

CITY OF FULTONDALE
INSPECTIONS DEPT.

1015 Old Walker Chapel Rd, P. O. Box 699, Fultondale, Alabama 205-841-8306

ELECTRICAL PERMIT APPLICATION

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

JOB ADDRESS: _____

SUBDIVISION _____ **LOT** _____

OWNER/BUILDER'S NAME: _____ **Phone #:** _____

APPLICATION IS HEREBY MADE TO WIRE FOR AND/OR INSTALL ELECTRICAL EQUIPMENT AS LISTED HEREIN:

WORK TO BE PERFORMED

- | | | |
|--|--|---|
| <input type="checkbox"/> TEMPORARY SERVICE | <input type="checkbox"/> SWITCHES | <input type="checkbox"/> HEATING APPLIANCES |
| <input type="checkbox"/> FIXTURES/LAMPS, TUBES | <input type="checkbox"/> WATER HEATER | <input type="checkbox"/> FURNACE |
| <input type="checkbox"/> OUTLETS | <input type="checkbox"/> SPACE HEATERS | <input type="checkbox"/> CAPACITORS |
| <input type="checkbox"/> DRYER | <input type="checkbox"/> AIR CONDITIONER | <input type="checkbox"/> TRANSFORMERS |
| <input type="checkbox"/> RANGE/RANGE TOP | <input type="checkbox"/> SERVICE REPAIR | <input type="checkbox"/> GENERATORS |
| <input type="checkbox"/> OVEN | <input type="checkbox"/> MAINLINE SERVICE SWITCH | <input type="checkbox"/> SERVICE UPGRADE |
| <input type="checkbox"/> FANS/MOTORS | <input type="checkbox"/> SWIMMING POOL | <input type="checkbox"/> LOW VOLTAGE WIRING |
| <input type="checkbox"/> CIRCUITS | <input type="checkbox"/> WELDERS | <input type="checkbox"/> SIGNS |
| | | <input type="checkbox"/> OTHER |

Select Appropriate Item(s) Below:

- | | |
|---|--|
| <input type="checkbox"/> NEW RESIDENTIAL STRUCTURES, PER DWELLING UNIT
(\$30.00 plus \$20.00 per each 100 amperes increment of service)
Total amperes _____
Total dwelling units _____ | <input type="checkbox"/> NEW COMMERCIAL STRUCTURES PER UNIT
(\$50.00 plus \$20.00 per each 100 amperes of service)
Total amperes _____
Total units _____ |
| <input type="checkbox"/> NEW MULTI-FAMILY RESID. (Apartments/Condominiums)
(\$30.00 per dwelling unit, plus \$20.00 per each 100 amperes increment of service)
Total amperes _____
Total dwelling units _____ | <input type="checkbox"/> EXISTING COMMERCIAL STRUCTURES PER UNIT
(\$50.00 plus \$20.00 per each 100 amperes of service increase)
Number of amperes increased _____
Total units _____ |
| <input type="checkbox"/> EXISTING RESIDENTIAL STRUCTURES PER DWELLING UNIT
(\$30.00 plus \$20.00 per each 100 amperes of service increase)
Total amperes of increase _____
Total dwelling units _____ | <input type="checkbox"/> COMMERCIAL, COMPLETE RE-WIRING WITH NO SERVICE CHANGE (\$100.00) |
| <input type="checkbox"/> RESIDENTIAL, COMPLETE RE-WIRING
(\$30.00, plus \$10.00 per each additional circuit)
Number of additional circuits _____ | <input type="checkbox"/> SWIMMING POOLS- \$30.00 per pool
<input type="checkbox"/> SIGNS - \$30.00 per permit
<input type="checkbox"/> TEMPORARY SERVICE - \$20.00 |

SOLAR PANELS

For valuation over \$250.00 up to and including \$1,000.00 - \$30.00

For valuation over \$1,000.00 - the fee shall be \$30.00 for the first \$1,000.00 and \$10.00 for each additional \$1,000.00 or fraction thereof.

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 ELECTRICAL INSTALLATION. I AM THE OWNER OR AM AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK.

ELECTRICAL CONTRACTOR: _____

ADDRESS: _____ **City** _____ **State** _____ **Zip Code** _____

PHONE #: _____ **EMAIL (REQUIRED):** _____

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

BUILDING OFFICIAL

DATE

PERMIT FEE

PERMIT NO.