INSPECTION SERVICES
CITY OF FULTONDALE

CITY OF FULTONDALE
FULTONDALE, ALABAMA 35068

APPLICATION FOR PLUMBING PERMIT

DATE . . . . . .
PHONE 841-6456

(FOR CLERK'S USE ONLY)

IS SANITARY DIVISION PERMIT REQ'D YES ☐ NO ☐ HAS APPLICATION BEEN FILED YES ☐ NO ☐ GIVEN TO _____ DATE _____ TIME _____

PERMIT ISSUED YES ☐ NO ☐ DATE _____ TIME _____ NO. _____ REMARKS: _____

IS EXCAVATION PERMIT REQ'D YES ☐ NO ☐ HAS SAME BEEN ISSUED YES ☐ NO ☐ NO. _____ COPY TO: _____ DATE _____ TIME _____

TO: CHIEF PLUMBING INSPECTOR

A PERMIT IS REQUESTED TO INSTALL, REPAIR OR REPLACE PLUMBING AS LISTED HEREIN:

JOB ADDRESS:
AT _____

BY CONTRACTOR _____

FOR OWNER
OR OCCUPANT _____

LEGAL DESCRIPTION: (LIST ONLY THE LOT OR LOTS ON WHICH THE BUILDING IS SITUATED.)

LOT _____ BLOCK _____
(IF NO RECORDED MAP, GIVE METES AND BOUNDS)

SURVEY _____

BUILDING PERMIT NO. _____

BUILDING WATER SERVICE: YES ☐ NO ☐ SIZE _____
- ☐ FROM MAIN TO METER
- ☐ FROM METER TO BUILDING
- ☐ WATER DISTRIBUTION IN BUILDING

BUILDING SEWER: YES ☐ NO ☐ SIZE _____
- ☐ NEW INSTALLATION
- ☐ REPAIR
- ☐ REPLACE EXISTING
- ☐ CONNECT TO EXISTING BUILDING (HOUSE) SEWER

TYPE OF OCCUPANCY:
- ☐ RESIDENTIAL
- ☐ COMMERCIAL
- ☐ INDUSTRIAL
- ☐ INSTITUTIONAL

SEPTIC TANK: YES ☐ NO ☐
- ☐ CONNECTION TO SEPTIC TANK
- ☐ DISCONNECT FROM SEPTIC TANK

WORK IS TO BE DONE IN:
- ☐ NEW BUILDING
- ☐ BUILDING ADDITION
- ☐ EXISTING BUILDING
- ☐ BUILDING MOVED ON LOT

IF ADDITION TO PLUMBING SYSTEM, DOES EXISTING SYSTEM INCLUDE A SINK OR WATER CLOSET?
YES ☐ NO ☐

IN THE PERFORMANCE OF THIS WORK IS ANY EXCAVATION OF STREET, ALLEY, SIDEWALK OR PUBLIC WAY REQUIRED?
YES ☐ NO ☐

ARE DRAWINGS ATTACHED?
YES ☐ NO ☐

SQ. FT. FLOOR SPACE _____

IF MORE THAN 7 500 SQ. FT. OF FLOOR SPACE – DRAWINGS REQUIRE TWO (2) SETS.

GIVE NUMBER OF EACH FIXTURE TO BE INSTALLED, REPAIRED OR REPLACED	NEW INSTALLATION	RE-LOCATE	REPAIR OR REPLACE
WATER CLOSETS			
BATHTUBS			
LAVATORIES			
SINKS			
URINALS			
DRINKING FOUNTAIN			
FLOOR DRAINS			
SHOWER BATHS			
DISHWASHERS			
GARBAGE GRINDERS			
**ELECTRIC WATER HEATERS			
INTERCEPTORS			
WASHING MACHINES			
INTERIOR RAIN LEADER SYSTEM			
SUMPS			
PUMPS			
EJECTORS			
**GAS WATER HEATERS			
CONSTRUCTION TOILETS (NUMBER OF FIXTURES)			
BUILDING STORM SEWER			
SUB-TOTALS			
TOTAL			

INSPECTIONS REQUIRED (NO. OVER 3)	
NUMBER OF WATER SERVICES	
BUILDING SEWER	
SANITARY SEWER CONNECTION	
XCAVATION PERMIT	

GRAND TOTAL _____

TOTAL FEE _____ $ _____

(OVER)