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

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

All property owners within the City Limits of Valley must apply for and receive a Building Permit before undertaking any construction activities, which shall include site preparation and excavation for the construction of new buildings (including accessory or temporary structures), moving any structures onto a property, relocating existing structures on a property, and alternation or repair of a structure. The purpose of this permit process shall be to establish compliance with the Zoning Ordinance prior to the commencement of construction activities. The approval of a Building Permit by the City of Valley shall not imply or constitute approval of any other applicable permit requirements including, but not limited to, subdivision plat approval, septic system approval from the Chambers County Health Department, and wetland permits from the U. S. Corps of Engineers. To apply for a Building Permit, please complete the following application and return the form with all necessary supporting documents to Planning and Development at 20 Fob James Drive. Incomplete applications will not be processed. For additional information please call City of Valley at (334) 756-5226, 8:00 A.M. – 5:00 P.M. Monday – Friday.

Name of Applicant:				
Mailing Address:				
Business Phone No.:	Fax No.:			
Name of Property Owner:				
Address:				
Project Location:				
Name of Contractor:				
Mailing Address (if different):				
Business Phone No. (if different):				

Project Information:

	Do you propose to: (Please check all tha		
	() Construct a new building or	accessorv structu	re on the property?
	() Move a new or used structure	•	
	() Construct an addition to an e		*
	() Move or relocate an existing location on the subject pr	_	ssory structure to a new
	() Replace or repair a building of by fire or storm	or accessory struc	cture that was destroyed
	() Other activity (please explain	ı)	
	Total Cost of Project Including S	ite Preparation:	\$
he drawn	to scale on a survey plat contained in a closing		ts, the required site plan <u>may</u>
subject pr	roperty. Also attach a Zoning Certificate and E if required	g document or a cop	y of the tax map showing the
subject pro Architect,	operty. Also attach a Zoning Certificate and B	g document or a cop	y of the tax map showing the
subject pro Architect,	operty. Also attach a Zoning Certificate and E if required State Health Department Clearance:	g document or a cop Building Plans stamp	y of the tax map showing the
subject pro Architect,	epperty. Also attach a Zoning Certificate and E if required E State Health Department Clearance: East Alabama Water Dist (call 811)	g document or a cop Building Plans stamp rict Approval	y of the tax map showing the
subject pro Architect,	operty. Also attach a Zoning Certificate and E if required State Health Department Clearance: East Alabama Water Dist	g document or a cop Building Plans stamp rict Approval	y of the tax map showing the sed by a Registered Alabama
subject pro Architect,	epperty. Also attach a Zoning Certificate and E if required E State Health Department Clearance: East Alabama Water Dist (call 811)	g document or a cop Building Plans stamp Approval trict Approval Dt	y of the tax map showing the ed by a Registered Alabama Date Date
subject pro Architect,	eroperty. Also attach a Zoning Certificate and E if required E State Health Department Clearance: East Alabama Water Dist (call 811) Lee Chambers Water Dist	g document or a cop Building Plans stamp rict Approval trict Approval	y of the tax map showing the yed by a Registered Alabama Date

Note: 811 is for Alabama Line Locator. They may give you an authorization number; you can write this number in the approval space provided.

Certification:

Applicant:

best of my knowledge and abilities, the and accurate. Further, I agree to prove that may be required by the Zoning Off	I have received this application, and that to the information provided in this application is true ide any additional information within my powers icial to determine the compliance of the proposed at activities with the City of Valley Zoning
Applicants Signature	
Property Owner:	
best of my knowledge and abilities, the and accurate. Further, I agree to provi that may be required by the Zoning Off	I have reviewed this application, and that, to the information provided in this application is true ide any additional information within my powers icial to determine the compliance of the proposed int activities with the City of Valley Zoning
Property Owners Signature	Date
CITY OF	VALLEY USE ONLY
Zoning Official's Information:	
Date Filed: Receiv	ved By:
Application Fee Received: \$	() Cash () Check #
Date Received: Re	eviewed By:
Decision: () Application Appr	roved () Application Denied
Zoning Official Signature:	Date:
Comments:	

Zoning Inspectors Review Checklist (To be completed by Zoning Inspec	ctor Only)
Proposed Land Use: ()Allowed in Zone () Not Allowed (Re Lot Size / Area: ()Complies ()Grandfathered ()Too Small (Varia Lot Width: ()Complies ()Grandfathered ()Too Small (Varia Street Frontage: ()Complies ()Grandfathered ()Too Small (Varia Front Yard Setback: ()Complies ()Grandfathered ()Too Small (Varia Side Yard Setback: ()Complies ()Grandfathered ()Too Small (Varia Rear Yard Setback: ()Complies ()Grandfathered ()Too Small (Varia Impervious Surface: ()Complies ()Grandfathered ()Exceeds Limits(Varia Building Height: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered () Too high (Varian Surface: ()Complies ()Grandfathered ()Exceeds Limits ()Complies ()Grandfathered ()Complies ()Grandfathered ()Complies ()Complies ()Grandfathered ()Complies (nce Required) nce Required) nce Required) nce Required) nce Required) nce Required) variance Required
Special Requirements / Conditions: (Required buffers, setbacks, etc.)	
Other Permits / Approvals Required:	
Approval Conditions (if necessary):	
Checklist Completed By:	
Zoning Official	Date

SUB-CONTRACTORS LIST

A list of all sub-contractors must be furnished to Code Enforcement prior to Temporary Power being received on a Job Site. On jobs not requiring temporary power, this list must be furnished prior to the Final Inspection.

Framer:	Concrete Finisher:	_
Layout/Footing:	Block/Brick Mason:	
Plumber/Gas:	Grading:	_
Electrician:	Heating/Air:	
Roofer:	Cabinets/Counter Tops:	_
Trim:	Vinyl Siding:	
Hardwood Flooring:	Ceramic Tile:	
Painter:	Carpet/Vinyl Flooring:	
Sheetrock:	Landscaping:	
Pool:	Fencing:	
Fireplace:	Termit Protection:	_
Port-A-Let:	Wallpaper Hanger:	
Closet/Shelving:	Insulation:	
Outside Utilities:	Poured Walls:	
Gutters:	Water Proofing:	
Alarm System:	Septic Tank:	_
Asphalt:	Hood System:	_
Extinguishing System:	Fire Sprinkler System:	_
Other:	Other:	