

City of Leeds, AL - Registration as a Self-Inspector

Date of Application



Type of Registration

Individual Project ___ or Annual Registration ___

Individual Registration - Name

Address

Phone

Email

Corporate Registration - Name

Address

Phone

Email



Qualification:

- Registered professional engineer (Commercial)
- Licensed architect or (Commercial)
- An ICC Certified Building Official (Commercial)

- An individual holding an Alabama Home Builders License (or Residential)
- A Master Alabama Electrical Contractors License (Residential – Electrical)
- A Master Alabama Plumbing Contractors License (Residential - Plumbing)
- A Master Alabama HVAC Contractors License (Residential – HVAC)
- A Master Gas Fitters Contractors License (Residential – Gas)

Attach Copy of Certification Document(s) to this application*

By acceptance of this Registration, I/We agree to conform to all rules, regulations, and ordinances of the City of Leeds, Alabama including, but not limited to, those ordinances concerning, construction, heating, air conditioning, plumbing, electrical wiring, waste disposal, and paving. I/We further agree to hold the City of Leeds harmless from all claims, costs, penalty, or damages from whatever source that may arise on account of this authorization being issued by the City of Leeds to the applicant, including, but not limited to, a reasonable attorney’s fee and court costs and all other costs related thereto including, without limitation, the costs associated with enforcement of any rule, regulation or statute. I/We acknowledge that the City staff shall have the right to amend, stay and/or void the subject authorization issued under this application for a violation of any rule, regulation, state statute, or ordinance of the City of Leeds as may be discovered by whatever source or means, in the sole discretion of the City. It is acknowledged that it is incumbent solely on the applicant to ensure that they are fully aware of any and all such rules or regulations associated with the project activities work or activity being permitted. I full acknowledgement of my/our commitments contained herein above; I sign my name below with full authority to do so.

Signature

Date

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Date received by the city.



Approved

Yes No

Issued by:

Submit

