

CITY OF CENTRE, ALABAMA
401 EAST MAIN STREET
CENTRE, ALABAMA 35960-PHONE 927-5222
BUILDING PERMIT APPLICATION

PERMIT NO. _____

IMPORTANT - Complete ALL items applicable to the proposed construction

I. LOCATION OF BUILDING	Number and Street _____	Subdivision or Survey _____	Lot _____	Block _____
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II. TYPE AND COST OF BUILDING - All applicants complete Parts A-D

<p>A. TYPE OF IMPROVEMENT</p> <input type="checkbox"/> New building <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D) <input type="checkbox"/> Alteration (See 2 above) <input type="checkbox"/> Wrecking (If multifamily residential, enter number of units in building in Part D) <input type="checkbox"/> Moving (relocation) <input type="checkbox"/> Foundation only	<p>B. PROPOSED USE - For "Wrecking" most recent use</p> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p>Residential</p> <input type="checkbox"/> One family <input type="checkbox"/> Two or more families - Enter number of units . . . _____ <input type="checkbox"/> Transient hotel, motel, or dormitory - Enter number of units . . . _____ <input type="checkbox"/> Garage <input type="checkbox"/> Carport <input type="checkbox"/> Other-Specify _____ </td> <td style="width:50%; vertical-align: top;"> <p>Nonresidential</p> <input type="checkbox"/> Amusement, recreational <input type="checkbox"/> Church, other religion <input type="checkbox"/> Parking garage <input type="checkbox"/> Service station, repair garage <input type="checkbox"/> Hospital, institutional <input type="checkbox"/> Office, bank, professional <input type="checkbox"/> Public utility <input type="checkbox"/> School, library, other educational <input type="checkbox"/> Stores, mercantile <input type="checkbox"/> Other - _____ </td> </tr> </table>	<p>Residential</p> <input type="checkbox"/> One family <input type="checkbox"/> Two or more families - Enter number of units . . . _____ <input type="checkbox"/> Transient hotel, motel, or dormitory - Enter number of units . . . _____ <input type="checkbox"/> Garage <input type="checkbox"/> Carport <input type="checkbox"/> Other-Specify _____	<p>Nonresidential</p> <input type="checkbox"/> Amusement, recreational <input type="checkbox"/> Church, other religion <input type="checkbox"/> Parking garage <input type="checkbox"/> Service station, repair garage <input type="checkbox"/> Hospital, institutional <input type="checkbox"/> Office, bank, professional <input type="checkbox"/> Public utility <input type="checkbox"/> School, library, other educational <input type="checkbox"/> Stores, mercantile <input type="checkbox"/> Other - _____
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<p>C. COST</p> <p>Cost of improvement \$ _____</p> <p>To be installed but not included in the above cost</p> <p>a. Electrical _____</p> <p>b. Plumbing _____</p> <p>c. Heating, air conditioning _____</p> <p>d. Other (elevator, etc.) _____</p> <p>TOTAL COST OF IMPROVEMENT \$ _____</p>	<p>D. SUB-CONTRACTORS -- Please give names of following:</p> <p>Electrician _____</p> <p>Plumbing _____</p> <p>Heating _____</p> <p>Air Conditioning _____</p> <p>Painter _____</p> <p>Roofer _____</p> <p>Flooring _____</p> <p>Other _____</p>		

III. SELECTED CHARACTERISTICS OF BUILDING - For new building and additions, complete Parts F-L.

<p>E. PRINCIPAL TYPE OF FRAME</p> <input type="checkbox"/> Masonry (wall bearing) <input type="checkbox"/> Wood frame <input type="checkbox"/> Structural steel <input type="checkbox"/> Reinforced concrete <input type="checkbox"/> Other --Specify _____	<p>G. TYPE OF SEWAGE DISPOSAL</p> <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Septic Tank	<p>I. DIMENSIONS</p> <p>Number of stories _____</p> <p>Total square feet of living area _____</p> <p>Square feet non-living area _____</p> <p>Total land area, sq. ft. _____</p>	
<p>F. PRINCIPAL TYPE OF HEATING FUEL</p> <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electricity <input type="checkbox"/> Coal <input type="checkbox"/> Other-Specify _____	<p>H. TYPE OF MECHANICAL</p> <p>Will there be central air conditioning?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>2. NUMBER OF OFF-STREET PARKING SPACES</p> <p>Enclosed _____</p> <p>Outdoors _____</p>	<p>K. RESIDENTIAL BUILDING ONLY</p> <p>Number of bedrooms _____</p> <p>Number of bathrooms _____</p> <p>Total number of rooms _____</p>

