

**CITY OF FORT PAYNE**

INSPECTIONS DEPARTMENT

100 ALABAMA AVENUE NW

FORT PAYNE, AL 35967

Phone: 256-845-5157 / Fax: 256-845-5157

[dmcnullan@fortpayne.org](mailto:dmcnullan@fortpayne.org)

PERMIT #: \_\_\_\_\_

ASSOCIATED WITH: \_\_\_\_\_

DATE: \_\_\_\_\_

**PLUMBING PERMIT**

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 water and/or sewage fixtures to the facility located at the specified address. I understand that all work must be in compliance with the requirements of the 2015 International Plumbing Code and the laws and ordinances of the State of Alabama and the City of Fort Payne. *I understand that work cannot begin until a permit is issued and that all work must be inspected while in progress.*

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Job Location: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Licensed: City: ( ) Yes ( ) No.....State: ( ) Yes ( ) No

Residential: ( ) Yes ( ) No.....( ) City sewer system ( ) Septic tank

**COMMERCIAL / INDUSTRIAL (Number of fixtures)**

Backflow Preventor: _____	Lavatories: _____
Bath Tubs: _____	Mop Sinks: _____
Dishwashers: _____	Showers: _____
Drinking Fountains: _____	Urinals: _____
Floor Drains: _____	Washing Machines: _____
Grease Traps: _____	Water Closets: _____
Hand Sinks: _____	Water Heaters: _____
Kitchen Sinks: _____	Water Heater Exchange: _____
3 Compartment Sinks: _____	Other: _____
	<b>Total Fixtures:</b> _____

**Residential:**

Number of Baths: \_\_\_\_\_ Water Heater Exchange: \_\_\_\_\_

Remodel: \_\_\_\_\_ Sewer Repair/Replacement: \_\_\_\_\_

**Total Fee:** \$ \_\_\_\_\_

Signature: Owner / Contractor: \_\_\_\_\_

Print Name: \_\_\_\_\_