

CITY OF FORT PAYNE

Inspections Department

100 Alabama Avenue N.

Fort Payne, Alabama 35967

Telephone: (256) 845-5180

FAX: (256) 845-5157

Permit No:	_____
Associated with:	_____
Date issued:	_____

I, the undersigned, hereby make application to the Building Inspections Department of the City of Fort Payne for a permit to repair, install and/or add gas fixtures to the facility located at the specified address. I understand that all work must be in compliance with the requirements of the Standard Gas Code and the laws and ordinances of the State of Alabama and the City of Fort Payne, and cannot begin until a permit is issued. I further understand that all work must be inspected while in progress.

Owner:	
Owner address:	
Owner telephone:	
Job location:	
Contractor:	
Licensed:	City: () Yes () No..... State: () Yes () No
Residential:	() Yes () No
Occupancy:	
Improvement:	
Gas demand:	

Installations (Contractors please list each fixture):

Heat pump	KW's _____	Gas pack	_____
Heat pump w/ gas	_____	Fire place	_____
Ductwork	_____	Cooktop	_____
Air handling unit	_____	Log starter	_____
Commercial exhaust hood	_____	Wall heater	_____
Boilers	_____	Gas grill	_____
Unit heaters	_____	Gas lights	_____
Ventilation fan	_____	Generator	_____
Floor furnace	_____	Water heater	_____
Change out	_____	Water heater exchange	_____
Gas lines	_____	Gas dryer	_____
Vents	_____	Pool heater	_____
Repair	_____	Range	_____
Other: _____	_____	TOTAL:	_____

Total fee:

\$

Date: _____ OWNER/CONTRACTOR: _____

GAS INSPECTOR: _____