

# CITY OF ROBERTSDALE, ALABAMA

## SUBCONTRACTOR LIST

P. O. Box 429, Robertsdale, AL 36567    Building Dept: (251)947-2466    Revenue Dept: (251)947-8920    TTD: (251)947-2122

Jobsite Address: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Contractor/RHB's Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Cell: \_\_\_\_\_ Office: \_\_\_\_\_ Fax: \_\_\_\_\_

*This form must be completely filled out and returned to the Building Department prior to issuance of permit.*

*Any changes or additions to this list during construction at this site must be reported to the Building Department at (251)947-2466.*

*By signing this form I am certifying that this sublist has been examined by me and is to the best of my knowledge a true and complete list.*

**SIGNED:** \_\_\_\_\_ **CONTRACTOR/RHB/OWNER**      **DATE:** \_\_\_\_\_

Type of Work	Address	Amount of Job	For Revenue Department Use Only
Name of Firm or Individual	Telephone Number		
<u>ALARM SYSTEMS</u>			
<u>ARCHITECT/DRAFTSMAN</u>			
<u>AWNINGS/BLINDS</u>			
<u>CABINETS/BOOKCASES</u>			
<u>CARPENTER/FRAMING</u>			
<u>CARPENTER/TRIM</u>			
<u>CEILING/ACOUSTICAL</u>			
<u>CLEAN-UP</u>			
<u>CONCRETE/BITUMINOUS</u>			
<u>DRYWALL/FINISHING</u>			
<u>DRYWALL/HANGING</u>			
<u>ELECTRICAL</u>			
<u>ELEVATORS/SHAFTS</u>			
<u>EXTERMINATOR</u>			
<u>FENCING</u>			
<u>FLOORING/ALL TYPES</u>			
<u>GLASS/GLAZING</u>			
<u>GRADING/EXCAVATING</u>			
<u>HVAC</u>			
<u>INSULATION/WEATHER-STRIP</u>			

