



TYPE OF MATERIAL	OPTION #1		OPTION #2			OPTION #3			AMOUNT
	PICKED UP BY CONTRACTOR	NAME OF SUPPLIER	DELIVERED BY SUPPLIER	NAME OF SUPPLIER	SUPPLIER CITY OF NORTHPORT BUSINESS LICENSE #	FURNISHED BY SUBCONTRACTOR	NAME OF SUBCONTRACTOR	SUBCONTRACTOR CITY OF NORTHPORT BUSINESS LICENSE #	
LUMBER, NAILS, ETC									
MARBLE, STONE, WALL TILE									
METAL BUILDING (COST OF BLDG)									
METAL WALL PANELS									
ORNAMENTAL METAL									
PAINT & SUPPLIES									
PLUMBING SUPPLIES									
PRECAST ROOF DECK									
ROOFING SHINGLES									
SHEET METAL, IRON BEAMS									
SIDING									
WALLPAPER									
WINDOWS, DOORS									
HARDWARE									
MISCELLANEOUS ITEMS									

I hereby certify that the above information is complete and correct.

\_\_\_\_\_  
Signature of General Contractor

\_\_\_\_\_  
Printed Name of General Contractor

\_\_\_\_\_  
Contact Phone # & Email (**REQUIRED**)

Remit this form to:  
City of Northport  
Revenue Office - Sales/Use Division  
P.O. Box 569  
Northport, AL 35476  
Fax (205) 333-3046  
revenue@cityofnorthport.org

**If there are questions, contact:  
revenue@cityofnorthport.org  
(205) 339-7000**