A DECKING INSPECTION IS REQUIRED BEFORE ROOFING BEGINS CALL 756-5226

CITY OF VALLEY
PLANNING AND DEVELOPMENT
P. O. BOX 186
VALLEY, ALABAMA 36854

ROOF PERMIT APPLICATION
RESIDENTIAL ___ or COMMERCIAL ___
(CICT fee will be added for Commercial permit)

Name of Applicant: _____

Mailing Address: _____

_____

Business Phone No.: _____ *Fax No.:* _____

Name of Property Owner: _____

Address: _____

*Property Location:*_____

Name of Contractor: _____

*Mailing Address (if different):*_____

_____

Business Phone No. (if different): _____

Total Cost of Project: $_____

It shall be the duty of the holder of the building permit or their duly authorized agent to notify the building official when work is ready for inspection. It shall be the duty of the permit holder to provide access to and means for inspections of such work that are required by the code. Work shall not be done beyond the point indicated in each successive inspection without first obtaining the approval of the building official. The final inspection shall be made after all work required by the building permit is completed.

Certification:

 Applicant:

  I have reviewed this application, and that to the best of my knowledge and abilities, the information provided in this application is true and accurate. Further, I agree to provide any additional information within my powers that may be required by the Zoning Official to determine the compliance of the proposed property construction or improvement activities with the City of Valley Zoning Ordinance.

_____ _____
 Applicants Signature   *Date*

 Property Owner:

  I hereby certify and attest that I have reviewed this application, and that, to the best of my knowledge and abilities, the information provided in this application is true and accurate. Further, I agree to provide any additional information within my powers that may be required by the Zoning Official to determine the compliance of the proposed property construction or improvement activities with the City of Valley Zoning Ordinance.

_____ _____
 Property Owners Signature   *Date*

CITY OF VALLEY USE ONLY

Zoning Official's Information:

 Date Filed: _____ Received By: _____

 Application Fee Received: $ _____ [ ] Cash   [ ] Check # _____

 Date Received: _____ Reviewed By: _____

 Decision: [ ] Application Approved   [ ] Application Denied

 Zoning Official Signature: _____ Date: _____

Comments: _____

_____