

Architect: Name: _____
 Address: _____

 Email: _____
 Phones:
 Daytime: () _____ - _____
 Cell: () _____ - _____
 Fax: () _____ - _____

Applicant's Agent:
 (attach original of
 Designation form) Name: _____
 Address: _____

 Email: _____
 Phones:
 Daytime: () _____ - _____
 Cell: () _____ - _____
 Fax: () _____ - _____

I, the undersigned, hereby make application for Development Review before the Planning Commission of the City of Jacksonville, Alabama, for the proposed development described above and in the site plans and other documents submitted herewith.

I hereby certify that I have personally reviewed the documents herewith submitted, have compared those documents against the items listed on the Checklist for Development Review attached hereto, have initialed each and every item on said Checklist, and each such item has been considered and, if applicable, shown on the submitted documents. I realize that the Checklist does not necessarily list each and every item needed for proper review and that the Planning Commission may require further items and/or information prior to approval.

I further acknowledge that I have been informed that, should the submitted documents fail to provide the necessary information for proper review of the development, this application for Development Review will be deemed incomplete and will not be submitted to the Planning Commission until such time as such deficiencies are cured. Failure to cure such deficiencies prior to any submission deadline for any Planning Commission meeting will result in the application not being placed on the agenda for that meeting.

 Type or Print Applicant's Name

Dated: ____/____/____

By: _____
 Signature

- () Applicant Owner () Applicant/Developer
- () Designated Agent/Contact Person of Applicant
 (attach original of Designation Form)

**DESIGNATION OF APPLICANT'S
AGENT/CONTACT PERSON
FOR DEVELOPMENT REVIEW
BEFORE THE PLANNING COMMISSION OF
THE CITY OF JACKSONVILLE, ALABAMA**

(Name of Development)

STATE OF ALABAMA
COUNTY OF CALHOUN

KNOW ALL MEN BY THESE PRESENTS, that on this _____ day of _____, _____, I/We, _____, the undersigned, do by this instrument make, constitute, appoint, and designate _____ as my/our true and lawful Agent/Contact Person for all proceedings relating to the Development Review of the proposed development herewith submitted to the Planning Commission of the City of Jacksonville, for and during the period such review is pending or until earlier revoked by written notice to said Planning Commission.

Said Agent/Contact Person is hereby authorized to act on behalf of Applicant in all matters and aspects of the review process, GIVING AND GRANTING, unto said Agent/Contact Person full power and authority to do and perform every act, deed, matter and thing necessary, desirable and expedient, to accomplish the foregoing specified purpose and ratifying and conforming all acts and purposes lawfully done pursuant to the authority herein above referred.

Witness

Applicant

Witness

Applicant

Witness

Applicant

Witness

Applicant

**CHECKLIST FOR DEVELOPMENT REVIEW
BEFORE THE PLANNING COMMISSION OF
THE CITY OF JACKSONVILLE, ALABAMA**

(Name of Development)

By initialing each of the following items, the Applicant certifies that Application for Development Review herewith submitted includes, at the minimum, the following:

- _____ 1. A completed Building Permit Application.
- _____ 2. Six (6) full-size site plans (sheets 1-7 below) and building elevations (front, side and rear) along with one (1) 11" x 17" copy of the site plans (sheets 1-7 below) and building elevations (front side, and rear).
- _____ 3. Two (2) full set of building plans (including interior and exterior construction details and sheets 1-7 below) for Building Permit application purposes.
- _____ 4. One (1) full set of building and site plans in Adobe PDF format.
- _____ 5. Transmittal letter including the following:
 - _____ a. a brief description of the proposed development
 - _____ b. the names, addresses, phone numbers, and other pertinent information for:
 - _____ 1) the property owner(s)
 - _____ 2) the developer(s)
 - _____ 3) the engineer (if none, so indicate)
 - _____ 4) the architect (if none, so indicate)
 - _____ 5) the applicant's designated agent/contact person (only one)
- _____ 6. Designation, on a form to be provided by the City, of applicant's agent/contact person specifically authorizing said person to act on behalf of applicant in all aspects of the Development Review process.

The site plans shall be drawn on a sheet size of 24" x 36" and at a scale of 1" = 20'. The sheet size and scale may vary if pre-approved by the City Planning Department. Elevations Shall be at a stated datum, not assumed datum..

