

BUILDING DEPARTMENT

4 Court Square • P O Box 552 • Alexander City, AL 35011-0552

GAINES HODNETT
City Building Official

Telephone:
(256) 329-6714
gaines.hodnett@alexandercityal.gov

KRISTEN POWELL
Administrative Assistant

Telephone:
(256) 329-6712
kristen.powell@alexandercityal.gov

PERMITTING GUIDELINES

(REVISED MARCH 25, 2013)

A **SITE PLAN** (SHOWING TO SCALE THE SIZE AND LOCATION OF THE NEW CONSTRUCTION AND EXISTING STRUCTURES ON THE SITE, WITH DISTANCES FROM LOT LINES, TO INCLUDE ALL UTILITIES AND EASEMENTS, AS WELL AS A SIGNATURE OF CONTRACTOR OR OWNER/BUILDER), AND ONE SET OF **BUILDING PLANS** SHALL BE SUBMITTED **24 HOURS** BEFORE A BUILDING PERMIT IS ISSUED.

ALEXANDER CITY HAS ADOPTED THE **2006 INTERNATIONAL BUILDING RESIDENTIAL**, PLUMBING, MECHANICAL, FUEL GAS AND PROPERTY MAINTENANCE CODE. THE **2005 NATIONAL ELECTRIC CODE** HAS BEEN ADOPTED.

A **CONTRACT** BETWEEN THE RESIDENTIAL CONTRACTOR AND THE HOME OWNER MUST BE PRESENTED WHEN THE JOB AMOUNT IS **OVER \$10,000**.

ALL CONTRACTORS MUST PRESENT PROOF OF **GENERAL LIABILITY INSURANCE POLICY** IN THE AMOUNT OF **\$100,000** WHEN THE CONTRACT AMOUNT EXCEEDS \$10,000 OR ANY PLUMBING, ELECTRICAL, OR MECHANICAL SHALL ALSO FILE PROOF. (**UNLESS** YOU ARE THE PROPERTY OWNER ACTING AS YOUR OWN CONTRACTOR IN WHICH CASE YOU MUST SIGN A WAIVE RIGHTS FORM AND ARE REQUIRED THAT THEY NOT SELL THE HOUSE FOR AT LEAST ONE YEAR) **SPECIAL NOTE:** A HOMEOWNER IS ALLOWED TO PULL AN ELECTRICAL OR PLUMBING PERMIT TO WORK ON HIS/HER OWN HOME AS LONG AS **HE/SHE** PERFORMS ALL THE WORK. IF A PERSON OTHER THAN THE HOMEOWNER PERFORMS THE ELECTRICAL OR PLUMBING TASK, THEY MUST POSSESS A CURRENT STATE AND CITY LICENSE IN THEIR AREA OF EXPERTISE. IF A PERSON, OTHER THAN THE HOMEOWNER IS OBSERVED PERFORMING ANY PLUMBING OR ELECTRICAL TASKS, THE BUILDING OFFICIAL OR HIS DESIGNEE WILL REVOKE THE PERMIT.

ALL CONTRACTORS OR SUBCONTRACTORS SHALL HAVE ANY **VEHICLES** LOCATED AT OR NEAR THE JOB WORKSITES **MARKED FOR EASY IDENTIFICATION** WITH LETTERING IN A T LEAST TWO-INCH SIZE. NAME ON VEHICLE SHALL BE SAME AS CURRENT LICENSE (ORDINANCE 2008-1).

ALL CONTRACTORS SHALL SUBMIT A **SUBCONTRACTORS LIST** BEFORE A PERMIT CAN BE ISSUED.

ALL RESIDENTIAL CONTRACTORS SHALL PRESENT THEIR **STATE OF ALABAMA** HOMEBUILDERS CARD IF JOB \$10,000 OR MORE.

ALL SUBCONTRACTORS SHALL PRESENT **STATE OF ALABAMA** PLUMBING/GAS FITTER OR ELECTRICAL OR MECHANICAL CARD.

ALL SUBCONTRACTORS SHALL PURCHASE THEIR OWN PERMITS.

ALL PERMITS ARE VALID FOR 6 (SIX) MONTHS. IF AN EXTENSION IS NEEDED, THE BUILDING OFFICIAL SHALL BE NOTIFIED IN WRITING.

THE ORANGE COPY OF THE PERMIT SHALL BE POSTED (VISIBLE TO THE STREET) UNTIL THE PROJECT IS COMPLETED.

