



SHELBY COUNTY
DEPARTMENT OF DEVELOPMENT SERVICES

1123 COUNTY SERVICES DRIVE
PELHAM, ALABAMA 35124

WWW.SHELBYAL.COM

- ☒ ZONING VERIFICATION FORM
☐ FOUNDATION SURVEY FORM

Municipality (please check box):

- ☐ Chelsea ☐ Wilsonville
☒ Columbiana ☐ Wilton
☐ Indian Springs Village

Required County Information:

☐ Foundation Survey Attached

Parcel Identification Number: _____ - _____ - _____ - _____ - _____ - _____

Owner: _____
Phone: _____

Applicant: _____
Phone: _____

Project _____
Address: _____

Proposed Use: _____

Permit
Type: New ☐ Remodel ☐

Zoning
Designation: _____

Overlay District: Yes ☐ No ☐

Subdivision Name: _____

Setbacks: _____ front _____ side _____ rear

Lot _____ Block _____ Phase _____

Square Footage: _____

☐ Approved ☐ Denied: _____
Signed Title Date

Variance

☐ Approved ☐ Denied: _____
Signed Title Date

Comments/Reason for Denial:

Optional City/Town Requirements:

Permit #: _____

Building Height: _____

No. of Acres: _____

Flood
Zone: _____

Sanitation: _____

Water: _____

Fire District: _____

Contractor/Subcontractor Information:

Name/Company	City Business License	Expiration Date
Name/Company	City Business License	Expiration Date
Name/Company	City Business License	Expiration Date
Name/Company	City Business License	Expiration Date

City of Columbiana
Commercial or Residential Sub – Contractors list
this form must be filled out in its entirety ***BEFORE*** we issue a
Zoning Verification to Shelby County

Job Address: _____ Lot # _____

Home Builder _____ State License # _____

City License# _____ Phone # _____ Fax # _____

Email: _____ Cell# _____

Subcontractor	Business Name	Address	Phone numbers	City License #	State License #
Site Grading				*	
Septic/Sewer				*	*
Block/Brick				*	
Electrician				*	*
Plumbing				*	*
HVAC				*	*
Manufactured Home Installer				*	

As the homebuilder on this project, I do certify that this is a true and accurate listing of the subcontractors that will be doing these jobs. I understand that I will have to have this form completed and turned into the City of Columbiana before I can get a Zoning Verification issued.

Signed: _____ Date: _____

only to be signed by licensed contractor listed on the permit

As required by Alabama Act 94-487 Call 2 days before excavation 1-800-292-8525 Alabama Line Location Center INC.

In the event your Sub List changes after this is submitted, it is the Contractor's responsibility to notify all subs that they must have a City of Columbiana Business License prior to commencing work. Shelby County will provide a list of subs that pulled permits and worked on the job.

Thank you for your compliance.

City of Columbiana
107 Mildred Street Columbiana, AL 35051
205-669-5800

Dale Lucas, Planning & Zoning
(must be signed for approval)

Date