The site plans shall be arranged as follows to provide clarity and allow the Planning Commission to readily interpret the scope and intent of the project submitted:

Sheet 1 Existing Conditions: (to include the following information)

- _____ A) Scale
- _____ B) North arrow
- _____ C) Boundary lines with bearings and distances
- _____ D) Topography to 50' beyond boundary (1' intervals) with spot elevation along edge of adjacent streets
- _____ E) Denote limits of 100 year flood plain, flood zone designation, flood elevation and FIRM map panel number
- _____ F) Natural and manmade drainage features (pipes, culverts, ditches, swales, etc.) to remain
- _____ G) Structures with finish floor elevations and adjacent structures within 50' of boundary
- _____ H) Streets and parking areas (with striping)
- _____ I) Zoning and current use of subject property and adjacent properties
- _____ J) Utilities (i.e. water, sewer, gas, telephone, cable, storm sewer, etc.) with size and material type
- _____ K) Easements with recording information
- _____ L) Driveways on adjacent properties within 150'
- _____ M) Distance to nearest fire hydrant(s)
- _____ N) Utility names and contact information
- _____ O) Deed references (subject property and adjacent properties)
- _____ P) Building setbacks

Sheet 2 Demolition Plan: (to include the following information)

- _____ A) Scale
- _____ B) North arrow
- _____ C) Boundary lines with bearings and distances
- _____ D) Existing natural and manmade drainage features (pipes, culverts, ditches, swales, etc.) to remain.
- _____ E) Existing structures/features to remain.
- _____ F) Existing streets and parking areas (with striping) to remain.
- _____ G) Existing utilities (i.e. water, sewer, gas, telephone, cable, storm sewer, etc.) with size and material type to remain.
- _____ H) Easements
- _____ I) Delineate existing structures/features to be demolished and removed from the site.
- _____ J) Delineate existing utilities to be abandoned, removed or relocated.

Sheet 3 Site Layout Plan: (to include the following information)

- _____ A) Scale
- _____ B) North arrow
- _____ C) Boundary lines with bearings and distances
- _____ D) Denote limits of 100 year flood plain, flood zone designation, flood elevation and FIRM map panel number
- _____ E) Existing structures/features to remain
- _____ F) Existing streets and parking areas (with striping) to remain.
- _____ G) Building setbacks
- _____ H) Existing and proposed streets and parking areas (with striping)
- _____ I) Existing and proposed utilities (i.e. water, sewer, gas, telephone, cable, storm sewer, etc.) with size and material type.
- _____ J) Existing and proposed easements with recording information.
- _____ K) Driveways on adjacent properties within 150'.
- _____ L) Proposed structures/features with dimensions, square footage and distance to boundary lines.

Sheet 4 Grading, Drainage and Utility Plan: (to include the following information)

- _____ A) Scale
- _____ B) North arrow
- _____ C) Boundary lines with bearings and distances
- _____ D) Topography to 50' beyond boundary (1' intervals) with spot elevation along edge of adjacent streets
- _____ E) Denote limits of 100 year flood plain, flood zone designation, flood elevation and FIRM map panel number
- _____ F) Existing natural and manmade drainage features (pipes, culverts, ditches, swales, etc.) to remain
- _____ G) Existing structures/features to remain
- _____ H) Existing and proposed streets and parking areas (with striping)
- _____ I) Existing and proposed utilities (i.e. water, sewer, gas, telephone, cable, storm sewer, etc.) with size and material type.
- _____ J) Existing and proposed easements with recording information.
- _____ K) Driveways on adjacent properties within 150'.
- _____ L) Distance to nearest fire hydrant(s).
- _____ M) Utility names and contact information
- _____ N) Proposed grades (1' intervals) and spot elevations as required to show intent.
- _____ O) Proposed structures with finish floor elevations (to be 1' minimum above 100 year flood elevation, where applicable).
- _____ P) Proposed detention pond (if required)

Sheet 5 Erosion Control Plan: (to include the following information)

- _____ A) Scale
- _____ B) North arrow
- _____ C) Boundary lines with bearings and distances
- _____ D) Topography to 50' beyond boundary (1' intervals) with spot elevation along edge of adjacent streets
- _____ E) Denote limits of 100 year flood plain, flood zone designation, flood elevation and FIRM map panel number
- _____ F) Existing natural and manmade drainage features (pipes, culverts, ditches, swales, etc.)
- _____ G) Existing structures/features
- _____ H) Existing and proposed streets and parking areas (with striping)
- _____ I) Existing and proposed storm sewer
- _____ J) Easements with recording information
- _____ K) Driveways on adjacent properties within 150'.
- _____ L) Proposed grades (1' intervals) and spot elevations as required to show intent
- _____ M) Proposed structure finish floor elevations (to be 1' minimum above 100 year flood elevation, where applicable).
- _____ N) Proposed erosion control measures (i.e. silt fence, inlet protection, riprap, check dams, construction entrance/exit, sediment ponds, etc.)