ALL DECKS REQUIRING HANDRAILS SHALL BE PERMITTED AND INSPECTED.

A **SEPARATE CHECK** FOR A **CITY WATER CONNECTION** SHALL BE SUBMITTED AFTER COMPLETION OF A WATER APPLICATION.

SPECIAL NOTE ABOUT WATER:

(ALL CONNECTIONS, **2 INCH OR LARGER**, REQUIRE A DUAL CHECK BACKFLOW PREVENTER, CERTIFIED AND TESTED. A CERTIFIED COMPANY OR INDIVIDUAL MUST ADMINISTER THE TESTING AND THE RESULTS SUBMITTED TO THE CITY OF ALEXANDER CITY WATER DEPARTMENT ANNUALLY.)

ALL **NEW** CONSTRUCTION AND/OR WATER LINE REPLACEMENT SHALL HAVE A **SHUT-OFF VALVE** BETWEEN THE BUILDING OR HOME AND THE WATER METER.

A **SEPARATE CHECK** FOR A **CITY SEWER CONNECTION** SHALL BE SUBMITTED AFTER COMPLETION OF A SEWER APPLICATION. (IF NOT ON A SEPTIC TANK) *IF APPLICABLE*

A **CONTRACTOR/ HOMEOWNER** SHALL **CONTACT ALEXANDER CITY LIGHT AND POWER** AT (256) 409-2080 OR **ALABAMA POWER COMPANY** (724 COMMERCE DRIVE) CONCERNING THE LOCATION OF TEMPORARY AND PERMANENT ELECTRIC POWER.

CONTRACTOR/ HOMEOWNER IS **PROHIBITED** FROM CUTTING LOOSE WIRES AT THE WEATHERHEAD OR SEALS, (SEC. 21-8) CITY ORDINANCE. **ONLY CITY EMPLOYEES ARE ALLOWED** TO DISCONNECT OR CONNECT ANY METER IN THE CITY'S DISTRIBUTION SYSTEM. (CODE 1962-20-14).

A **SANITARY FACILITY** (PORTABLE TOILET) SHALL BE ON SITE BEFORE THE FIRST SCHEDULED INSPECTION.

ANY **MUD** IN THE STREET DURING CONSTRUCTION IS THE **RESPONSIBILITY OF THE CONTRACTOR**. IF THE MUD BECOMES A CONCERN, THE CITY WILL CLEAN IT UP AND BILL THE CONTRACTOR OR HOMEOWNER.

ANY DAMAGED SIDEWALKS CAUSED BY CONSTRUCTION TRAFFIC SHALL BE REPAIRED BY THE **CONTRACTOR**.

THE **CONTRACTOR**, FOR PROPER **SIZING OF DRIVEWAY** AND DRIVEWAY PIPING SHOULD CONTACT THE CITY ENGINEER AT (256) 409-2020.

BEFORE SCHEDULING THE FINAL INSPECTION, ALL **SUBCONTRACTORS** SHALL HAVE PURCHASED A **CITY LICENSE**.

UTILITIES WILL REMAIN IN THE **CONTRACTOR'S NAME** UNTIL THE CERTIFICATE OF OCCUPANCY IS ISSUED.

ANY CONTRACTOR OR INDIVIDUAL WITH ANY PAST DUE ACCOUNTS WITH THE CITY WILL BE DENIED ANY PERMIT UNTIL PAST DUE ACCOUNTS ARE **PAID IN FULL**.

ON NEW CONSTRUCTION, THE FOLLOWING **INSPECTIONS** SHOULD BE CALLED FOR BEFORE THE FINAL. ALL INSPECTIONS SHALL BE SCHEDULED THROUGH THE BUILDING DEPARTMENT OFFICE (256-329-6712).

A PROPERTY OWNER, ACTING AS HIS OWN CONTRACTOR SHALL BE PRESENT FOR INSPECTIONS BY THE BUILDING OFFICIAL.

