



City of Bay Minette

Building Permit

301 D'Olive Street · Bay Minette, Alabama 36507 · Phone (251) 580-1610

Office Use Only

B- _____

- Residential Commercial
- Outside Municipal Limits

Case # - _____

Owner Name: _____ Date: _____

Property Address: _____

Contractor: _____ Business License No.: _____

**If owner is acting as General Contractor, an Affidavit must be signed and notarized prior to Building Permit remittance*

Phone No.: _____ Email: _____

Architect / Designer: _____ Business License No.: _____

Engineer: _____ Business License No.: _____

- Class of Work: New Bldg. Addition Renovation/ Repair Move Demolition Mobile Home
 Re-roof Accessory Pool Fence Carport Other: _____

CONSTRUCTION DETAILS

Valuation of Work: \$ _____
 Type of Construction: _____
 Size of Building-HEATED: _____ sq. ft.
 Size of Building-NON-HEATED: _____ sq. ft.
 No. of Stories: _____ No. of Dwelling Units: _____
 Description of Work: _____

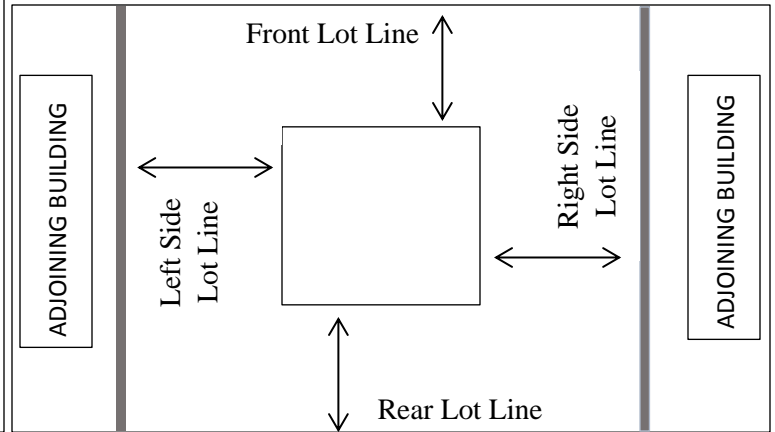
OTHER REQUIREMENTS:

- Plumbing Permit Electrical Permit
- Mechanical Permit Sign Application
- Business License Checklist Requirements **Attached List*

PROPOSED SETBACKS

FRONT: _____ ft. REAR: _____ ft.

LEFT SIDE: _____ ft. RIGHT SIDE: _____ ft.



Application is hereby made for a permit to erect/alter a structure as described herein or shown in accompanying plans and specifications, which structure is to be located as shown on the accompanying plot plan. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact or expression of material fact, either with or without intention on the part of this applicant, such as might, or would, operate to cause a refusal of this application, or any material alteration or change in the accompanying plans, specifications or structure made subsequent to the issuance of a permit in accordance with this application, without the approval of the Building Official, shall constitute sufficient ground for the revocation of such permit.

Signature of Applicant: _____ Date: _____

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Reviewed by: _____

Approved by: _____

Application Fee: \$ _____

Permit Fee: \$ _____

CICT Fee: \$ _____

TOTAL: \$ _____

Paid with: Cash Credit Card Check- No.: _____