CITY OF FULTONDALE
INSPECTIONS DEPT.
1015 Old Walker Chapel Rd, P. O. Box 699, Fultondale, Alabama 205-841-8306

PLUMBING PERMIT APPLICATION

(Commercial Jobs $50,000 & over requires a State of Alabama General Contractor's License)

JOB ADDRESS: _____

SUBDIVISION_____**LOT**_____

OWNER/BUILDER'S NAME: _____

Application is hereby made to Install, Repair or Replace fixtures as listed herein; and/or Water Service from main to meter, from meter to building and for water distribution in building; and/or Septic Tank connection.

WORK TO BE PERFORMED	***# of Fixtures***
□ WATER CLOSETS	_____
□ LAVATORIES	_____
□ BIDETS	_____
□ SINKS	_____
□ DRINKING FOUNTAIN	_____
□ BATHTUBS	_____
□ SHOWER BATHS	_____
□ DISHWASHER	_____
□ WASHING MACHINES	_____
□ URINALS	_____
□ WATER HEATER	_____
□ FLOOR DRAINS	_____
□ HYDRANTS	_____
□ INTERCEPTORS	_____
□ INDIRECT WASTE	_____
□ GARBAGE DISPOSALS	_____
□ SUMPS	_____
□ PUMPS	_____
□ EJECTORS	_____
□ LAWN SPRINKLER &/or BACKFLOW PREVENTER	_____
□ OTHER _____	_____
_____	
□ SEPTIC TANK CONNECTION	_____
□ WATER SERVICE	_____
TOTAL FIXTURES	_____

Complete Appropriate Items (s) Below:

☐ **NEW RESIDENTIAL STRUCTURES PER DWELLING UNIT**
$25.00 Base Fee; $5.00 for each fixture
# of Dwelling Units _____

☐ **NEW MULTI-FAMILY RESID. - (APARTMENTS/CONDOMINIUMS)**
$25.00 Base Fee; $5.00 for each fixture
# of Dwelling Units_____

☐ **EXISTING RESIDENTIAL STRUCTURES PER DWELLING UNIT**
$25.00 Base Fee; $5.00 for each fixture
# of Dwelling Units _____

☐ **NEW COMMERCIAL/INDUSTRIAL STRUCTURES PER UNIT**
$50.00 Base Fee; $5.00 for each fixture
# of Units _____

☐ **EXISTING COMMERCIAL STRUCTURE PER UNIT**
$50.00 Base Fee; $5.00 for each fixture
# of Units _____

☐ **UTILITY INSTALLATION– Plumbing Contractor should contact Fultondale Public Works Department before beginning. (205.841.0786)**

FOR NON-RESIDENTIAL ONLY: State of Alabama Construction Industry Craft Training (CICT) Fee ($1.00 per $1,000):

Total Construction Cost: _____

TOTAL FEE AMOUNT $_____
TOTAL PERMIT COST $_____

I HEREBY CERTIFY THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT AND THAT I AGREE TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAWS REGULATING PLUMBING INSTALLATION. I AM THE OWNER OR AN AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK.

PLUMBING CONTRACTOR: _____

ADDRESS: _____
City State Zip Code Telephone#

_____
(SIGNATURE OF MASTER PLUMBER OR PROPERTY OWNER, IF PERFORMING HIS OWN WORK)

BUILDING OFFICIAL DATE PERMIT FEE PERMIT NO.