1. **FOOTINGS**
2. **TEMPORARY POWER**
3. **PLUMBING UNDER SLAB**
4. **SLAB**
5. **FRAMING, PLUMBING, ELECTRICAL, MECHANICAL ROUGH IN (BEFORE INSULATION)**
6. **INSULATION**
7. **PERMANENT ELECTRICAL**
8. **FINAL INSPECTION- UNDER NO CIRCUMSTANCE WILL A NEW BUILDING BE OCCUPIED WITHOUT A CERTIFICATE OF OCCUPANCY**

IF A BUSINESS/COMMERCIAL
Addition or New

Required:

CITY OF ALEXANDER CITY BUSINESS LICENSE
GENERAL CONTRACTORS LICENSE FOR CONTRACTS
\$50,000 AND OVER
PROOF OF GENERAL LIABILITY INSURANCE

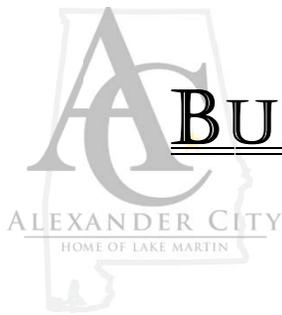
Required:

2 SETS OF PLANS IF BLDG. IS OVER 2,500 SQUARE
FEET
(2 site/outside civil) (2 sets of building plans)
(SIGNED BY ENGINEER/ARCHITECT IF BUILDING A
CHURCH, DAYCARE, SCHOOL OR RESTAURANT)

Required:

MUST SEE G.C. LICENSE
OF PLUMBER, ELECTRICIAN OR HEATING & AIR
CONTRACTOR
IF CONTRACT IS \$50,000 AND OVER
GENERAL LIABILITY INSURANCE REQUIRED

Sub GC CANNOT WORK UNDER OWNER/CONTRACTOR
(MUST also BE A GC NOT Sub)
Sub GC CAN WORK UNDER A HIRED GENERAL
CONTRACTOR



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REQUIREMENTS FOR LICENSING & PERMITTING NEW COMMERCIAL, ADDITIONS, OR REPAIRS

1. Contractors performing contract work over \$50,000.00 must comply with Title 34; Chapter 8; Section 1-22 Code of Alabama.
2. All contracted work, materials and labor in the amount of \$1,000.00 and over requires a permit. Electrical, Plumbing, & HVAC contractors must be State certified. All Companies delivering products must have City license. Common carriers are exempt from this requirement.
3. All building plans for new construction shall be submitted to the Building Department two (2) days before a building application is approved for permit issuance. Two (2) sets of plans are a requirement if the construction is over 2,500 square feet (2 civil) (2 sets of building plans). Signed by an engineer/architect as applicable. The Building Official will arrange a pre-construction meeting if requested by the owner/contractor or hired general contractor.
4. A City of Alexander City current Business License is required for hired General Contractors and ALL Subcontractors. (Plumbing, Electrical, Heating & Air subcontractors must present their State of Alabama G.C. License if contract work \$50,000.00 or higher when applying for a City Business License and/or Permitting a project.) **Special Note: Sub General Contractors cannot work under Owner/Contractor. ONLY General Contractors can work under a hired General Contractor**
5. All contractors must present proof of General Liability Insurance to the Building Department in the amount of \$100,000.00 before a permit is issued when the contract/permit amount is \$10,000.00 or higher. (Proof of insurance can be emailed to the building department administrative assistant at kristen.powell@alexandercityal.gov)
6. Mechanical/ HVAC service work does not require a mechanical permit; however, all other requirements do apply: State License, City Business License, General Liability Insurance.
7. All building expansions shall meet storm water and zoning requirements.
8. All required inspections shall be scheduled through the Building Department Administrative Assistant (phone number and email address listed above.) Required inspections are listed under "Building Department Guidelines." This can accessed through the Building Department's website at <http://www.alexandercityonline.com/building-general.html> or a hard copy can be obtained at the Alex City Building Department.
9. Also visit the Alexander City website for additional information: www.alexandercityonline.com

CHECKLIST FOR NEW BUSINESS/COMMERICAL

Address: _____

Owner: _____

General Contractors License
(If \$50,000 or higher)

Contractor: _____

Proof of General Liability Insurance

City Business License

2 Sets of Plans
(If over \$2500 sq ft)

Site/Civil

Building Plans

Permit Application

Copy of Contract

Subcontractors List

Water Application

On-Site Sewer Application Number

Sewer Application

Portable Toilet On-Site



Date (MM/DD/YR)

APPLICATION FOR PERMIT

PERMIT INFORMATION

PERMIT #: _____

ZONING CLASS: _____

JOB ADDRESS: _____

OCCUPANCY CLASS: _____

PERMIT TYPE:

