

# LEE COUNTY BUILDING INSPECTIONS

100 Orr Avenue - Opelika, Alabama 36803

Phone: 334-737-7014 Hours: M-F 7am-3:30pm

Email: [buildinginspection@leeco.us](mailto:buildinginspection@leeco.us)

## PERMIT APPLICATION SUBMITTAL REQUIREMENTS

### ITEMS NEEDED UPON APPLICATION FOR BUILDING PERMIT

1. **Complete Application**  
**\*\*Owner acting as builder must complete "OWNER ACTING AS BUILDER APPLICATION"**  
**\*\*Commercial Project must submit "COMMERCIAL BUILDING PERMIT APPLICATION"**
2. **Address** – obtain from Lee County 911 Communication Coordinator (334-749-6091)
3. **City of Smiths Station Approved Zoning Certificate** – IF within the City Limits of Smiths Station
4. **Access Permit Approval** – a copy of the approved Access Permit from the Lee County Highway Department – 334-737-7011 (M-Th. 6am-4:30pm CST) [highway@leeco.us](mailto:highway@leeco.us)
5. **Plans** – A) Residential – 2 full sets; including foundation plan  
B) Commercial – 2 full sets; Architect or Engineer Stamped as required  
(If commercial building is over 2500 sq ft or if educational/ assembly)
6. **Site Plan** – Scaled plot plan showing property boundaries, all existing & proposed structures (include distances), septic components, driveway location, and any water bodies.
7. **Health Department Approval for septic system** – copy of ADPH 'Permit to Install' and copy of complete application (334-745-5765, 1801 Corporate Drive, Opelika 36804)
8. **Survey/Deed/Proof of Ownership**
9. **Contractor & Sub-Contractor Information as follows:**  
**Contractor:** Copy of current Alabama Home Builders License and Alabama State Privilege License  
**Sub-Contractor:** Copy of current State License and Alabama State Privilege License
10. **Floodplain Development Permit Application** – must be submitted if any Special Flood Hazard Area (SFHA) is shown on parcel – this form **MUST** be signed by the property owner.

**NOTE: Structures of two or more stories or bonus rooms must have floor/ceiling truss plans and beams and girders calculated for the loads imposed. All Engineered products must have layout and load calculations provided by the manufacturer. This is usually provided by the manufacturer at little or no charge. See your material supplier for details.**

**NO BUILDING OR HOME IS TO BE OCCUPIED PRIOR TO PASSING FINAL INSPECTIONS AND THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY**

# LEE COUNTY ALABAMA BUILDING PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of Lee County, Alabama for a permit to construct and use a building or structure to be located as shown on the accompanying County reviewed plot plan and, if same is granted by the County, I/we agree to conform to all laws and ordinances regulating same. I/we understand that this permit becomes null and void if work is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months.

ALL APPLICABLE BLANKS MUST BE FILLED IN - PLEASE PRINT LEGIBLY

Application Date: \_\_\_\_\_ Applicant is: \_\_\_\_\_ Owner \_\_\_\_\_ Contractor

## PROPERTY INFORMATION

Work Site Is: \_\_\_\_\_ Single Family Dwelling \_\_\_\_\_ Duplex \_\_\_\_\_ Townhouse \_\_\_\_\_ Other (explain) \_\_\_\_\_

Project Street Address: \_\_\_\_\_

Subdivision? \_\_\_\_\_ No \_\_\_\_\_ Yes Subdivision Name: \_\_\_\_\_ Lot No. \_\_\_\_\_

City Zoning? \_\_\_\_\_ No \_\_\_\_\_ Yes Name of City: \_\_\_\_\_ Zoning Permit No. \_\_\_\_\_

Flood plain? \_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_ Unsure

Sanitation System: \_\_\_\_\_ Public Sewer \_\_\_\_\_ Septic System

## CONTACT INFORMATION

Property Owner: \_\_\_\_\_ Tel No. ( ) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor: \_\_\_\_\_ Tel No. ( ) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Alabama Homebuilders/General Contractor's License No. \_\_\_\_\_ Expires \_\_\_\_\_

## PROJECT INFORMATION

Work is: \_\_\_\_\_ New Residential \_\_\_\_\_ New Non-residential \_\_\_\_\_ Addition/alteration/repair \_\_\_\_\_ Accessory Structure

