

THIS FORM MUST BE COMPLETED IN ITS ENTIRETY

## Town of Falkville Building Permit Application

Name, Address, and Phone Number

Contractor Name, Address and Phone Number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explanation of Improvements and Classification:

\_\_\_\_\_  
\_\_\_\_\_

Beginning date of improvements or construction: \_\_\_\_\_

Is there a set of Blue Prints, drawings, etc.: \_\_\_\_\_ Is Health permit required: \_\_\_\_\_

1. New Construction \_\_\_\_\_ 2. Addition \_\_\_\_\_ 3. Repairs \_\_\_\_\_ 4. Other \_\_\_\_\_

**Cost of Improvements:**

1. HVAC \_\_\_\_\_ 2. Electrical \_\_\_\_\_ 3. Plumbing \_\_\_\_\_ 4. Other \_\_\_\_\_

**Total Cost:** \_\_\_\_\_

The owner of this building and the undersigned agree to all the applicable laws of the Town of Falkville.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE  
FOR OFFICE USE ONLY

In consideration of \$\_\_\_\_\_ and the above signed, having agreed to conform to provisions of the Town's Building Code Ordinance Number 2013-07, permission is hereby granted for the above construction.

Cost of Permit: \_\_\_\_\_  
Inspections : \_\_\_\_\_  
CICT Fee : \_\_\_\_\_  
Issuance Fee: \_\_\_\_\_  
Total : \_\_\_\_\_

PERMIT #: \_\_\_\_\_  
Approved by : \_\_\_\_\_  
Town of Falkville  
By : \_\_\_\_\_