



Automatic Fire Alarm System and Sprinkler System Application

PERMIT # _____

Name of Job: _____

Address of Installation: _____

Name of Installer: _____

Address of Installer: _____

Phone # of Installer: _____

Nature/Scope of Work:

- COMMERCIAL PLAN REVIEW
- FLAMMABLE & COMBUSTIBLE TANK
- FIRE ALARM SYSTEM
- VENT-A HOOD SYSTEM & AUTOMATIC FIRE SUPPRESSION SYSTEM
- FIRE SPRINKLER SYSTEM

Submitted By: _____ Date: _____

Signature: _____

Three (3) sets of plans are required at time of Application Submittal

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