

CITY OF ASHVILLE
ELECTRICAL PERMIT APPLICATION
211 8TH STREET ASHVILLE AL 35953
205-594-4151

FOR OFFICE USE ONLY

PERMIT NO.: _____
DATE ISSUED: _____
ISSUED BY: _____
TOTAL PAID: _____

DATE APPLIED: _____

TO: BUILDING INSPECTOR ASSOCIATED BUILDING PERMIT NO. _____

TYPE OF OCCUPANCY (Please Circle): RESIDENTIAL COMMERCIAL INDUSTRIAL
WORK TO BE DONE (Please Circle): NEW BLDG EXISTING BLDG BLDG ADD'N MOBILE HOME POOL SIGN

IF NOT NEW CONSTRUCTION, ACCURATELY DESCRIBE WORK TO BE DONE: _____

JOB LOCATION INFORMATION:

ADDRESS: _____ ZONING CLASSIFICATION: _____

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: _____

LICENSE CITY _____ STATE _____

RESIDENTIAL ONLY:

STORIES _____ ELEVATOR: YES ___ NO ___
SQ. FT. LIVING AREA: _____
SQ. FT. NON-LIVING AREA: _____
BEDROOMS _____ # BATHS _____ # TOTAL ROOMS _____

COMMERCIAL ONLY:

STORIES _____ ELEVATOR: YES ___ NO ___
TOTAL SQ. FT.: _____
OFFICES _____ # BATHS _____ # STORAGE ROOMS _____
TOTAL ROOMS: _____ # PARKING SPACES: _____

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 City 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: BY OWNER OR AUTHORIZED AGENT _____

PRINT NAME: _____

COST OR VALUATION OF JOB:

TOTAL PROJECT COST: _____

BUILDING PERMIT FEE _____
($\$9.00$ for each $\$1000.00$ cost plus $\$41.00$ issuance fee)

PLANS REVIEW FEE _____
(Residential $\$125.00$ or Commercial see Ordinance 2024-006)

TOTAL FEES _____

I CERTIFY THAT THE INFORMATION GIVEN HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND ALL WORK WILL BE DONE IN ACCORDANCE WITH THE CURRENT APPLICABLE CODES AND REGULATIONS.

SIGNATURE: _____ PRINTED NAME: _____
MASTER ELECTRICIAN

MASTER CARD NUMBER: _____ ASHVILLE BUSINESS LICENSE NUMBER: _____