



# Building Permit Application and Information

Code Enforcement and Building Inspector  
 1397 Munford Ave, Munford TN 38058  
 (901) 837-5971

PRINT PLEASE	OK to issue by:		Date:		PERMIT #	
PROJECT ADDRESS				SUBDIVISION NAME		LOT #
PROPERTY OWNER'S NAME(S)					CONTACT PERSON	
					OWNER <input type="checkbox"/> CONTRACTOR <input type="checkbox"/>	
ADDRESS			CITY		STATE	ZIP +
OWNER'S PHONE #	OWNERS CELL		ALTERNATE NUMBER		OWNER'S E-MAIL	
CONTRACTOR'S NAME AND MAILING ADDRESS (STREET/PO BOX), CITY, STATE,					CONTRACTOR LICENSE #	
CONTRACTOR'S	CONTRACTOR'S CELL		CONTRACTOR'S FAX		CONTRACTOR'S E-MAIL	
TYPE OF WORK	<input type="checkbox"/> ALTERATION <input type="checkbox"/> NEW <input type="checkbox"/> MAINTENANCE <input type="checkbox"/> DEMOLITION <input type="checkbox"/> REPAIR <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> AGRICULTURE					
PERMIT TYPE	<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> FENCE <input type="checkbox"/> PLUMBING <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> MANUFACTURED HOME <input type="checkbox"/> CELLULAR TOWERS <input type="checkbox"/> HVAC <input type="checkbox"/> BUILDING <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> OTHER					
<u>DESCRIPTION OF WORK (Subject to City Approval)</u>						
TOTAL PROJECT VALUE:				TOTAL SQUARE FOOTAGE:		
RESIDENTIAL REQUIRED DATA				COMMERCIAL USE CHECKLIST		
Permit fees are based on the value of the work performed. Indicate the value rounded to the nearest dollar. See schedule of permit fees in instructions)				Existing building area: _____ square feet		
				New building area: _____ square feet		
				Number of stories: _____		
				Other: _____		
				Occupancy groups: _____		
Number of bedrooms: _____				Existing: _____		
Number of bathrooms: _____				New: _____		
Total number floors: _____						
New building area: _____ sqft \$				OFFICIAL USE ONLY		
				PERMIT FEES		Check #
				By:		Date:
Service Tap Fees	Special Instructions			Price		Paid
Water Meter						
Sewer Tap						
Gas Meter						

I hereby acknowledge that I have read this application and state that the above information is correct and agree to comply with all requirements contained herein and City of Munford ordinances regulating building construction.

Applicant Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_