

CITY OF LAKE VIEW

Date Received _____

22757 Central Park Drive
Lake View, Alabama 35111
205-477-1999

Plan Reviewed Yes or No

Approved By _____

Building Permit Application

City Police Jurisdiction Zoning _____ Fire District _____

License Number for: City _____ State _____ County _____

Parcel ID#: _____

Lot _____ Block _____ Sector _____ Subdivision _____

Address of Parcel: _____

Owner: _____ Phone # _____

Current Mailing Address: _____

Contractor/Builder: _____ Phone # _____

AL Architect or Engineer: _____ Phone # _____

Occupancy Use: _____

OCCUPANCY CLASSIFICATION

ASSEMBLY BUSINESS EDUCATIONAL FACTORY-INDUSTRIAL
 HAZARDOUS INSTITUTIONAL MERCANTILE RESIDENTIAL
 STORAGE

CLASS OF WORK

NEW ADDITION ALTERATION REPAIR MOVE RAZE

OTHER: _____

SPECIAL CONDITIONS: _____

NUMBER OF BUILDINGS: _____ NUMBER OF DWELLING UNITS: _____

This area to be completed by Building Official

Finish Floor Area _____ Bsmt. _____ 1st _____ 2nd _____

Unfinished Floor Area _____ Bsmt. _____ Carport _____ Garage _____

Open Deck Area _____ Covered Porch/Entry Area _____ Other _____

Full Estimated Value _____ Permit Fee \$ _____

Cash Check # _____ Date Paid _____ Total Fee \$ _____

COMMENTS: _____

- APPLICATION WILL NOT BE PROCESSED UNTIL ALL REQUIRED INFORMATION AND APPLICANT SIGNS APPLICATION.

NOTICE: The City of Lake View has adopted "International Building Codes 2012". Proposed construction shall meet all applicable codes. I understand that this permit is conditioned upon the correctness of the information I have supplied and may be revoked upon a finding by the Building Official that any relevant item of information is substantially incorrect. This permit becomes null and void if work or construction authorized is not commenced within 6 (six) months; or if construction or work is suspended or abandoned for a period of 1 (one) year at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. 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 or cancel the provisions of any other State or Local law regulating construction or the performance of construction.

Signature of Owner/Contractor or Agent

Printed Name

Date: _____

CITY OF LAKE VIEW INSPECTION SERVICES
APPLICATION FOR MECHANICAL PERMIT

(This box for Clerk's use only)

Date _____ Permit# _____

A PERMIT IS REQUESTED TO INSTALL HVAC EQUIPMENT LOCATED

AT: _____
(PHYSICAL ADDRESS OF JOB SITE)

BY: _____ PHONE# _____
(ELECTRICAL CONTRACTOR) (NAME OF BUSINESS AS SHOWN ON BUSINESS LICENSE)

FOR: _____
(NAME OF BUILDING CONTRACTOR/OWNER/OCCUPANT)

(IF NO PHYSICAL ADDRESS AVAILABLE PLEASE PROVIDE)

LOT: _____ BLOCK: _____ SECTOR: _____

SUBDIVISION: _____

TAX PARCEL ID#: _____

INSTALLING HVAC SYSTEMS:

- HVAC DISTRIBUTION IN BUILDING
- OTHER _____

TYPE OF OCCUPANCY

- RESIDENTIAL
- COMMERCIAL/INDUSTRIAL

TYPE OF CONSTRUCTION:

- NEW CONSTRUCTION
- EXISTING BUILDING/ADDITION
- OTHER _____

IS ANY EXCAVATION TO BE DONE WITHIN ANY PUBLIC WAY:
(SIDEWALK, STREET, ALLEY, ETC)

YES NO
(CIRCLE)

I HEREBY CERTIFY: All information given herein is true and correct to the best of my knowledge. I assume all responsibility for the HVAC work performed on this job and hold harmless any claims against the City of Lake View, its council and/or its agencies relating to this HVAC job for which this permit is issued. I agree to comply with all City of Lake View ordinances, State and Federal laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; all work to be performed shall meet or exceed all applicable codes.

Signature

Printed Name

Date

MECHANICAL PERMIT COST: \$50.00 plus issuance fee and total cost of work unless cost is included in building permit fees.

APPROVED BY: _____ **DATE:** _____

CITY OF LAKE VIEW INSPECTION SERVICES
APPLICATION FOR GAS PERMIT

(This box for Clerk's use only)

Date _____ Permit# _____

A PERMIT IS REQUESTED TO INSTALL, REPAIR OR REPLACE GAS, PIPING, APPLIANCES, EQUIPMENT AND APPURTENANCES LOCATED

AT: _____
(PHYSICAL ADDRESS OF JOB SITE)

BY: _____ PHONE# _____
(GAS CONTRACTOR) (NAME OF BUSINESS AS SHOWN ON BUSINESS LICENSE)

FOR: _____
(NAME OF BUILDING CONTRACTOR/OWNER/OCCUPANT)

(IF NO PHYSICAL ADDRESS AVAILABLE PLEASE PROVIDE)

