

THE TOWN OF SUMMERDALE

SUMMERDALE POLICE JURISDICTION

APPLICATION FOR BUILDING PERMIT / CHANGE OF USE

Application is hereby made for a permit to erect/alter a structure as described herein or shown in accompanying construction documents, plans and specifications, how the structures are to be built and located on the accompanying plot plan. The information which follows and the accompanying plans and documents with the representations therein contained are made a part of this application, in reliance upon which the Building Inspector is requested to issue a building permit.

It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact or expression of material fact, either with or without intention on the part of this applicant, such as might, or would, operate to cause a refusal of this application, or any material alteration or change in the accompanying plans, specifications or structure made subsequent to the issuance of a permit in accordance with this application, without the approval of the Building Inspector, shall constitute sufficient grounds for the revocation of such permit.

I further certify: (COMMERCIAL RESIDENTIAL NEW ADDITION REMODEL)

JOB LOCATION: _____

SUBDIVISION: _____ LOT # _____

TAX, MAP & PARCEL # _____

(A COPY OF VALID ID MAY BE REQUIRED)

PROPERTY OWNER: _____ PHONE: _____
ADDRESS: _____ DL# _____

(A COPY OF VALID ID MAY BE REQUIRED)

CONTRACTOR: _____ PHONE: _____
ADDRESS: _____ DL# _____

SUMMERDALE CONTRACTORS LICENSE # _____ STATE HOMEBUILDERS LICENSE # _____

STATE GENERAL (COMMERCIAL) CONTRACTORS LICENSE # _____

BALDWIN COUNTY BUSINESS LICENSE # _____

PROOF OF CURRENT GENERAL CONTRACTORS LICENSE WILL BE VERIFIED: PROVIDE COPY Y/N

(COMMERCIAL) NPDES PERMIT FROM ADEM IS REQUIRED IF LAND AREA BEING DEVELOPED IS MORE THEN ONE ACRE. # _____

PROPERTY OWNER AUTHORIZATION FORM PROVIDED? Y/N (Value is the complete cost of all work – labor and material.)

EXISTING USE: _____ ZONE: _____ VALUE: \$ _____
(Verification can be asked for.)

TYPE OF CONSTRUCTION: (Residential) _____
(Commercial) I, II, III, IV, V, VI, VII

TYPE OF UTILITIES: Public Sewer Well Water Public Water Septic Tank Gas

APPLICANTS SIGNATURE: _____ DATE: _____

CONTRACTOR / SUBCONTRACTOR LIST

NOTICE TO PERMIT APPLICANT: Please list the **name, address, and telephone number** of all Sub-contractors and suppliers that deliver materials to job site. **This is required before a permit can be issued.**

<i>TYPE OF WORK</i>	<i>FIRM OR INDIVIDUAL <u>NAME</u> / <u>ADDRESS</u> / <u>PHONE</u></i>	<i>VALUE OF JOB</i>
AC/Heating Contractor	_____	_____
Alarm System Contractor	_____	_____
Awnings/Blinds Contractor	_____	_____
Supplier	_____	_____
Building Materials Supplier (Framing, Door, Trim, Windows, etc...)	_____	_____
Supplier	_____	_____
Cabinet Contractor	_____	_____
Supplier	_____	_____
Carpenter/Framing Contractor	_____	_____
Supplier	_____	_____
Carpenter/Trim Contractor	_____	_____
Supplier	_____	_____
Ceiling/Acoustical Contractor	_____	_____
Supplier	_____	_____
Clean-up Contractor	_____	_____
Concrete/Bituminous Contractor	_____	_____
Supplier	_____	_____
Culvert/Drainage Contractor	_____	_____
Door Supplier	_____	_____
Demolition Contractor	_____	_____

*****Before each inspection stage, those subcontractors must have purchased their business license. If the subcontractors are not licensed with the Town of Summerdale, an inspection cannot be made.*****

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<i>TYPE OF WORK</i>	<i>FIRM OR INDIVIDUAL <u>NAME</u> / <u>ADDRESS</u> / <u>PHONE</u></i>	<i>VALUE OF JOB</i>
Electrical Contractor	_____	_____
Supplier	_____	_____
Elevator/Shaft Contractor	_____	_____
Supplier	_____	_____
Exterminator	_____	_____
Fencing-All Types Contractor	_____	_____
Supplier	_____	_____
Fireplace Installer	_____	_____
Supplier	_____	_____
Flooring-All Types Contractor	_____	_____
Supplier	_____	_____
Foundation Contractor	_____	_____
Glass/Glazing Contractor	_____	_____
Supplier	_____	_____
Grading/Excavating Contractor	_____	_____
Supplier	_____	_____
Garage Door Installer	_____	_____
Supplier	_____	_____
Insulation/Weather-strip Contractor	_____	_____
Supplier	_____	_____
*Landscaping/Shrubs/Grass Contractor	_____	_____
Supplier	_____	_____
Lawn Sprinkler Contractor	_____	_____
Masonry/Brick/Block Contractor	_____	_____
Supplier	_____	_____
Marble Sinks/Tub installer	_____	_____

