

City of Alpharetta

BUILDING VALUATION LETTER

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES – PLEASE PRINT LEGIBLY

PROPERTY INFORMATION

Project Street Address: _____ Ste: _____

PROJECT IS: COMMERCIAL RESIDENTIAL

Subdivision: NO YES – Subdivision Name: _____

ESTIMATED VALUE (INCLUDES LABOR AND MATERIALS) _____

SQUARE FOOTAGE: _____

PROPERTY OWNER: _____ Phone _____

Street Address: _____ Suite: _____

City: _____ State: _____ Zip: _____

Email: _____

Description of Work: _____

I, the undersigned, declare that, to the best of my knowledge and belief, the information herein is true and correct.

PROPERTY OWNER OR PROPERTY MANAGEMENT :

** Please sign in presence of notary public**

Signature/Date: _____

Notary Public Information:

Subscribed and sworn to before me this _____ day of _____, 20____

Signature of Notary Public: _____ Phone: _____

My commission expires: _____ 20_____