

Building Permit Application For the City of Heflin

,						
Location of proposed construction, excavation, use of land, moving or alteration:						
Address:						
Zoning District: Begin Construction:						
Owner of Property: Property Owner Telephone Number:						
Contractor or Construction Firm:						
Contractor Phone Number:						
City of Heflin BL#: State License#:						
Permit Type: ☐ New Construction ☐ Remodel ☐ Electrical ☐ Plumbing or Septic						
☐ HVAC ☐ Pool ☐ Fence ☐ Demolition ☐ Other						
Description of Work Being Done:						
Total Value of Construction: \$ (Does this price include Electric, Plumbing, & HVAC?)						
Permit Fee: \$ + Issuance Fee: \$10.00						
Total Cost: \$						
Application is hereby made for a Building Permit and a Certificate of Occupancy as required under the City of Heflin Building Code Ordinance #2015-04-14A and City of Heflin Zoning Ordinance. In making this application, the applicant declares all of the statements and attached maps and drawings submitted by the applicant are a true description of the proposed new or altered uses and/or buildings or structures. The applicant agrees that the permit applied for, if granted, is issued on the representation made herein, and that any						

Date: _____

permit issued may be revoked without notice on any breach of representations or conditions.

Signature:

City of Heflin Building Permit Sub-Contractor Schedule

A completed copy of this schedule must be presented to the building department within 15 days of the issuance of the building permit. Should the builder add any subcontractor to the project, the builder will submit the subcontractor's name, address, and phone number to the City within three working days of hiring. It is the contractor's responsibility to notify the building department of any changes from the original. ALL SUBCONTRACTORS MUST HAVE A CITY OF HEFLIN BUSINESS LICENSE BEFORE WORK IS COMMENCED.

Business License #	Type of Sub-Contractor	Name & Address	Phone Number
	Site Grading		
	Footings		
	Concrete		
	Septic Tank		
	Block/Brick		
	Other Masonry		
	Framer		
	Trim Work		
	Electrical		
	Plumbing		
	Roofer		
	Sheetrock		
	HVAC		
	Insulation		-
	Cabinets		
	Ceramic Tile		
	Paint/Wallpaper		
	Glass		
	Carpet/Vinyl/Hardwood		
	Landscaping		
	Garage Door		
	Alarm System		
	Siding/Gutters		
	Waterproofing		
	Termite Control		

City of Heflin Building Permit

Office Use Only

Date Received:	Time Received:		Received By:		
Permit Issued By:	Date:		Variance Required:		
Zoning Review (date):	_ Revie	wer:	□ Pass	□ Fail	
Zoning District:	Variar	nce Requested: \square Yes \square N	lo Date Request	ted:	
Variance Conditions:					
Planning Commission Required:	es □No	Flood Prevention: Special			
	☐ Floodplain Development Permit Attached (from State)				
☐ A set of plans & specifications including storm water management plan	☐ Plot Plan (showing location of dwelling & boundary lines				
☐ City Sewage or ☐ Health Department Perr	mit	☐ Heflin Water Board			
Notes:					
			<u></u>		