

## **INSPECTION PERMIT APPLICATION**

(One time inspection for Power Release, Gas Release or Business License Inspection)

Inspection Location:		
Address		
Subdivision	Lot #	
Owner/Occupant		
Proposed Use		
Address	City	State Zip
Phone () [	Email	
NAME POWER/GAS RELEASED	UNDER	Email
Type of Occupancy: Res	idential Commercial	<u> </u>
and that I agree to comply withI understand that if work performed by a certified Journe journeyman electricianI understand that if work performed by a certified Maste fitterI understand that if work must be obtained before work if	a all City Ordinances and State Laws. must be performed to bring any electryman electrician or an apprentice un must be performed to bring any gas r gas fitter or an apprentice under the must be performed to bring an existi is begun. sinesses prior to opening, I must call t	offormation contained herein is true and correct strical component to code, the work must be ander the direct supervision of a certified component to code, the work must be are direct supervision of a certified Master gas situation to code the appropriate permit the Building and Fire Prevention Services for a Occupancy and may then open for business.
personally responsible to the C associated with this building ap	ity of Alabaster for any and all code v	vin is true and correct and I agree to be violations and code enforcement actions emplated herein, whether such actions or ctors or sub-contractors.
Name (print):	Signature:	Date:
Owner/Occupant	 Date	 Permit #