- BUILDING COMMERCIAL
- BUILDING RESIDENTIAL
- ELECTRICAL
- PLUMBING # OF FIXTURES _____
- GAS FITTING
- MECHANICAL/ HVAC UNIT SZ _____
- ROOFING
- SWIMMING POOL SIGN
- FIRE ALARM INSTALL/ MAINTENANCE
- FIRE SPRINKLER SYSTEM INSTALL

IMPROVEMENT TYPE:

- NEW CONSTRUCTIONS
- ADDITION
- ALTERATION
- INSTALL DEMOLITION
- EQUIPMENT CHANGEOUT
- CHANGE OF CONTRACTOR
- OTHER _____
- REPAIR
- REPLACE

DESCRIPTION OF WORK: _____

DOLLAR VALUE OF JOB: \$ _____

CONTRACTOR INFORMATION

COMPANY NAME: _____ OWNER: _____

ADDRESS: _____

(Street)

(City)

(ST)

(Zip)

PHONE: _____

OWNER INFORMATION

OWNER (S) NAME (S): _____

ADDRESS: _____

(Street)

(City)

(ST)

(Zip)

OWNER (S) PHONE: HOME _____ MOBILE _____ WORK _____

Building Inspector

Applicant Signature

Print



THE CITY OF ALEXANDER CITY

Application for Water Service

Overview of Process

Section I and II of the attached “Application for Water Service” must be completed by the applicant and submitted to the Building Official. The Building Official will review the application to ensure that all necessary information has been provided. The Building Official will then forward the application to the Water Department. The Water Superintendent may contact the applicant for an on-site meeting with the applicant to evaluate the logistical feasibility of obtaining water service. Once the area of requested service is evaluated, the Water Superintendent will complete Section III either *approve*, *approve with special provisions*, or *deny* the application. The application is returned Building Department for further *approval*, *approval with special provisions*, or *denial* in Section VI. The entire process should take no longer than five (5) working days; however, every effort will be made by the City to expedite the process. If the service is approved, the water tap fee can be paid by the applicant at that time.

Building Department

City Building Official (256) 329-6714
Gaines Hodnett gaines.hodnett@alexandercityal.gov

Administrative Assistant (256) 329-6712
Kristen Powell kristen.powell@alexandercityal.gov

Water Department

Department Contact (256) 409-2030
Eddie Futral eddie.futral@alexandercityal.gov

Administrative Assistant (256) 409-2030
Leslie Gaston leslie.gaston@alexandercityal.gov

Instructions for Completing Application

The applicant must complete all of Section I and Section II of the application. *Section II of the application must be notarized if returned by mailed to ensure applicant verification.* Be sure to include all possible contact telephone numbers to ensure that the departments are able to make contact in a timely manner. The applicant’s signature is required. The applicant will need to obtain a wooden stake from the Building Department to indicate the desired location of the water tap.

Cost

Payment for the total meter connection and the utility service deposit amount should be collected as two *separate* payments upon application submittal. Checks should be made payable to the City of Alexander City.

	Improvement Fee	Connect Charge 1”Meter	Total 1” Meter
Inside City Limits	\$927	\$300	\$1227
Outside City Limits	\$927	\$460	\$1387

Move Meter

Irrigation Tap

Utility Service Deposit

**** Please note that by signing this application, the applicant is in full consent of contacting the Alexander City Utility Department by calling (256) 329-6707 in regards to additional utility deposits required for utility services****

Application for Water Service
City of Alexander City

SECTION I: Applicant

Name of Applicant: _____ Date: _____

Billing Address: _____

Location of Service: _____
(E-911 Address) _____

Health Department On- Site Sewage Application Number (attach copy): _____

Name of Subdivision: _____ Lot #: _____

Plat Book: _____ Square Footage: _____

Applicant Contact Information:

Home: _____ Cell: _____ Office: _____

Email: _____ Other: _____

Service Size of Meter

Please select from the following options to specify service request:

- | | |
|--|--------------------------------|
| <input type="checkbox"/> New Service | <input type="checkbox"/> 1" |
| <input type="checkbox"/> Inside City Limits | <input type="checkbox"/> 2" |
| <input type="checkbox"/> Outside City Limits | <input type="checkbox"/> Other |
| <input type="checkbox"/> Move Meter | |
| <input type="checkbox"/> Locate Existing | |
| <input type="checkbox"/> Irrigation Tap | |

****For 2" or larger meter service requests only: (Inside and Outside City Limits)****

I understand that I am responsible for the installation and annual testing of the required backflow preventer.

