



Fire Prevention Permit Application

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Updated **SEPT 2026**

OFFICE USE ONLY

Permit Number: _____ PIN: _____

Special Conditions: _____ Plan Review Fee: _____ Permit Fee: _____

Reviewed by: _____ Date Applied: _____ Date Approved: _____

Project Information

Project Address _____ Owner Name _____

Owner Mailing Address _____

Owner Email _____ Owner Phone _____

Contractor Mailing Address _____ Contractor Name _____

Contractor Email _____ Contractor Phone _____

Type(s): ☐ Sprinkler ☐ Alarm ☐ Fire Suppression System

Class of Work: ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Other _____

Valuation of Work _____

Affidavit

I hereby certify that I have answered all of the questions contained herein and know the same to be true and correct. All work performed under this permit must comply with State law and Local ordinances. Furthermore, I understand that any permit issued, based upon false information or misrepresentation provided by the applicant, will be null and void and subject to penalty as provided by law and ordinance.

Applicant Name _____ Applicant Signature _____ Date _____