Sheet 6 Landscaping Plan: (to include the following information)

- _____ A) Scale
- _____ B) North arrow
- _____ C) Existing natural and manmade drainage features
- _____ D) Existing structures/features to remain
- _____ E) Existing and proposed streets and parking areas (with striping)
- _____ F) Existing and proposed utilities (i.e. water, sewer, gas, telephone, cable, storm sewer, etc.) with size and material type.
- _____ G) Proposed Landscaping as per Ordinance No. 453.
- _____ H) Planting(s) legend (i.e. name, size, quantity)
- _____ I) Planting details
- _____ J) Irrigation plan if applicable

Sheet 7 Miscellaneous Details: (to include but not be limited to the following information)

- _____ A) Paving section
- _____ B) Curb and gutter
- _____ C) Sidewalk
- _____ D) Inlet
- _____ E) Silt fence
- _____ F) Inlet protection
- _____ G) Riprap check dams
- _____ H) Construction entrance/exit
- _____ I) Sediment pond
- _____ J) Detention pond and outlet structure



BP# _____

\$ _____

BUILDING PERMIT APPLICATION

Application is hereby made for a Building Permit and a Certificate of Occupancy as required under the Building Code and Zoning Ordinance of the City of Jacksonville, Alabama. In making this application, the applicant declares all of the statements and attached maps and drawings submitted by applicant are a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit applied for, if granted, is issued on the representations made herein, and that any permit issued may be revoked without notice on any breach of representations or conditions.

1. Location of proposed construction, excavation, use of land, moving or alteration:

Address: _____

Block #: _____ Lot #: _____ Zoning District: _____

2. **Owner of premises:**

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone: (_____) _____

Contractor:

Name of Business: _____

Contact Name: _____

Address: _____

City: _____

State: _____ Zip _____

Telephone: (_____) _____

3. Description: _____

4. Size of Lot: _____ ft. x _____ ft. Total square feet area of lot: (#2) _____

5. Area of lot covered by buildings (including existing structures) upon completion of any proposed structures: (#1) _____ square feet.

6. Percentage of lot covered by buildings (existing and proposed): $(\#1 \div \#2) = \text{_____} (\times 100) = \text{_____}$ percent.

7. Cost of project: \$ _____

Home Builders License #: _____

Commercial General Contractor's #: _____

8. Attach a plat drawn to scale showing: A. Location and dimensions of lot.
B. Location and dimensions of existing and proposed buildings.
C. Setback and sidelines of buildings on adjoining lots.
D. Parking areas.

9. Attach detailed construction plans, including heating and air-conditioning, plumbing, and electrical specifications.

10. A site plan detailing grading, lighting, utilities, etc., if applicable. Consult with Building Inspector to determine specific items required for this particular project.

Date Print Name

Applicant's Signature

Address & Telephone Number

Owner of Premises' Signature

Dig Safely

1-800-292-8525

Alabama One Call – www.al1call.com

Dig Safely
1-800-292-8525
Alabama One Call
www.al811.com

NOTICE

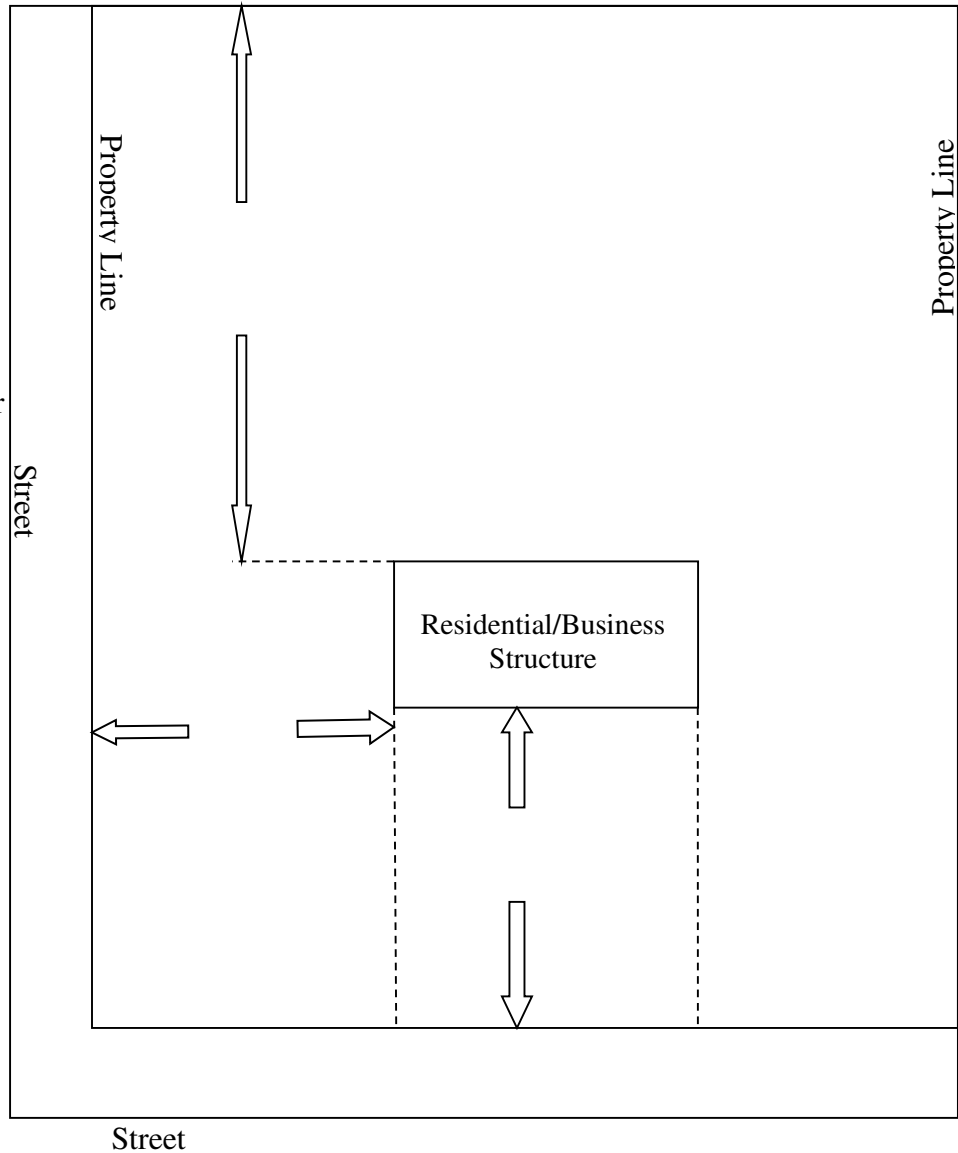
Will there be any digging near or above any in-ground utilities?
 (indicate one)