(Signature)

(Date)



(Applicant's Signature)

(Date)

By signing this application, the applicant is in full consent of contacting the Alexander City Utility Department by calling (256) 329-6707 in regards to additional utility ~~8 of 19~~ required for utility services



CITY OF ALEXANDER CITY

P. O BOX 552 • Alexander City • Alabama 35011-0552
Telephone (256) 329-6700

CHARLES R. SHAW, SR.
Mayor
HARRIETT SCOTT
City Clerk
STEVE HAYS
Finance Director

CITY COUNCIL
Robert Howard
Council President
James D. Spann
President Pro Tempore
Bobby L. Tapley
Sherry M. Ellison– Simpson
Billy Ray Wall
Thomas A. Goss

DATE: _____

SECTION II: UTILITY SERVICE ACCOUNT APPLICATION

The Utility service at any address is placed in the name of ONE (1) individual only. The individuals in whose name the account will appear should fill out this entire form with reference to themselves. All data supplied must be from and relate to the indicated individual.

CUSTOMER NAME (please print): _____

SERVICE ADDRESS: _____

BILLING ADDRESS: _____

What day after receipt of deposit do you want the service to begin? _____

What is your driver's license number? _____ State: _____

What is your Social Security Number (required)? _____

Have you ever had utility services with the City of Alexander City before? _____

If so please list the date of services and the address (use back if necessary): _____

Spouse's name (include maiden name): _____

Has your spouse ever had services with the City of Alexander City? _____

If so please list the date of services and the address (use back if necessary): _____

The account number at the above service address is: _____

The DEPOSIT for the above account will be \$: _____

If you live inside the city limits, there is a \$16.00 **non-refundable** charge for garbage service. This charge must be sent in BEFORE utility service can be established.

- Accounts are due when the bill is received and become delinquent after 10 days. Accounts more than 20 days delinquent are subject to being disconnected. Disconnected service will be reconnected for a \$75.00 fee per utility service disconnected. As required by ALABAMA LAW, service WILL NOT BE provided to a person who has an unpaid bill with the utility department OR to a member of that persons family.
- Utility service will not be provided until the *CUSTOMER AGENT INITIATED SHEET* is completely filled out as requested and returned to the Utility Department, and the deposit amount is receipted into the Utility Department records.

****I have read the above information ad I do understand what I have read. I do affirm that the information which I have supplied is true and accurate. In addition, I do agree to accept and conform to ALL Municipal Ordinances that apply to the utility service (section 21-1).****

Application for Water Service
City of Alexander City

<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	<input type="checkbox"/> 1"
<input type="checkbox"/> New Service	<input type="checkbox"/> Move Meter	<input type="checkbox"/> 2"
<input type="checkbox"/> Locate Existing	<input type="checkbox"/> Irrigation Tap	<input type="checkbox"/> Other

SECTION III: Water Department

Date Received: _____

Based on review of the information provided by the applicant in Section I and knowledge of the distribution system in this area, the water tap is:

APPROVED

APPROVED WITH SPECIAL PROVISIONS
(Listed Below)

DENIED

Provisions/ Comments: _____

(Water Department Signature)

(Date)

SECTION IV: Building Department

Date Received: _____

Based on review of the information provided by the applicant in Section I and the Water Department in Section II, the water tap is:

APPROVED

APPROVED WITH SPECIAL PROVISIONS
(Listed Below)

DENIED

Provisions/ Comments: _____

(Building Official's Signature)

(Date)



THE CITY OF ALEXANDER CITY

Application for Sewer Service

Overview of Process

Section I of the attached “Application for Sewer Service” must be completed by the applicant and submitted to the Building Official. The Building Official will review the application to ensure that all necessary information has been provided. The Building Official will then forward the application to the Sewer Maintenance Department. The Sewer Superintendent may contact the applicant for an on-site meeting with the applicant to evaluate the logistical feasibility of obtaining sewer service. If needed, for consideration of feasibility, the applicant must be able to provide the Sewer Superintendent with an estimate of the finish floor elevation. The Sewer Superintendent will then complete Section II and forward the application to the City Engineer for final review. The City Engineer will complete Section III either *approve*, *approve with special provisions*, or *deny* the application. The entire process should take no longer than five (5) working days; however, every effort will be made by the City to expedite the process. If the service is approved, the sewer tap fee can be paid by the applicant at that time.