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TYPE OF WORK	FIRM OR INDIVIDUAL <u>NAME</u> / <u>ADDRESS</u> / <u>PHONE</u>	VALUE OF JOB
Metal Building Supplier	_____	_____
Ornamental Metal Contractor	_____	_____
Supplier	_____	_____
Painting/Int. Decorator Contractor	_____	_____
Supplier	_____	_____
*Plumbing/Gas Contractor	_____	_____
Supplier	_____	_____
Portable Office/Shed Contractor	_____	_____
Pre-cast/Roof Decks Contractor	_____	_____
Supplier	_____	_____
Roads/Streets/Driveways Contractor	_____	_____
Supplier	_____	_____
Roofing Contractor	_____	_____
Supplier	_____	_____
Septic Tank Installer	_____	_____
Security Contractor	_____	_____
Sheet Metal Contractor	_____	_____
Supplier	_____	_____
Sheet Rock/Finishing Contractor	_____	_____
Supplier	_____	_____
Sheet/Rock Hanging Contractor	_____	_____
Supplier	_____	_____
Siding Contractor	_____	_____
Supplier	_____	_____
*Sprinkler System/Fire Contractor	_____	_____
Supplier	_____	_____

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<i>TYPE OF WORK</i>	<i>FIRM OR INDIVIDUAL <u>NAME</u> / <u>ADDRESS</u> / <u>PHONE</u></i>	<i>VALUE OF JOB</i>
Steel Placing & Erection Contractor _____	_____	_____
Supplier _____	_____	_____
Swimming Pools/Etc. Contractor _____	_____	_____
Surveying Land/Building _____	_____	_____
Tile/All Classes Contractor _____	_____	_____
Supplier _____	_____	_____
Trim Contractor _____	_____	_____
Supplier _____	_____	_____
Truss Contractor & Truss Placing _____	_____	_____
Supplier _____	_____	_____
Wallpaper Contractor _____	_____	_____
Supplier _____	_____	_____
Well/Pump Contractor _____	_____	_____
Window Supplier _____	_____	_____
Other _____	_____	_____

* Copy of State Certification Required

NOTICE: A TOWN BUSINESS LICENSE IS REQUIRED FOR ALL SUB-CONTRACTORS AND SUPPLIERS. **THE GENERAL CONTRACTOR IS RESPONSIBLE FOR PURCHASING TOWN BUSINESS LICENSES FOR ANY SUB-CONTRACTORS WHO FAIL TO DO SO.**

I hereby certify that I have read and examined this application and know the same to be true, correct and complete. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Applicant's Signature

APPLICATION FOR INITIAL WATER/SEWER SERVICE

1) Owner / Responsible Party Name: _____
 Address: _____
 Phone #: _____

2) Physical Location: _____

3) Type of Application:

_____ Water	_____ Sewer
_____ New Building	_____ Existing Building
_____ Individual	_____ Multiple Dwelling
_____ Commercial	_____ Industrial

4) Describe Property: _____

5) Describe Work: _____

I, _____, as owner of the property described above, do hereby apply for Sewer and/or Water Service to my property, and hereby grant permission to Town to install and maintain any and all facilities necessary to provide service to my property. When service is made available I agree: (1) To arrange to connect my premises to the metered connection within ninety (90) days, (2) To abide by all rate, rules and regulations applicable to my Sewer and/or Water Service, as established or amended, (3) To make any alteration necessary on my premises to accommodate Sewer and/or Water Service and, (4) To install back-flow prevention assemblies conforming to Town policies. The Town provides double check valve where acceptable on standard ¾ inch and 1 inch services.

In the event I have not connected to the Sewer and/or Water Service within ninety (90) days from the date the service is completed, I hereby agree to pay the applicable monthly minimum charge or, if my property is being rented and service is active, the tenant hereby does agrees by making application for service and paying a meter deposit to pay the applicable monthly charges, I understand that this minimum billing will be in accordance with the prevailing rates. In the event the service becomes inactive, I understand that I, as owner of property, will be responsible for payment of the minimum billing or prevailing rates for service for a period of no less than one year and will continue to be responsible for said payment until I provide the Town with written notice requesting termination of service.

Date: _____

 SIGNATURE (OWNER REQUIRED)

6) Has Construction / Sewer Permit been received _____

7) Application Approved: _____ Disapproved: _____

By: _____ Date: _____

STATE OF ALABAMA
COUNTY OF BALDWIN
TOWN OF SUMMERDALE

OWNER’S AFFIDAVIT OF AUTHORIZED WORK ORDER

Before me, the undersigned authority in and for said county and state, personally appeared

_____, who after being first duly sworn, doth depose and say under oath as follows:

1. My name is _____, and I am the owner/agent of the work, labor and materials represented on the permit _____ and hereby certify and attest that said work was authorized by me and said work was prosecuted to its current condition pursuant to my authority and orders.

Further affiant saith not.

OWNER SIGNATURE

Sworn to and subscribed before me this _____ day of _____, 2007.

Notary Public

My Commission Expires: _____

Town of Summerdale
Building Department

I, _____, the (owner / contractor) for this job being permitted, have read and understand all notices to owner/contractor included in my permit application packet.

Owner/Contractor Signature Date