---- FAYETTE COUNTY BUILDING DEPARTMENT ----

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COMMERCIAL WORKSHEET B - PLUMBING FEE SCHEDULE

Project Name: _____

Permit No: C-_____

Count	Fixture Description	Count	Fixture Description	Count	Fixture Description
	Air Admittance Valve		Interceptors, Garage/Oil		Sinks, Plaster
	Aspirators		Interceptors, Grease		Sinks, Scullery
	Autopsy Tables		Interceptors, Sand		Sinks Food Prep
	Backflow Devices		Lavatories		Sinks, Mop
	Bidets		Piping Systems, Sanitary		Sinks, Surgical
	Dental Cuspidors		Piping System, Storm		Sinks, X-Ray
	Dental Lavatories, Chair		Piping Systems, Water		Sinks, Bar
	Dilution Sumps		Sterilizers		Tubs, Bath
	Drains, Floor		Sump-Pumps		Tubs, Laundry
	Drains, Roof Storm		Softener		Urinals
	Expansion Tanks		Sewage Ejectors		Valves, Pressure Reducer
	Fountains, Baptismal		Shampoo Bowls		Valves, Tempering
	Fountains, Drinking		Showers		Washers, Automatic
	Fountains, Soda		Sinks, Chemical		Washers, Bed Pan
	Fountains, Wash		Sinks, Clinical		Washers, Dish
	Garbage Disposals		Sinks, Domestic		Washers, Eye (Emergency)
	Hose Bibs		Sinks, Floor		Water Closets
	Hub Drains		Sinks, Instrument		Water Heaters
	Hot Water Dispensers		Sinks, laboratory		Other_____
	Hydrotherapy Baths		Sinks, Pharmacy		Other_____
	Ice Makers				

_____ + _____ + _____ = _____Total Fixtures

Total Fixture Count from above: _____ x $ 20.00 per Fixture…… $ _____
Plumbing Review/Processing Fee: …… ($200.00 per structure)…… $ 200.00

Total Plumbing Fee to be entered into Worksheet A…… $_____

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