



TOWN OF SILVERHILL

15965 Silverhill Ave, PO Box 309 Silverhill, AL 36576

Office # 251-945-5198 Fax # 251-945-5199/buildingdept@townofsilverhill.org

ELECTRICAL/PLUMBING/HVAC PERMIT APPLICATION

Job/Property Address: _____

Electrical () Plumbing () HVAC ()

Owner: _____ Phone: _____

Mailing Address: _____

Email Address: _____ Fax: _____

PIN No: _____

Contractor: _____ Phone: _____

Mailing Address: _____

Email Address: _____ Fax: _____

SQ FT Heated _____

SQ FT Unheated _____

Describe Work: _____

NOTICE: ALL CONTRACTORS, SUBCONTRACTORS, & MATERIAL SUPPLIERS MUST HAVE A CURRENT BUSINESS LICENSE WITH THE TOWN OF SILVERHILL AT THE TIME SAID WORK IS PERFORMED. A FINAL INSPECTION WILL NOT BE SCHEDULED UNTIL FULL COMPLIANCE WITH BUSINESS LICENSE REQUIREMENTS.

I hereby certify that all information provided in this application is true, accurate and complete.

Applicant _____ Date _____

Approved By _____ Date _____

Amount \$ _____ Permit # _____ Date Issued _____

PLEASE EMAIL ALL INSPECTION REQUEST TO: buildingdept@townofsilverhill.org