

PRINTED NAME_

Town of Shorter Building Department 2427 Old Federal Road Shorter, AL 36075 334-727-9190 phone 334-727-9298 fax

Demolition Permit Application

Permit No:		
Project:		

THIS IS AN APPLICATION <u>ONLY</u>. IT IS NOT AUTHORIZATION TO START ANY WORK. NO WORK SHALL START UNTIL A PERMIT IS POSTED ON THE JOB SITE

1 JOB/PROPERTY ADDRESS (STREET & NUMBER)		2 FLOOR/ROOM NO.			
3 CONTRACTOR NAME	4 LICENSE TYPE	5 STATE LICENSE NO.			
6 CONTRACTOR STREET ADDRESS	STATE	ZIP CODE			
7 CONTRACTOR TELEPHONE NO./ EMAIL ADDRESS		8 CONTRACTOR FAX NO.			
9 PROPERTY OWNER NAME	10 PROPERTY OWNER ADRES	S/ZIP			
11 PROPERTY OWNER TELEPHONE NO./EMAIL ADDRESS/FAX NO.					
12 DESCRIBE CURRENT STRUCTURE USE	13 DESCRIBE PROP	OSED STRUCTURE USE			
14 TOTAL VALUE OF CONTRACT INCLUDING MATERIAL, LABOR, SUBCONTRACTS OVERHEAD AND PROFIT					
15 DESCRIBE SCOPE OF WORK					
16 CONTACT PERSON	17 CONTACT PHONE NO.	18 CONTACT FAX NO.			
I HEREBY AFFIRM THAT UNDER THE PROVISIONS OF BUILDING CODE ORDINANCE OF THE TOWN OF SHORTER, I AM NOT SUBJECT TO LICENSURE AS A CONTRACTOR OR SUBCONTRACTOR. BY THIS AFFIDAVIT I ASSUME FULL RESPONSIBILITY FOR COMPLETION OF THE PROPOSED WORK IN ACCORDANCE WITH ALL BUILDING CODES AND LAW. I ALSO UNDERSTAND IT IS A VIOLATION OF STATE LAW TO KNOWINGLY HIRE AN UNLICENSED CONTRACTOR.					

_____SIGNATURE ______DATE_____