONSTRUCTION	NUMBER OF STORIES	MAX LENGTH	1		1	(A)	(B)		☐ SINGLE FAMILY	
	☐ ADDITION	MAX WIDTH	MAX HEIGHT		- II (A) (B)					DWELLING  TOWNHOUSE	
	☐ ALTERATIONS	AREA PER FLOOR	LIVE LOAD	CAP.		Ш	(A)	(B)		☐ DUPLEX	
	STRUCTURAL REPAIR	BASEMENT				IV				DWELLING  MULTIPLE	Units
	☐ RELOCATE	1ST FLOOR				٧	(A)	(B)		DWELLING	Sleeping
	☐ OTHER (SPECIFY)	2ND FLOOR								HOTEL	rooms
DESCRIPTION OF WORK		3RD FLOOR					<del> </del>			☐ DORMITORY ☐ LODGING HOUSE	
		4TH FLOOR			l					CONVENT	u
		5TH FLOOR PENTHOUSE						<del></del> .		CONDOMINIUM	u
	· · · · · · · · · · · · · · · · · · ·	TOTAL								OTHER (SPECIFY)	. u
		ALL FLOORS						_			
		Provide same information for each side of form or attached sheet and include		everse							
	TYPE HEAT								P	LOT INFORMATION	
	TO BE PROVIDED: GAS   ELECTRIC  OTHER				PLOT AREA (IN SQUARE FEET)						
	WILL BUILDING OR PREMISES INCLUDE: INCLUDED IN GENERAL CONTRACT YES NO YES					PLOT WIDTH - FRONT REAR					
	AUTOMATIC FIRE SPRINKLER SYSTEM				•					2. RKING SPACES PROVIDED	
	AIR CONDITIONING	IF YES GIVE								ADING SPACES PROVIDED	
	ELEVATORS				1					MAXIMUM WORKING SHIF	
	OTHER				ARE A	NY ST	ruc	TURES	PRESI	ENTLY LOCATED ON PLOT	? YES 🗆 NO 🗆
	ACCESSORY STRUCTURES	SPECIFY	U		IF YE	S, EXP	LAIN				
	NAME										
OWNER	ADDRESS										
ð	CITY		-								
	PHONE			_							
	☐ ARCHITECT ☐	EGINEER DESIG	NER		IS AR	CHITE	CTUF	RAL OR	ENGIN	IEERING YES NO	
1 BY	NAME				1			ICLUDE			
PLANS DRAWN BY	ADDRESS					S, BT '				EGINEER -	
	STATE OF ALABAMA PHONEREGISTRATION NUMBER				STATE OF ALABAMA REGISTRATION NUMBER PHONE						
ADDITIONAL DATA	ADDITIONAL INFORMATION _										
DAT/											
AC	DA .										
		CERTIFY: THAT I HAVE READ THIS									
TION	I AM THE OWNER O	COMPLY WITH ALL COUNTY OR AUTHORIZED TO ACT AS I									
CERTIFICATION	CONTRACT OR VALUATION IS PRINT NAME										
CERI	AMOUNT										
	DATE FEE \$ SIGNATUREBY OWNER OR AUTHORIZED AGENT										