

**BUILDING PERMIT APPLICATION  
TOWN OF FLOMATON**

2125 RINGOLD STREET, FLOMATON, AL. 36441  
(251) 296-2431 - (251) 296-1930 (FAX)

PLEASE PRINT

DATE APPLIED: \_\_\_\_\_

**FOR OFFICE USE ONLY**

PERMIT # \_\_\_\_\_

DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

TOTAL PAID: \_\_\_\_\_

OWNER OR CONTRACTOR IS REQUIRED TO PROVIDE LIST OF ALL SUB-CONTRACTERS

**JOB LOCATION INFORMATION**

ADDRESS: \_\_\_\_\_

LOT #: \_\_\_\_\_ SECTOR/PHASE: \_\_\_\_\_ SURVEY/SUBDIVISION: \_\_\_\_\_

LEGAL DESCRIPTION: SECTION: \_\_\_\_\_ TOWNSHIP: \_\_\_\_\_ RANGE: \_\_\_\_\_ PARCEL ID: \_\_\_\_\_

**OWNER INFORMATION:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

*IF HOMEOWNER OBTAINING PERMIT, ATTACH AFFIDAVIT  
FROM ALABAMA HOMEBUILDERS LICENSURE BOARD*

**CONTRACTOR INFORMATION:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

LICENSE #: CITY \_\_\_\_\_ STATE \_\_\_\_\_

**JOB DESCRIPTION:**

FOR: NEW CONSTRUCTION \_\_\_ REPAIR \_\_\_ ADDITION \_\_\_ MOBILE HOME \_\_\_ OTHER (SPECIFY) \_\_\_\_\_

TYPE CONSTRUCTION (INT'L BLDG CODE) \_\_\_\_\_ OCCUPANCY USE (INT'L BLDG CODE) \_\_\_\_\_

PLOT PLAN SUBMITTED: YES \_\_\_ NO \_\_\_ EXISTING STRUCTURES LOCATED ON PLOT: YES \_\_\_ NO \_\_\_

IN FLOOD PLAIN: YES \_\_\_ NO \_\_\_ IF YES, EXPLAIN: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_

**RESIDENTIAL ONLY:**

# STORIES \_\_\_\_\_ ELEVATOR: YES \_\_\_ NO \_\_\_

SQ. FT. LIVING AREA: \_\_\_\_\_

SQ. FT. NON-LIVING AREA: \_\_\_\_\_

# BEDROOMS \_\_\_ # BATHS \_\_\_ # TOTAL ROOMS \_\_\_\_\_

OFF-STREET PARKING: YES \_\_\_ NO \_\_\_ TOTAL SPACES \_\_\_\_\_

**COMMERCIAL ONLY:**

# STORIES \_\_\_\_\_ ELEVATOR YES \_\_\_ NO \_\_\_

TOTAL SQ. FT. : \_\_\_\_\_

# OFFICES \_\_\_ # BATHS \_\_\_ # STORAGE ROOMS \_\_\_\_\_

# TOTAL ROOMS \_\_\_\_\_ # PARKING SPACES \_\_\_\_\_

SPRINKLER SYSTEM: YES \_\_\_ NO \_\_\_ IF YES, # HEADS: \_\_\_\_\_

**CERTIFICATION:**

By signing below, I hereby certify that all information contained herein is true and correct to the best of my knowledge; that I agree to comply with all Town Ordinances and Regulations, Building Codes, and State Laws regulating building construction; that I am the Owner or authorized as the Owner's Agent for the work described herein.

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

**COST OR**

**VALUATION OF JOB:**

BUILDING PERMIT FEE \_\_\_\_\_

PLANS REVIEW FEE \_\_\_\_\_

RE-INSPECTION FEES \_\_\_\_\_

(1ST = \$20.00, 2ND = \$50.00, EACH ADDITIONAL = \$50.00)

**TOTAL FEES** \_\_\_\_\_