

JOB ADD. _____

APPLICATION FOR BUILDING PERMIT

CITY OF ALLIANCE
504 E. Main St., Alliance, OH 44601
Phone 330-823-5122

PERMIT FEE _____

DATE _____

ESTIMATED VALUE _____

OWNER _____

ADDRESS _____

CITY & ZIP _____

PHONE # _____ CELL # _____

CONTRACTOR _____

ADDRESS _____

CITY & ZIP _____

PHONE # _____ CELL # _____

BUILDING/STRUCTURE

NEW CASH

ADDITION CHECK _____

ALTERATION, REPAIR

OTHER

APPLICATION FEE _____

PERMIT FEE _____

SUBTOTAL _____

1% STATE FEE _____

TOTAL FEE _____

I hereby certify the above information to be true and correct under penalty of law.

SIGNED _____ DATE _____

OWNER CONTRACTOR AGENT

SPECIAL INSTRUCTIONS, COMMENTS, CONTINGENCIES

TOTAL _____ sq. ft. x _____ = _____

Permit Fee