



PLUMBING PERMIT
BUILDING INSPECTION DEPARTMENT
CITY OF AIKEN
 (803) 642-7675
 Fax (803) 642-7672

Mail payment and copy of this application to:

City of Aiken
 Building Inspection Division
 PO Box 1177
 Aiken, SC 29802

Application is hereby made for permit and inspection for the following plumbing installation as described and in accordance with the Ordinance of the City of Aiken and subject to approval of the Building Inspector.

DATE: _____

PROPERTY ADDRESS: _____ SUBDIVISION _____

RESIDENTIAL COMMERCIAL NEW CONSTRUCTION ADDITION./ ALTERATION

PLUMBING PERMIT FEE	QUANTITY	UNIT CHARGE		SUB TOTAL
BASE PERMIT FEE	1 X	\$11.50	=	\$ 11.50
FIXTURE, FLOOR DRAIN, TRAP		X \$ 2.50	=	
SEWER LINE		X \$ 5.00	=	
WATER HEATER		X \$ 2.50	=	
ALT/REPAIR PLBG SYSTEM		X \$ 5.00	=	
NEW WATER SERVICE		X \$ 5.00	=	
BACKFLOW DEV, 1-5		X \$ 2.50	=	
PERMIT AMOUNT TOTAL			=	

REMARKS: _____

NOTE: All plumbing jobs must have a water test on the complete system before work is covered!

LICENSED PLUMBER (PRINT) _____ PHONE# _____

BUSINESS NAME _____

MAILING ADDRESS: _____
(STREET/ P.O. BOX) (CITY) (STATE) (ZIP CODE)

SIGNATURE _____

If you would like a copy faxed back to you, please put your fax # here: _____