



DATE: \_\_\_\_\_ PERMIT NO.: \_\_\_\_\_ ZONED: \_\_\_\_\_

**OWNER INFORMATION – \*ALL INFORMATION BELOW IS REQUIRED**

PROJECT ADDRESS: \_\_\_\_\_  
 PPIN#: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ LOT #: \_\_\_\_\_ PHASE / BLOCK #: \_\_\_\_\_  
 OWNER NAME: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**CONTRACTOR/CONTACT INFORMATION**

TRADE TYPE:  Building  Electrical  HVAC  Plumbing  Other: \_\_\_\_\_  
 LEGAL BUSINESS NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 CONTACT NAME (If different than above): \_\_\_\_\_ TITLE: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 DAPHNE BUSINESS LICENSE #: \_\_\_\_\_ GEN. CONTRACT. LICENSE #: \_\_\_\_\_  
 HOME BUILDER'S OR STATE TRADE LICENSE #: \_\_\_\_\_

**PLAN INFORMATION**

PLANS DRAWN BY:  Architect  Designer  Other: \_\_\_\_\_  
 NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_

**PERMIT APPLICATION TYPE**

TYPE OF DEVELOPMENT:  New Building  Shell Building  Addition  Alteration/Repair  Tenant Build-Out  
 CLASS OF BUILDING:  Commercial  Residential  Multi-Family

**COSTS:**

|                        |          |
|------------------------|----------|
| Building Valuation     | \$ _____ |
| Permit Fee             | \$ _____ |
| Plan Review Fee        | \$ _____ |
| Land Disturbance/CBMPP | \$ _____ |
| Construction Trailer   | \$ _____ |
| TOTAL DUE**            | \$ _____ |

\*\*All payments must be made payable to the "City of Daphne"





CITY OF DAPHNE  
 BUILDING INSPECTION DEPARTMENT  
 BUILDING PERMIT APPLICATION SUBMITTAL CHECKLIST



DATE: \_\_\_\_\_ PERMIT NO.: \_\_\_\_\_ TYPE: \_\_\_\_\_  
 HEATED/COOLED SQ. FT.: \_\_\_\_\_ NON HEATED/COOLED SQ. FT.: \_\_\_\_\_

**OWNER INFORMATION**

PROJECT ADDRESS: \_\_\_\_\_  
 SUBDIVISION: \_\_\_\_\_ LOT #: \_\_\_\_\_ UNIT #: \_\_\_\_\_  
 CONTRACTOR: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_  
 CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**BUILDING PERMIT APPLICATION REQUIRED FORMS CHECKLIST**

| SUBMITTED<br>(CHECK HERE) | FORM NAME   | FOR CITY USE ONLY<br>RECEIVED BY/DATE |
|---------------------------|---|---------------------------------------|
|                           | Business License Review – License #:                |                                       |
|                           | Engineered Plans – 2 Sets                           |                                       |
|                           | Truss Specifications                                |                                       |
|                           | Plot Plan   |                                       |
|                           | CBMPP   |                                       |
|                           | ADEM Permit (if applicable)                         |                                       |
|                           | Subcontractor List                                  |                                       |
|                           | Sewer & Water Tap Payment                           |                                       |
|                           | Site Disturbance Permit for <i>Commercial Sites</i> |                                       |
|                           | Other   |                                       |
|                           | <b>Confirm Application Complete</b>                 |                                       |

Rev. 11-01-2019