If the answer is yes, a copy of Title 37, Chapter 15, Sections 1-11 of the Code of Alabama will be provided.

You must follow the law.

Yes: _____
 Signature

No: _____
 Signature



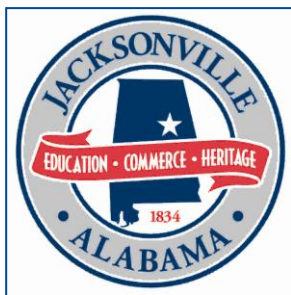
It is understood that any permit on this application will not grant any right or privilege to erect any structure or to use any premises herein described for any purpose or in any manner prohibited by the Building Code, Zoning Ordinance, or by any other ordinances or regulations of the City of Jacksonville, or restrictions or covenants of record. The applicant further agrees to notify the Building Inspector of the completion of the construction for which any Building Permit is granted. The Building Inspector shall then inspect the premises and issue or refuse a Certificate of Occupancy as provided by the Building Code and Zoning Ordinance.

TO BE COMPLETED BY THE BUILDING INSPECTOR

1. Is Development Review by Planning Commission required? Yes: _____ No: _____
2. Is Appeal to Zoning Board of Adjustment required? Yes: _____ No: _____
 Planning Commission: Approved: _____ Disapproved: _____ Date: _____
 Board of Adjustment: Approved: _____ Disapproved: _____ Date: _____
3. Building Permit Application: Approved: _____ Disapproved: _____ Date: _____

 Date

 Signature of Building Inspector



TO ALL BUILDERS OR HOMEOWNERS

SUBLIST

IF THIS FORM IS NOT COMPLETED AND RETURNED TO OUR OFFICE, NO POWER WILL BE TURNED ON.

1) GENERAL CONTRACTOR (COMMERCIAL)

a) Name of Company or Individual: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

2) HOMEBUILDER (RESIDENTIAL)

a) Name of Company or Individual: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

3) SUBCONTRACTORS

1) Excavation and Footing:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

2) Concrete (Footing and Driveway):

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

3) Masonry:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

4) Framer:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

5) Roofer:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

6) Gutter and Downspouts:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

7) Electrical:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

8) Plumbing:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

9) Insulation:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

10) Heating/Air Conditioning:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

11) Dry Wall Hangers & Finishers:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

12) Painting & Paper Hangers:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

13) Carpet/Floor Covering/Hardwood:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

14) Concrete Finisher:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

15) Landscaping/Irrigation:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

16) Garage Doors:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

17) Cabinet Makers:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

18) Alarm Systems:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

19) Siding (Vinyl/Metal):

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

20) Cleaning Company:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

21) Pressure Washing Company:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

22) Termite Company:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

23) Tile Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

24) Paving/Striping Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

25) Dryvit Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

26) Fence Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

27) Pool Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

28) _____ Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

29) _____ Contractor:

Name of Company: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____