



City of Cordova
154 Main Street
Cordova, Alabama 35550
205-483-9266

Building Permit Application

Permits will not be issued until all fees are paid. No construction can begin until permit is issued.

Building Permit Number: _____

Type of Work:

<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Building
<input type="checkbox"/> Remodel	<input type="checkbox"/> Moving	<input type="checkbox"/> Foundation
<input type="checkbox"/> Temporary Structure	<input type="checkbox"/> Demolition	<input type="checkbox"/> Accessory Structure
<input type="checkbox"/> Modular Home*	<input type="checkbox"/> Fence	<input type="checkbox"/> Manufactured Home*

*Additional Information Required

Description of Work to be Performed/Scope of Work: _____

For new build or exterior remodel, please include, with attached documents, materials to be used

Property Owner:

Name: _____ Phone: _____

Address: _____

Email: _____

Property Location:

Address: _____

Parcel Number: _____ Current Zone: _____

Contractor Name/Address	Phone Number	State License/Certification Number	City License Number	Cost of Work to be Performed

Valuation is \$_____

I hereby certify that I have read this application and all information contained herein is true and correct. That I agree to comply with all City Ordinances and State Laws regulating construction and that I am the Property Owner or authorized to act as the Property Owner's agent for the herein described work, and Contractor acting as the Property Owner's Agent.

Signature

Date: _____

Building Characteristics:

_____ Residential _____ Commercial _____ Multi-Family

_____ Other: _____

Lot Size: _____ sq. ft. Lot Width: _____ Lot Length: _____

_____ Electric Heat _____ Gas Heat

Building Length: _____ Building Width: _____

_____ Plans Attached _____ Attached Garage _____ Accessory Structure

Planning Commission Use Only:

Date Received: _____ Date of Review by Commission: _____

Approved: _____ Denied: _____

Chairman, Planning Commission

Permit #: _____ Issued by: _____ Date: _____

Payment:

Received By: _____

Date: _____

_____ Cash _____ Check No. _____

Amount: _____

Application Fee: _____

Plan Review Fee Paid: _____

Inspection Fee Paid: _____

Issuance Fee Paid: _____