

CITY OF FULTONDALE
INSPECTIONS DEPT.

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

MECHANICAL PERMIT APPLICATION

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

JOB ADDRESS: _____

SUBDIVISION _____ LOT _____

OWNER/BUILDER'S NAME: _____

Permits shall be required for new system installation and any repair, alteration or replacement of existing systems or equipment including, but not limited to, air-conditioning units, refrigeration units, boilers, gas fired a.c. units, forced air systems, gravity systems, floor furnaces, wall heaters, unit heaters, evaporative coolers, clothes dryers, ventilation fans, range hoods, incinerators, ductwork. (Self-contained 2 tons or less...total cost of all units combined.)

Permit fees shall be determined by valuation/contract cost of job, which is determined by bona fide signed contracts or other evidence of cost as submitted by owner or contractor.

TYPE OF OCCUPANCY:

- RESIDENTIAL
- COMMERCIAL
- INSTITUTIONAL

WORK TO BE DONE IN:

- NEW BUILDING
- BUILDING ADDITION
- EXISTING BUILDING
- OTHER _____

SECTION BELOW MUST BE COMPLETED IN DETAIL. DESCRIBE WORK INCLUDING TYPE AND SIZE OF EQUIPMENT BEING INSTALLED, REPAIRED OR REPLACED. *INCLUDE TOTAL COST OF JOB.*

Permit fee shall be \$30.00 for first \$1,000.00, and \$10.00 for each additional \$1,000.00 of the contract or valuation cost, whichever is greater.

COST OF JOB: \$ _____ 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 MECHANICAL INSTALLATION. I AM THE OWNER OR AM AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK.

COMPANY NAME: _____

ADDRESS: _____

PHONE #: _____ City _____ State _____ Zip Code _____

EMAIL (REQUIRED): _____

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

BUILDING OFFICIAL _____ DATE _____ PERMIT FEE _____ PERMIT NO. _____