

**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) 756-5234, 8:00 A.M. – 5:00 P.M .Monday – Friday.

Name of Applicant: _____

Mailing Address: _____

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

Name of Property Owner: _____

Street Address: _____

Name of Contractor: _____

Mailing Address (if different): _____

Business Phone No. (if different): _____

Project Information:

Do you propose to: (Please check all that apply to your project)

- () Construct a new building or accessory structure on the property?
- () Move a new or used structure onto the property
- () Construct an addition to an existing building or accessory on the property.
- () Move or relocate an existing building or accessory structure to a new location on the subject property
- () Replace or repair a building or accessory structure that was destroyed by fire or storm
- () Other activity (please explain) _____

Total Cost of Project Including Site Preparation: \$ _____

Please attach a copy of a site plan showing the proposed project activities. The site plan must show the entire boundaries on the subject property. For single-family residential projects, the required site plan may be drawn to scale on a survey plat contained in a closing document or a copy of the tax map showing the subject property. Also attach a Zoning Certificate and Building Plans stamped by a Registered Alabama Architect, if required

Utility & State Health Department Clearance:

- East Alabama Water District _____
Approval Date
- Lee Chambers Water District _____
Approval Date
- Chambers Co. Health Dept. _____
Approval Date
- Alabama Gas Company _____
(800-292-8525 Approval Date

Note: The 800 number under Alabama Gas Company is for Alabama Line Locator. They will give you an authorization number, You can write this number in the approval space provided for Alabama Gas Company,

Certification:

Applicant:

I hereby certify and attest that I have received 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: _____

Zoning Inspectors Review Checklist (To be completed by Zoning Inspector Only)

- Proposed Land Use: () Allowed in Zone () Not Allowed (Rezoning Required)
Lot Size / Area: () Complies () Grandfathered () Too Small (Variance Required)
Lot Width: () Complies () Grandfathered () Too Small (Variance Required)
Street Frontage: () Complies () Grandfathered () Too Small (Variance Required)
Front Yard Setback: () Complies () Grandfathered () Too Small (Variance Required)
Side Yard Setback: () Complies () Grandfathered () Too Small (Variance Required)
Rear Yard Setback: () Complies () Grandfathered () Too Small (Variance Required)
Impervious Surface: () Complies () Grandfathered () Exceeds Limits (Variance Required)
Building Height: () Complies () Grandfathered () Too high (Variance Needed)

Special Requirements / Conditions: (Required buffers, setbacks, etc.)

Other Permits / Approvals Required:

Approval Conditions (if necessary):

Checklist Completed By: _____ Date _____
Zoning Official

CITY OF VALLEY

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: _____

Other: _____ Other: _____

Other: _____ Other: _____

Other: _____ Other: _____