



Issued By / Date \_\_\_\_\_

**JOB SITE**

Building Permit Number: \_\_\_\_\_ \*\*\*PLEASE SELECT ONE\*\*\*  Commercial  Residential

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ Type (Rd, St) \_\_\_\_\_ Quad (NE...) / Bars (SUITE...) \_\_\_\_\_ Business Name \_\_\_\_\_

**Permit Number**

PLEASE CHECK BOX IF CONTRACTORS PHONE NUMBER, FAX NUMBER OR ADDRESS IS CHANGED SO OUR RECORDS CAN BE UPDATED.

Contractor (License Holder) \_\_\_\_\_ State Lic. NO.: \_\_\_\_\_

Company \_\_\_\_\_ Bus. Lic. NO.: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

FIXTURES		FIXTURES DESCRIPTION	FEES	COST
CODE	QTY			
A 01		BACKFLOW PREVENTERS	\$10.00	
A 02		BASIN	\$10.00	
A 03		BATH - TUB	\$10.00	
A 04		DISHWASHER	\$10.00	
A 05		RESIDENTIAL DISPOSAL UNIT	\$10.00	
A 06		COMMERCIAL DISPOSAL UNIT	\$20.00	
A 07		FLOOR DRAIN	\$10.00	
A 08		ROOF DRAIN	\$10.00	
A 09		DRINKING FOUNTAIN	\$10.00	
A 10		LAWN SPRINKLER	\$30.00	
A 11		SERVICE SINKS	\$10.00	
A 12		RES. HOUSE SEWER	\$10.00	
A 13		COMM. SEWER - PER FT.	\$0.50	
A 14		SHOWER	\$10.00	
A 15		SINK	\$10.00	

FIXTURES		FIXTURES DESCRIPTION	FEES	COST
CODE	QTY			
A 16		VACUUM BREAKERS	\$10.00	
A 17		WATER CLOSET	\$10.00	
A 18		WATER HEATER	\$20.00	
A 19		RESIDENT. WATER SERVICE LINES	\$10.00	
A 20		COMMERC. WATER SERVICE LINES	\$00.50	
A 21		WASHING MACHINE	\$10.00	
A 22		FIRE SPRINKLER SYSTEM PER HEAD	\$00.40	
A 23		URINALS	\$10.00	
A 24		GREASE TRAP	\$10.00	
A 25		GAS WATER HEATER REPLACEMENT	\$20.00	
A 26		ELECTRIC WATER HEATER REPLACEMENT	\$20.00	
		VARIABLE DESCRIPTION	\$10.00	
		SEWER PLUG	\$10.00	
A 93			\$10.00	
		REINSPECTION	\$50.00	

**\$100 MINIMUM FEE FOR ALL PERMITS : \$75 Base fee plus \$25 Technology Fee Total Fees:** \_\_\_\_\_

**COMMENTS: DESCRIBE JOB:** \_\_\_\_\_

The above statements are true to the best of my knowledge, and I, the undersigned do hereby agree that I am responsible for this installation meeting all code requirements.

**Contractor's Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

**MAIL** CASHIER'S CHECK or MONEY ORDER ONLY TO: 55 Trinity Avenue, Suite 3800, Atlanta Georgia 30303  
OR

**FAX** with CREDIT CARD FAX PAYMENT FORM TO FAX (404) 739-4147

Phone: (404) 865-8550

Inspector-Zone: \_\_\_\_\_

07/08 CColbert