



**FIRE SPRINKLER/ALARM/HIGH PILE STORAGE  
PERMIT APPLICATION**

PROJECT INFORMATION		
Project Address:		
Zoning District:	Proposed Use:	Occupancy Type:
Subdivision:	Lot:	Block:

PROPERTY/OWNER INFORMATION	
Property Owner:	Phone #:
Address:	
Email:	

CONTRACTOR INFORMATION	
Contractor Name:	Phone #:
Contractor Address:	
Email:	State License No.:
Site Contact Name:	Phone #:

PROJECT INFORMATION
Class of Work: <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Fire Alarm <input type="checkbox"/> High Pile Storage <input type="checkbox"/> Other: Please check all that apply
Description of Work:

ACKNOWLEDGEMENT		
I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I further understand that plans submitted for approval will be subjected to a comprehensive check against municipal ordinance and building code. Any set of plans that must be returned for modifications or corrections in order to come into compliance with ordinance or code will be subject to rechecking in order of submittal. Under no circumstances will paid fees be refunded or transferred. Applications and plans will be held for 180 days. After 180 days this application and plans will be disposed of unless a valid building permit is issued.		
_____ Applicant's Signature	_____ Printed Name	_____ Application Date

FOR OFFICE USE ONLY	
Received By: _____	Date Routed: _____
Approved By: <input type="checkbox"/> Bitz <input type="checkbox"/> Bunn <input type="checkbox"/> Daily	Date Approved: _____
Fee Due: _____	Fee Paid: _____

**NOTE: Only complete applications shall be accepted and payment received at time of submission.**