



# CITY OF ROBERTSDALE

22647 Racine Street, PO Box 429, Robertsdale, AL 36567

Office# 251-947-2466 Fax# 251-947-2619

## RESIDENTIAL BUILDING PERMIT APPLICATION

Job Address: \_\_\_\_\_

New ( ) Addition ( ) Remodel ( ) Repair ( ) Manuf Home ( ) Moving ( ) Demo ( ) Other ( )

Owner: \_\_\_\_\_

Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax: \_\_\_\_\_

Contractor: \_\_\_\_\_

Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Fax: \_\_\_\_\_

**New Construction Fair Market Value (Home & Land): \$** \_\_\_\_\_

**All Other Permits (Labor & Materials): \$** \_\_\_\_\_

Describe Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check List: ( ) Plans - 2 Sets (New Construction), 1 Set (All Others)

( ) Site Plan In Accordance With Land Use Ordinances Showing Setbacks

( ) Moving Permit - Address Moving From and Address of Destination

( ) Land Use Application (If Applicable)

( ) Subcontractor List

**NOTICE: ALL CONTRACTORS, SUBCONTRACTORS, & MATERIAL SUPPLIERS MUST HAVE A CURRENT CITY OF ROBERTSDALE BUSINESS LICENSE AT THE TIME SAID WORK IS PERFORMED. A FINAL INSPECTION WILL NOT BE SCHEDULED UNTIL FULL COMPLIANCE WITH BUSINESS LICENSE REQUIREMENTS. ALL PERMIT FEES, IMPACT FEES, & WATER & SEWER TAP FEES MUST BE PAID AT THE TIME OF PERMIT ISSUANCE.**

*I hereby certify that all information provided in this application is true, accurate, and complete.*

**Applicant** \_\_\_\_\_

**Date** \_\_\_\_\_

**Building Inspector** \_\_\_\_\_

**Date** \_\_\_\_\_

**Approved ( )**

**Not Approved ( )**

Permit # \_\_\_\_\_

Date Issued: \_\_\_\_\_