IV. IDENTIFICATION -- To be completed by all applicants

	Name	Mailing address - Number, street, city, and State	ZIP Code	Tel. No.
1. Owner	_____	_____	_____	_____
2. Contractor	_____	_____	_____	_____
3. Architect	_____	_____	_____	_____

<p>L. OWNERSHIP</p> <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.) <input type="checkbox"/> Public (Federal, state, or local government)	<p>Permit Fee \$ _____</p> <p>Total Fee \$ _____</p>
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I HEREBY CERTIFY: THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT; THAT I AGREE TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION; THAT I AM THE OWNER OR AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK; AND, THAT THE TOTAL CONTRACT OR VALUATION IS

\$ _____ NAME OF COMPANY _____

DATE _____ SIGNATURE _____

Roof:
 Pitch - _____
 Shingles - _____
 Felt - _____
 Ice Barrier - _____
 Roof Sheathing - _____
 Truss - Yes No

If No Answer The Following

Rafter Size - _____
 Rafter Spacing - _____
 Rafter Clear Span - _____
 Rafter Species - _____
 Ridge - _____
 Ceiling Joist Size - _____
 Ceiling Joist Spacing - _____
 Ceiling Joist Species - _____
 Insulation - _____
 Roof Ventilation - _____

Walls:

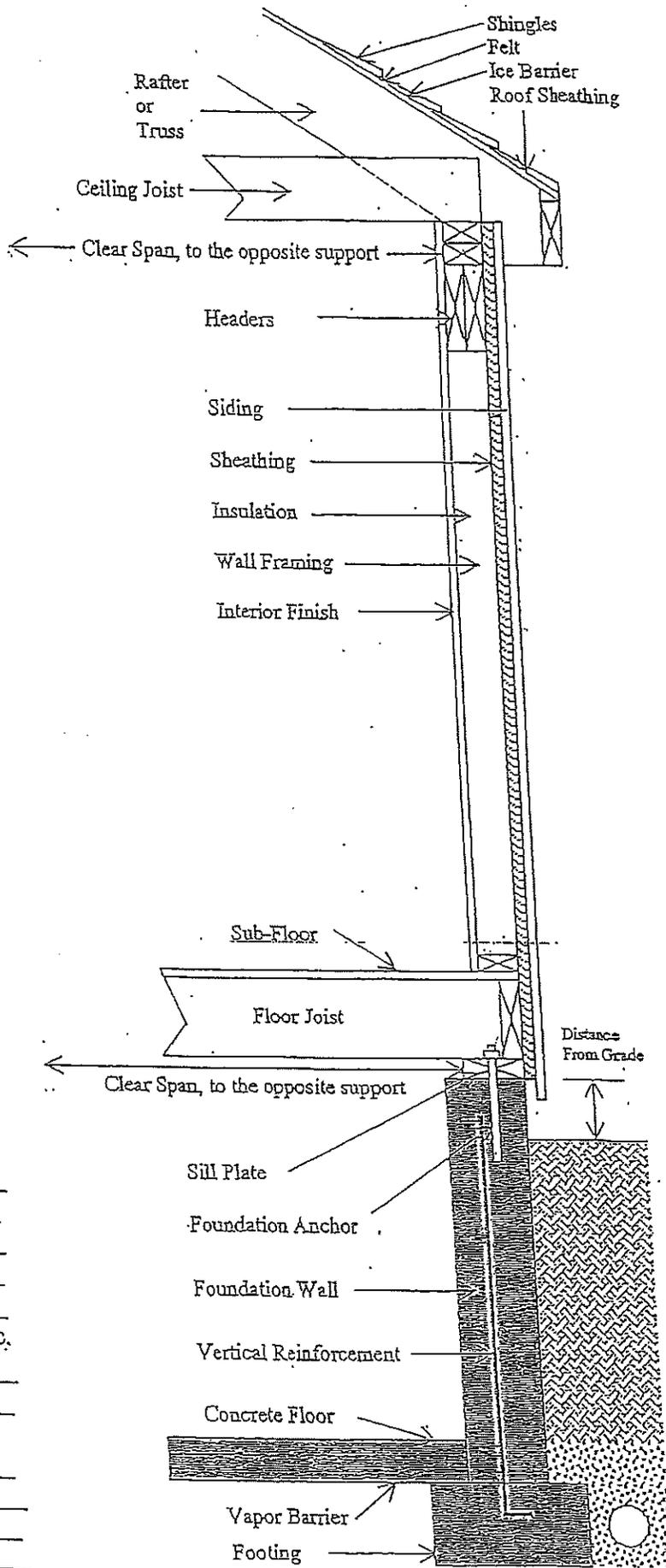
Siding - _____
 Sheathing - _____
 Insulation - _____
 Walls Framing - _____
 Headers - _____
 Interior Finish - _____
 Ceiling Height - _____