Briefly Describe Work: \_\_\_\_\_

Foundation is: \_\_\_\_\_ Slab-on-Grade \_\_\_\_\_ Crawlspace Foundation \_\_\_\_\_ Basement Foundation

\_\_\_\_\_ Engineered Floor Framing System \_\_\_\_\_ Engineered Roof/Ceiling Framing System \_\_\_\_\_ Conventional Framing

Heated Sq ft. \_\_\_\_\_ Unfinished Basement Sq ft. \_\_\_\_\_ Finished Basement Sq ft. \_\_\_\_\_ Accessory Structure Sq ft. \_\_\_\_\_

Covered Porches Sq ft. \_\_\_\_\_ Garage Sq ft. \_\_\_\_\_

Total Heated plus Basement Sq ft: \_\_\_\_\_

Total Garage Sq ft: \_\_\_\_\_

Total Covered Porches Sq ft: \_\_\_\_\_

Total Sq ft under roof: (commercial/industrial only) \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### For Office Use Only

Valuation: \$ \_\_\_\_\_

PERMIT FEE: \$ \_\_\_\_\_

Construction Type: \_\_\_\_\_

Occupancy Classification: \_\_\_\_\_

Plans ( )

Plot Plan ( )

Health Dept. Approval ( )

911 Address ( )

Flood Hazard Area: Y N Source: \_\_\_\_\_ ADECA \_\_\_\_\_ FIRM

Plans Reviewed/Approved By: \_\_\_\_\_

# Structure Form

Date: \_\_\_\_\_

This form needs to be completed with permit application

## Air Conditioning

- Central Air
- Electric
- Heat Pump
- Wall Units
- Other \_\_\_\_\_

## Basement

- Crawl Space
- Full
- Half
- Other \_\_\_\_\_

## Exterior Walls

- Aluminum
- Brick
- Stone
- Hardi Plank
- Stucco
- Vinyl
- Metal
- Other \_\_\_\_\_

## Foundation

- Concrete Block
- Conventional
- Conventional Crawl Space
- Conventional Slab
- Poured Wall
- Slab on Grade
- Other \_\_\_\_\_

## Framing

- Steel
- Wood
- Other \_\_\_\_\_

## Heating

- Electric
- Heat Pump
- Natural Gas
- Oil
- Propane
- Radiant Floor
- Other \_\_\_\_\_

## Other Heating

- Fire Place (1)
- Fire Place - Gas
- Wood Stove
- Other \_\_\_\_\_

## Roofing

- Fiberglass
- Metal
- Tile
- Asphalt
- Wood
- Other \_\_\_\_\_

## Termite Treatment

- Spray
- Bait System
- Boric Acid
- Other \_\_\_\_\_

## Insulation

- Fiberglass Batten
- Spray Foam
- Other \_\_\_\_\_

\_\_\_\_ # of Bedrooms

\_\_\_\_ # of Bathrooms

Signed by: \_\_\_\_\_

# Mandatory Energy Code Component Worksheet for Plan Review

This form must be completed and submitted with all building plans

Project address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Building Envelope Information	Type	R-value	Marked On Plan AS
Flat Ceiling R-value: (R30 min)	_____	_____	_____
Sloped Ceiling / Roof Deck R-value: (R30 min), (R19 w/REScheck)	_____	_____	_____
Exterior Wall R-value: (R13 min)	_____	_____	_____
Attic Knee Wall R-value: (R13 min)	_____	_____	_____
Attic Knee Wall Sheathing R-value: (R5 min)	_____	_____	_____
Basement Stud Wall R-value: (R13 min)	_____	_____	_____
Basement Mass Wall R-value: (R5 min)	_____	_____	_____
Sealed Crawlspace Stud Wall R-value: (R13 min)	_____	_____	_____
Sealed Crawlspace Mass Wall R-value: (R5 min)	_____	_____	_____
Floor over Unconditioned Space R-value: (R19 min)	_____	_____	_____
Floor over Air R-value: (R19 min)	_____	_____	_____
Other Insulation R-value and description: _____			

<u>Window Size</u>	<u>Qty</u>	<u>U-Factor</u>	<u>SHGC</u>	<u>Marked On Plan AS</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Skylight	_____	_____	_____	_____
Glazed Door	_____	_____	(> 50% glazed)	_____
Opaque Door	_____	_____	(< 50% glazed)	_____