Building Department

City Building Official (256) 329-6714
Gaines Hodnett gaines.hodnett@alexandercityal.gov

Administrative Assistant (256) 329-6712
Kristen Powell kristen.powell@alexandercityal.gov

Public Works

City Engineer (256) 409-2020
Gerard Brewer gerard.brewer@alexandercityal.gov

Sewer Superintendent (256) 409-2000
Mike Waldrop mike.waldrop@alexandercityal.gov

Instructions for Completing Application

The applicant must complete all of Section I of the application. Be sure to include all possible contact telephone numbers to ensure that the Sewer Superintendent is able to make contact in a timely manner. The applicant’s signature is required.

A designated blank area is provided in Section I. Use this space to provide a detailed site plan (hand-drawn) that specifies all pertinent information about the site such as the road, structure, lot lines, driveway, right-of-way, ditches, storm inlets, culverts, existing sewer line, large trees or other obstructions, and any other information that might affect the sewer service line. Please note that the hand-drawn site plan does not have to be to scale.

Application for Sewer Service
City of Alexander City

SECTION I: Applicant/ Building Department

Name of Applicant: _____ Date: _____

Street Address/ Location for Structure: _____

Applicant Contact Information:

Home: _____ Cell: _____ Office: _____

Email: _____ Other: _____

.....
Hand-drawn site plan of proposed sewer: (please provide all pertinent information, including property lines, nearest existing sewer, roads, right of way, other utilities, any needed easements, location of structure, etc.)
See attached Instructions or call any of the listed contacts with questions.

.....
By signing this application, the applicant is in full consent of contacting the Alexander City Utility Department by calling (256) 329-6707 in regards to additional utility deposits required for utility services

(Applicant's Signature)

(Date)

(Building Official's Signature)

(Date)

Application for Sewer Service
City of Alexander City

SECTION II: Sewer Maintenance Department

Date Received: _____

Evaluation		
Based on estimated finish floor elevation provided by the applicant, will gravity sewer meet minimum slope requirements of the City policy?	YES	NO
Based on estimated finish floor elevation provided by the applicant, will the City require a pressure-relief apparatus and the associated liability release form?	YES	NO
Will any pumps or other special equipment be required?	YES	NO
Are any private easements required?	YES	NO

(Sewer Maintenance Superintendent's Signature)

(Date)

SECTION III: City Engineering Department

Date Received: _____

Based on review of the information provided on this application of the Applicant and the Sewer Maintenance Department, the sewer tap is:

APPROVED

APPROVED WITH SPECIAL PROVISIONS
(Listed Below)

DENIED

Provisions/ Comments: _____

(City Engineer's Signature)

(Date)

CITY OF ALEXANDER CITY BUILDING DEPARTMENT

4 COURT SQUARE • P. O. BOX 552 • ALEXANDER CITY, AL 35011-0552 • (256) 329-6712



(Please Print)

E-911 ADDRESS: _____

CONTRACTOR'S NAME: _____

PHONE #: _____

CELL #: _____

LOT NUMBER: _____

PERMIT NUMBER: _____

All subcontractors working on this job site should be listed on the attached sheets. It will also be your responsibility to notify the Building Department in the event that any changes are made before the completion of this project.

This list must be presented to the Building Department for review FIVE (5) DAYS prior to a final inspection. Any subcontractor doing work on this job should be listed below. It will be your responsibility to notify the Building Department of any changes in contractors or subcontractors before completion of this project. Until all subcontractors have been licensed by the City of Alexander City you WILL NOT be allowed to get your permanent power, or Certificate of Occupancy.

SIGNATURE:

I HEARBY CERTIFY that I have read this subcontractors list and that all information herein is true and correct. I agree and comply with all City Ordinances. I am the owner or am an authorized person sanctioned to act as the owner's agent.

Name of Company _____

Signature _____

Owner or Authorized Agent

Date

CITY OF ALEXANDER CITY BUILDING DEPARTMENT

4 COURT SQUARE • P. O. BOX 552 • ALEXANDER CITY, AL 35011-0552 • (256) 329-6712

SubContractors List

CONTRACTOR: _____

ADDRESS: _____

A list of all subcontractors must be furnished to the Building Department prior to a final inspection.