Floor:

Sub-Floor - _____
 Floor Joist Size - _____
 Floor Joist Spacing - _____
 Floor Joist Clear Span - _____
 Floor Joist Species - _____
 Beam Type & Size - _____
 Distance From Grade - _____

Foundation:

Anchor Type - _____
 Anchor Spacing - _____
 Sill Plate - _____
 Poured Wall Size - _____
 Block Wall Size - _____
 Vertical Reinforcement - # _____ - _____ o.c.
 Concrete Floor Thickness - _____
 Vapor Barrier - _____
 Column Pad Size - _____ x _____
 Column Spacing - _____
 Footing Width - _____
 Footing Height - _____
 Footing Depth Below Grade - _____



Administrative Requirements of Contractor/Owner

The following inspections are required to complete the building project.

- _____ 1. Foundation Inspection
Footers are to be placed as per the foundations drawings. Footers are to be clean and straight with the rebar tied and in place. Footers are to be placed on undisturbed or compacted soil reaching a compaction of 98% Standard Proctor. Compliance to the compaction requirements is the responsibility of the contractor/owner. Inspection is to take place before concrete is placed.

- _____ 2. Slab Inspection
Gravel fill and vapor barrier are to be in place. Plumbing under the slab is to be pressure tested and inspected before pipes are covered.

- _____ 3. Mechanical, Electrical, and Plumbing Rough-in Inspection
All plumbing, mechanical and electrical components are to be in place and inspected prior to wall insulation installation. Framing inspection will take place at the MEP rough-in inspection.

- _____ 4. Final Inspection

* 24-hour notice is required for all inspections.*

If any contractor/owner (including subcontractors) fails to secure required inspections on three or more occasions in any given 12-month period, contractor/owner will face fines and/or probation period after a hearing with the Centre City Council.

If any building is occupied before the final inspection is made, occupants of building will be ejected and utilities will be disconnected.

Contractor/Owner _____

Signature _____

Date _____

Building Permit Application Checklist

Job Address: _____

Contractor/Owner: _____

The following documentation must be submitted for approval before a building permit will be issued:

- _____ 1. PLOT/SITE PLAN
Plan shall include clearly marked and identified property lines, locations of existing and/or new buildings with required setbacks and right-of-ways, and planned erosion control measures to prevent sediment run-off.

- _____ 2. ZONING REVIEW
When applicable, Zoning Board approval is required prior to issuance of all building permits.

- _____ 3. HEALTH DEPARTMENT PERMIT
A septic tank permit copy must be provided when not connecting to city sanitary sewer.

- _____ 4. LICENSE
Contractors performing residential construction work over \$10,000.00 are required by the State of Alabama to obtain a Home Builders License. Contractors performing commercial construction work over \$50,000.00 are required by the State of Alabama to obtain a General Contractors License. A copy of the appropriate license must be provided with application.

- _____ 5. BLUE PRINTS AND/OR DRAWINGS
Two (2) sets of plans are required to be submitted with each application. Drawings must include a floor plan, a typical wall section, and a typical framing drawing as a minimum. All drawings that are for assembly, education, or over 5,000 square feet must be sealed by an Alabama licensed architect or engineer.

Building permit applications must be submitted and approved prior to building commencement. Applications will be reviewed within forty-eight (48) hours of submittal.

Work started prior to approval will result in a penalty equal to the permit fee.