

# FIRE ALARM PERMIT

DATE APPLICATION RECEIVED: \_\_\_\_\_

LOCATION OF PROPERTY: \_\_\_\_\_

LOT & BLOCK OR PARCEL NUMBER: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_

CONTRACTOR \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

	<i>Quantity</i>		<i>Quantity</i>
<b>Signal Initiating Devices</b>		<b>Alarm Control Functions</b>	
Detectors (heat, smoke, rate of rise etc.)	_____	Fans Shut Down	_____
Manual Pull Stations	_____	Fans Started	_____
Water Flow / Tamper Switches	_____	Elevators Recalled	_____
Other (Fireman's phones, etc.)	_____	Elevators Shut Down	_____
		Doors Held Open, Unlocked, etc.	_____
		Fire Alarm Control Panels, Expander	_____
		Panels, Annunciators	_____
<b>Notification Devices</b>			
Audible Devices (Horns, bells, speakers, etc.)	_____		
Visual Devices (strobes, etc.)	_____		
Combination Audio / Visual Devices	_____		
(horn / strobes, speakers / strobes, etc.)	_____		
		<b>Total Number of All Devices Listed Above:</b>	_____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND ACKNOWLEDGES THE SMOKE DETECTOR REQUIREMENTS INVOLVED WITH ALTERATION, REPAIR AND ADDITION PERMITS.

APPLICANT/AGENT SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

DATE \_\_\_\_\_

**\*\*\*\*\* FOR DEPARTMENT USE ONLY \*\*\*\*\***

**FIRE ALARM PERMIT APPLICATION**

APPROVED

DENIED

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

PERMIT FEE \$ \_\_\_\_\_

MUNICIPAL FEE \$ \_\_\_\_\_

TRAINING FEE \$ 4.<sup>00</sup> \_\_\_\_\_

**TOTAL PERMIT FEE \$ \_\_\_\_\_**