(PLEASE PRINT OR TYPE YOUR CURRENT SUB-CONTRACTORS LIST)

X	TYPE WORK	CONTRACTOR'S NAME	ADDRESS	Phone No.
<input type="checkbox"/>	FRAMER			
<input type="checkbox"/>	CONCRETE FINISHERS			
<input type="checkbox"/>	LAYOUT/ FOOTINGS			
<input type="checkbox"/>	BRICK,BLOCK MASONRY			
<input type="checkbox"/>	PLUMBER / GAS FITTER			
<input type="checkbox"/>	GRADING EXCAVATING			
<input type="checkbox"/>	ELECTICIAN			
<input type="checkbox"/>	HEATING/AIR			
<input type="checkbox"/>	ROOFER			
<input type="checkbox"/>	CABINETS/ COUNTERTOPS			
<input type="checkbox"/>	TRIM CARPENTER			
<input type="checkbox"/>	VINYL SIDINGS/ SIDING			
<input type="checkbox"/>	FLOORING			
<input type="checkbox"/>	CARPET/VINYL FLOORING			

<input type="checkbox"/>	CERAMIC TILE			
<input type="checkbox"/>	PAINTER			
<input type="checkbox"/>	SHEETROCK			
<input type="checkbox"/>	LANDSCAPING			
<input type="checkbox"/>	POOL			
<input type="checkbox"/>	FENCING			
<input type="checkbox"/>	FIREPLACE			
<input type="checkbox"/>	TERMITE PROTECTION			
<input type="checkbox"/>	PORT-A-LET			
<input type="checkbox"/>	WALLPAPER HANGING			
<input type="checkbox"/>	CLOSET/SHELVING			
<input type="checkbox"/>	INSULATION			
<input type="checkbox"/>	OUTSIDE UTILITIES			
<input type="checkbox"/>	CONCRETE WALLS			
<input type="checkbox"/>	GUTTERS			
<input type="checkbox"/>	WATERPROOFING			
<input type="checkbox"/>	ALARM SYSTEMS			
<input type="checkbox"/>	ASPHALT			
<input type="checkbox"/>	SEPTIC TANKS			
<input type="checkbox"/>	HOOD SYSTEMS			

**EXTINGUISHING
SYSTEM**

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**FIRE SPRINKLER
SYSTEM**

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OTHER:

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OTHER:

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MATERIAL SUPPLIES DELIVERED

PLEASE PRINT OR TYPE YOUR CURRENT SUB-CONTRACTORS LIST

X	TYPE WORK	SUPPLIER'S NAME	ADDRESS	PHONE NO.
<input type="checkbox"/>	ACOUSTICAL CEILING			
<input type="checkbox"/>	BRICK			
<input type="checkbox"/>	CARPET			
<input type="checkbox"/>	CONCRETE			
<input type="checkbox"/>	CONCRETE BLOCK			
<input type="checkbox"/>	DECKING LUMBER			
<input type="checkbox"/>	DOORS			
<input type="checkbox"/>	DRIV-IT			
<input type="checkbox"/>	FIREPLACE			
<input type="checkbox"/>	FLOOR TILE			
<input type="checkbox"/>	GAS LOGS			
<input type="checkbox"/>	GRAVEL			
<input type="checkbox"/>	LIGHT FIXTURES			
<input type="checkbox"/>	MARBLE			
<input type="checkbox"/>	MIRRORS			
<input type="checkbox"/>	APPLIANCES			
<input type="checkbox"/>	SAND			

<input type="checkbox"/>	SHEET METAL			
<input type="checkbox"/>	SIDING			
<input type="checkbox"/>	SOD GRASS			
<input type="checkbox"/>	STEEL			
<input type="checkbox"/>	STONE			
<input type="checkbox"/>	TRIM LUMBER			
<input type="checkbox"/>	TUB SHOWER			
<input type="checkbox"/>	TUB SHOWER ENCLOS.			
<input type="checkbox"/>	VINYL SIDING			
<input type="checkbox"/>	WINDOWS			
<input type="checkbox"/>	OTHER:			
<input type="checkbox"/>	OTHER:			
<input type="checkbox"/>	OTHER:			
<input type="checkbox"/>	OTHER:			
<input type="checkbox"/>	OTHER:			
<input type="checkbox"/>	OTHER:			