



STORM/SITE WORK PLUMBING INSPECTION FEES

DATE: _____

PERMIT: _____

JOB ADDRESS: _____

NAME OF BUSINESS: _____

QUANTITY	TYPE OF WORK	PER EACH	AMOUNT
	STORM SEWER MANHOLES / CATCH BASINS - EACH	40.00	
	INLET AREA DRAINS - EACH	5.00	
	TIE INTO CITY OR EXISTING STORM SEWER - EACH	5.00	
	0' TO 100' LINE	75.00	
	EACH ADDITIONAL 100'	35.00	
	SANITARY LIFT STATION	125.00	
	FIRE SPRINKLER SYSTEM (OUTSIDE ONLY)	100.00	
	FIRE PLUGS (1 -25)	50.00	
	FIRE PLUGS - EACH ADDITIONAL	2.00	
1	APPLICATION FEE	10.00	10.00

MASTER BUILDING PERMIT # _____

TOTAL \$ _____

APPLICANT (MASTER PLUMBER): _____ LIC # _____

(PLEASE PRINT PLUMBING CONTRACTOR(S) COMPANY NAME & LICENSE NUMBER)

ADDRESS: _____

(CONTRACTOR=S COMPANY ADDRESS)

TELEPHONE NUMBER: _____

(CONTRACTOR=S PHONE NUMBER)

SIGNATURE: _____

(PLUMBING CONTRACTOR=S SIGNATURE)

****MUST REQUEST ALL INSPECTIONS THROUGH 24 HOUR RECORDER LINE 713-477-2800****