

Please Mail or Email to:  
**CITY OF FOLEY**  
PO BOX 1750  
FOLEY, AL 36536  
Phone: (251)943-1545  
Email:  
revenue@cityoffoley.org



**PERMIT & SAFETY  
INSPECTION  
APPLICATION**  
for  
*SHORT TERM RENTAL(s)*  
The City DOES require approval for  
Short Term Rental Tax in Police  
Jurisdiction

**Please Print or Type Legibly**

Contact Name (for Inspection): \_\_\_\_\_

Telephone: (Business): \_\_\_\_\_ Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Physical Address of Unit: \_\_\_\_\_

24 Hour Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**FOR FIRE DEPARTMENT USE ONLY:**

**Fire Evacuation Map** of premises displayed in accordance with Ordinance? **Y / N** \_\_\_\_\_

**Emergency Contact Information** displayed in accordance with Ordinance? **Y / N** \_\_\_\_\_

**Fire Extinguisher(s) : (min. Rating of 1A:10-B:C) within 6 yrs of date of manufacture and maintained per manufacturer recommendations**

Located **under kitchen sink**? **Y / N** \_\_\_\_\_

\_\_\_ N/A Fire Extinguisher located in the attached **garage**? **Y / N** \_\_\_\_\_

\_\_\_ N/A Fire Extinguisher located **on additional floor levels** of STR? **Y / N** \_\_\_\_\_

**Smoke alarms** located in \_\_\_ sleeping room(s) in accordance with applicable codes? **Y / N** \_\_\_\_\_

Records available of monthly testing and battery replacement of smoke alarms? **Y / N** \_\_\_\_\_

**Carbon monoxide alarms** installed in accordance with applicable codes? **Y / N** \_\_\_\_\_

**Notes regarding safety issues:** \_\_\_\_\_

Approved By: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print Name)

Title: \_\_\_\_\_ Date of Approval: \_\_\_\_\_

**For Revenue Use:** BL# \_\_\_\_\_ Permit# \_\_\_\_\_ Initials \_\_\_\_\_ Date: \_\_\_\_\_

**Paid Date:** \_\_\_\_\_ **Ck#/Cash** \_\_\_\_\_ **Amount** \_\_\_\_\_ **Receipt#** \_\_\_\_\_