LOT: _____ BLOCK: _____ SECTOR: _____

SUBDIVISION: _____

TAX PARCEL ID#: _____

BUILDING GAS SERVICE:

- FROM METER TO BUILDING
- GAS DISTRIBUTION IN BUILDING
- OTHER _____

TYPE OF OCCUPANCY

- RESIDENTIAL
- COMMERCIAL/INDUSTRIAL

TYPE OF CONSTRUCTION:

- NEW CONSTRUCTION
- EXISTING BUILDING/ADDITION
- OTHER _____

IS ANY EXCAVATION TO BE DONE WITHIN ANY PUBLIC WAY:
(SIDEWALK, STREET, ALLEY, ETC)

YES NO
(CIRCLE)

I HEREBY CERTIFY: All information given herein is true and correct to the best of my knowledge. I assume all responsibility for the GAS work performed on this job and hold harmless any claims against the City of Lake View, its council and/or its agencies relating to this GAS job for which this permit is issued. I agree to comply with all City of Lake View ordinances, State and Federal laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; all work to be performed shall meet or exceed all applicable codes.

Signature

Printed Name

Date

GAS PERMIT COST: \$50.00 plus issuance fee and total cost of work unless cost is included in building permit fees.

APPROVED BY: _____ **DATE:** _____

CITY OF LAKE VIEW INSPECTION SERVICES
APPLICATION FOR PLUMBING PERMIT

(This box for Clerk's use only)

Date _____ Permit# _____

A PERMIT IS REQUESTED TO INSTALL, REPAIR OR REPLACE PLUMBING LOCATED

AT: _____
 (PHYSICAL ADDRESS OF JOB SITE)

BY: _____ PHONE# _____
 (PLUMBING CONTRACTOR) (NAME OF BUSINESS AS SHOWN ON BUSINESS LICENSE)

FOR: _____
 (NAME OF BUILDING CONTRACTOR/OWNER/OCCUPANT)

(IF NO PHYSICAL ADDRESS AVAILABLE PLEASE PROVIDE)

LOT: _____ BLOCK: _____ SECTOR: _____

SUBDIVISION: _____

TAX PARCEL ID#: _____

BUILDING WATER SERVICE:

- FROM MAIN TO METER
- FROM METER TO BUILDING
- WATER DISTRIBUTION IN BUILDING

TYPE OF CONSTRUCTION:

- NEW INSTALLATION
- REPLACE EXISTING/REPAIR

TYPE OF CONSTRUCTION:

- NEW CONSTRUCTION
- EXISTING BUILDING/ADDTION

TYPE OF OCCUPANCY:

- RESIDENTIAL
- COMMERCIAL/INDUSTRIAL

SEPTIC TANK:

- CONNECTION TO SEPTIC TANK
- DISCONNECTION FROM SEPTIC TANK

OTHER _____

IS ANY EXCAVATION TO BE DONE WITHIN ANY PUBLIC WAY: YES NO
 (SIDEWALK, STREET, ALLEY, ETC) (CIRCLE)

I HEREBY CERTIFY: All information given herein is true and correct to the best of my knowledge. I assume all responsibility for the PLUMBING work performed on this job and hold harmless any claims against the City of Lake View, its council and/or its agencies relating to this PLUMBING job for which this permit is issued. I agree to comply with all City of Lake View ordinances, State and Federal laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; all work to be performed shall meet or exceed all applicable codes.

 Signature Printed Name Date

PLUMBING PERMIT COST: \$50.00 plus issuance fee and total cost of work unless cost is included in building permit fees.

APPROVED BY: _____ **DATE:** _____

CITY OF LAKE VIEW INSPECTION SERVICES
APPLICATION FOR ELECTRICAL PERMIT

(This box for Clerk's use only)

Date _____

Permit# _____

A PERMIT IS REQUESTED TO WIRE AND/OR INSTALL ELECTRICAL EQUIPMENT LOCATED

AT: _____
(PHYSICAL ADDRESS OF JOB SITE)

BY: _____ PHONE# _____
(ELECTRICAL CONTRACTOR) (NAME OF BUSINESS AS SHOWN ON BUSINESS LICENSE)

FOR: _____
(NAME OF BUILDING CONTRACTOR/OWNER/OCCUPANT)

(IF NO PHYSICAL ADDRESS AVAILABLE PLEASE PROVIDE)

LOT: _____ BLOCK: _____ SECTOR: _____

SUBDIVISION: _____

TAX PARCEL ID#: _____

BUILDING ELECTRICAL SERVICE:

- FROM SERVICE PANEL TO MAIN PANEL
- FROM SERVICE PANEL TO APPLIANCES
- ELECTRICAL DISTRIBUTION IN BUILDING

TYPE OF OCCUPANCY:

- RESIDENTIAL
- COMMERCIAL/INDUSTRIAL
- OTHER _____

TYPE OF CONSTRUCTION:

- NEW CONSTRUCTION
- EXISTING BUILDING/ADDITION

OTHER _____

IS ANY EXCAVATION TO BE DONE WITHIN ANY PUBLIC WAY:
(SIDEWALK, STREET, ALLEY, ETC)

YES NO
(CIRCLE)

I HEREBY CERTIFY: All information given herein is true and correct to the best of my knowledge. I assume all responsibility for the ELECTRICAL work performed on this job and hold harmless any claims against the City of Lake View, its council and/or its agencies relating to this ELECTRICAL job for which this permit is issued. I agree to comply with all City of Lake View ordinances, State and Federal laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; all work to be performed shall meet or exceed all applicable codes.

