



# City of Bay Minette

## General Land Use & Building Permit

Received: _____
Completed: _____
<input type="checkbox"/> City Limits <input type="checkbox"/> Police Jurisdiction

301 D'Olive Street · Bay Minette, Alabama 36507 · Phone (251) 580-1610  
COBM\_Planning@cityofbayminetteal.gov      Building\_Official@cityofbayminetteal.gov

**OWNER & SITE INFORMATION** – Property Address: \_\_\_\_\_

PPIN: \_\_\_\_\_ Lot/Parcel Size: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_

**CONTRACTOR & APPLICATION CONTACT INFORMATION** – *\*If not the property owner, an Agent Authorization Form is required.*

**Trade Type:**    Building    Electrical    HVAC    Plumbing    Other: \_\_\_\_\_

Legal Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name (if different than above): \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

City of Bay Minette Business License #: \_\_\_\_\_ General Contractors License #: \_\_\_\_\_

Home Builder's or State Trade License #: \_\_\_\_\_

<p align="center"><b><u>PERMIT TYPE</u></b></p> <p><input type="checkbox"/> Building   <input type="checkbox"/> Electrical   <input type="checkbox"/> Mechanical  <input type="checkbox"/> Plumbing → Gas Piping Installer <i>if applicable</i>: _____</p>	<p align="center"><b><u>TYPE OF CONSTRUCTION</u></b></p> <p><input type="checkbox"/> New Construction   <input type="checkbox"/> Addition/Expansion   <input type="checkbox"/> Renovation / Alteration / Repair  <input type="checkbox"/> Accessory Bldg → <input type="checkbox"/> Attached   <input type="checkbox"/> Detached   <input type="checkbox"/> Pre-Fab / Constructed Off-Site  <input type="checkbox"/> Reroof   <input type="checkbox"/> Temp Pole   <input type="checkbox"/> Temporary Office/ Job Site / Construction Trailer**  <input type="checkbox"/> Mobile Home** → <input type="checkbox"/> New**   <input type="checkbox"/> Replacement**   <input type="checkbox"/> Relocation**  <input type="checkbox"/> Temp Office Trailer- Installation/Removal Dates: _____  <input type="checkbox"/> Other: _____  <i>**Requires a Building &amp; Electrical Permit</i></p>
<p align="center"><b><u>BUILDING CLASSIFICATION</u></b></p> <p><input type="checkbox"/> Commercial                      <input type="checkbox"/> Industrial  <input type="checkbox"/> Residential → <input type="checkbox"/> Single Family     <input type="checkbox"/> Two-Family/Duplex  <input type="checkbox"/> Multi-Family - Unit # _____</p>	<p align="center"><b><u>OCCUPANCY / USE</u></b></p> <p>Occupancy Classification Options: Assembly, Business/Office, Education, Factory/Industrial, Hazardous, Institutional, Mercantile/Retail, Residential, Storage, Utility/Miscellaneous  Current Occupancy Classification: _____  Proposed Occupancy Classification: _____  Specific Use Detail: _____</p>
<p align="center"><b><u>VALUATION</u></b></p> <p>Valuation of Work (Labor &amp; Materials):  \$ _____  Heated/Cooled Sq. Ft: _____  Non-Heated/Cooled Sq Ft: _____  # of Stories: _____ Height: _____</p>	

Detailed Description of Scope of Work: \_\_\_\_\_

**SITE CONDITIONS**

Site/Plot Plan - Required for all permits except reroofs. Must be drawn to scale and include footprints of all existing and proposed structures with dimensions and setbacks (the distance from all property lines and other structures on the property)

No Existing Structures on Site

List all existing permanent structures on the site and their size, including residences and accessory structures, if applicable

#1: \_\_\_\_\_ Sq Feet: \_\_\_\_\_ #4: \_\_\_\_\_ Sq Feet: \_\_\_\_\_

#2: \_\_\_\_\_ Sq Feet: \_\_\_\_\_ #5: \_\_\_\_\_ Sq Feet: \_\_\_\_\_

#3: \_\_\_\_\_ Sq Feet: \_\_\_\_\_ #6: \_\_\_\_\_ Sq Feet: \_\_\_\_\_

**UTILITY SERVICES**

Power Provider: \_\_\_\_\_ Garbage Service Provider: \_\_\_\_\_

Well or  Water Provider: \_\_\_\_\_  Septic or  Sewer Provider: \_\_\_\_\_

Propane or  Natural Gas Gas Service Provider: \_\_\_\_\_

**DRIVEWAY / ACCESS / CULVERT**

Roadway Access Authority:  City  Baldwin County Highway Dept\*  Alabama Dept of Transportation (ALDOT)\*

\*Access Confirmation is required for New Dwelling or Non-Residential Construction, or new access/driveway proposed

City Culvert Needed:  No  Unsure  Yes  E-911 Address Verification – required for all permits in the police jurisdiction

Application is hereby made for a permit to erect/alter a structure as described herein or shown in accompanying plans and specifications, which structure is to be located as shown on the accompanying plot plan. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact or expression of material fact, either with or without intention on the part of this applicant, such as might, or would, operate to cause a refusal of this application, or any material alteration or change in the accompanying plans, specifications or structure made subsequent to the issuance of a permit in accordance with this application, without the approval of the City Planner and/or Building Official, shall constitute sufficient grounds for the revocation of such permit. Please note that the City of Bay Minette does not review or determine whether this application is in compliance with any covenant(s) or deed restriction(s).

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**INTERNAL USE ONLY**

<b><u>FEES &amp; PAYMENT DETAILS</u></b>	
\$ _____	Application
\$ _____	Plan Review
\$ _____	CICT
\$ _____	Land Use
\$ _____	Building
\$ _____	Electrical
\$ _____	Plumbing
\$ _____	Mechanical
\$ _____	Life Safety
\$ _____	Violation Fine
\$ _____	<b>TOTAL DUE</b>
<input type="checkbox"/> Cash	<input type="checkbox"/> Card* 3.99% Fee
<input type="checkbox"/> Check #: _____	
Date Paid: _____	

LU- \_\_\_\_\_ BP- \_\_\_\_\_ E- \_\_\_\_\_ P- \_\_\_\_\_  
M- \_\_\_\_\_ CE- \_\_\_\_\_ SWO- \_\_\_\_\_ A- \_\_\_\_\_

City Zone: \_\_\_\_\_ Police Juris. – BCC Zone: \_\_\_\_\_ FEMA Flood: \_\_\_\_\_

Potential Wetlands  Address Verified or  Needs Correction/Assignment: \_\_\_\_\_

**ZONING REVIEW - Signature: \_\_\_\_\_ Review Date: \_\_\_\_\_**

Approved  Approved w/ Conditions  Denied \_\_\_\_\_

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**BUILDING REVIEW - Signature: \_\_\_\_\_ Review Date: \_\_\_\_\_**

Approved  Approved w/ Conditions  Denied \_\_\_\_\_