Signature

Printed Name

Date

ELECTRICAL PERMIT COST: \$50.00 plus issuance fee and total cost of work unless cost is included in building permit fees.

APPROVED BY: _____ **DATE:** _____

CITY OF LAKE VIEW INSPECTION SERVICES

APPLICATION FOR TEMPORARY ELECTRICAL POWER SERVICE PERMIT

(This box for Clerk's use only)

Date _____ Permit# _____

A PERMIT IS REQUESTED TO INSTALL TEMPORARY ELECTRICAL POWER SERVICE LOCATED

AT: _____
(PHYSICAL ADDRESS OF JOB SITE)

BY: _____ PHONE# _____
(ELECTRICAL CONTRACTOR) (NAME OF BUSINESS AS SHOWN ON BUSINESS LICENSE)

FOR: _____
(NAME OF BUILDING CONTRACTOR/OWNER/OCCUPANT)

(IF NO PHYSICAL ADDRESS AVAILABLE PLEASE PROVIDE)

LOT: _____ BLOCK: _____ SECTOR: _____

SUBDIVISION: _____

TAX PARCEL ID#: _____

TEMPORARY ELECTRICAL POWER SERVICE FOR:

- RESIDENTIAL
- COMMERCIAL/INDUSTRIAL
- OTHER _____

IS ANY EXCAVATION TO BE DONE WITHIN ANY PUBLIC WAY: YES NO
(SIDEWALK, STREET, ALLEY, ETC) (CIRCLE)

I HEREBY CERTIFY: All information given herein is true and correct to the best of my knowledge. I assume all responsibility for the TEMPORARY ELECTRICAL POWER SERVICE installation performed on this job and hold harmless any claims against the City of Lake View, its council and/or its agencies relating to this TEMPORARY ELECTRICAL POWER SERVICE job for which this permit is issued. I agree to comply with all City of Lake View ordinances, State and Federal laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; all work to be performed shall meet or exceed all applicable codes.

Signature Printed Name Date

TEMPORARY ELECTRICAL POWER SERVICE PERMIT COST: \$25.00 plus issuance fee and total cost of work unless cost is included in building permit fees.

APPROVED BY: _____ **DATE:** _____

TOWN OF LAKE VIEW GRADING/ CLEARING PERMIT APPLICATION

NUMBER/STREET	SUBDIVISION/SURVEY	LOT	BLOCK
ADDRESS:			

PROPOSED USE:

<p style="text-align: center;"><u>RESIDENTIAL</u></p> <p><input type="checkbox"/> ONE FAMILY</p> <p><input type="checkbox"/> TWO + FAMILY</p> <p><input type="checkbox"/> TRANSIENT MOTEL, HOTEL, OR DORMITORY</p> <p><input type="checkbox"/> OTHER-SPECIFY _____</p>	<p style="text-align: center;"><u>NON-RESIDENTIAL</u></p> <p><input type="checkbox"/> AMUSEMENT, RECREATIONAL</p> <p><input type="checkbox"/> CHURCH, OTHER RELIGIOUS</p> <p><input type="checkbox"/> STORE, MERCANTILE</p> <p><input type="checkbox"/> OTHER- SPECIFY _____</p>
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PROCEDURE FOR ISSUANCE OF PERMITS:

< UPON APPROVAL OF THIS GRADING PERMIT, YOU WILL BE ISSUED AN INSPECTION RECORD

< THE INSPECTION RECORD MUST BE POSTED AT THE FRONT OF YOUR LOT WHERE IT IS EASILY

< ACCESSIBLE TO THE INSPECTOR

< ONCE GRADING/CLEARING IS COMPLETE AN INSPECTION MUST BE SCHEDULED

< UPON PASSING INSPECTION, THE INSPECTOR WILL SIGN OFF ON YOUR INSPECTION RECORD

< YOU MUST BRING YOUR SIGNED/APPROVED INSPECTION RECORD TO TOWN HALL BEFORE A BUILDING PERMIT FOR FURTHER CONSTRUCTION ON YOUR LOT WILL BE ISSUED

	NAME	ADDRESS	TELEPHONE NO.
OWNER			
CONTRACTOR			

PERMIT FEE \$ 100.00

I HAVE READ, UNDERSTAND, AND AGREE TO THE STIPULATIONS SET FORTH IN TOWN OF LAKE VIEW. I HEREBY CERTIFY THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT; I AGREE TO COMPLY WITH ALL TOWN ORDINANCES AND STATE LAWS REGARDING BUILDING CONSTRUCTION: THAT I AM THE OWNER OR AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK.

SIGNATURE: _____

DATE: _____

NAME OF COMPANY: _____