



Office Use Only:
 Permit No: _____
 Total Fee _____

Fire Suppression Permit Application - Commercial

THE APPLICANT IS: OWNER CONTRACTOR

SITE ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

JOB DESCRIPTION: _____ VALUATION: \$ _____

CONTRACTOR	COMPANY NAME _____ LICENSE # _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ CONTACT NAME _____ OFFICE PHONE # _____ PHONE # WHERE YOU CAN BE REACHED _____ EMAIL: _____																											
OWNER	NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE # WHERE YOU CAN BE REACHED _____ EMAIL: _____																											
TYPE OF WORK	<input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTER / REMODEL <input type="checkbox"/> REPAIR <input type="checkbox"/> REPLACE <input type="checkbox"/> DEMOLITION																											
PERMIT SUB-TYPE	<input type="checkbox"/> AUTOMATIC FIRE-EXTINGUISHING SYS <input type="checkbox"/> HAZARDOUS MATERIAL <input type="checkbox"/> STANDPIPE SYSTEMS <input type="checkbox"/> INDUSTRIAL OVENS <input type="checkbox"/> FLAMMABLE & COMBUSTIBLE LIQUIDS SYSTEMS <input type="checkbox"/> LP GAS <input type="checkbox"/> PAINT BOOTH																											
FIRE ITEMS	<table border="0"> <tr> <td><u>QTY</u></td> <td><u>FIRE ITEMS</u></td> </tr> <tr> <td>_____</td> <td>DRY SYSTEM</td> </tr> <tr> <td>_____</td> <td>WET SYSTEM</td> </tr> <tr> <td>_____</td> <td>PREACTION SYSTEM</td> </tr> <tr> <td>_____</td> <td>DELUGE SYSTEM</td> </tr> <tr> <td>_____</td> <td>COMPRESSED GASES</td> </tr> <tr> <td>_____</td> <td>FIRE PUMPS & RELATED EQUIP.</td> </tr> </table>	<u>QTY</u>	<u>FIRE ITEMS</u>	_____	DRY SYSTEM	_____	WET SYSTEM	_____	PREACTION SYSTEM	_____	DELUGE SYSTEM	_____	COMPRESSED GASES	_____	FIRE PUMPS & RELATED EQUIP.	<table border="0"> <tr> <td><u>QTY</u></td> <td><u>FIRE ITEMS</u></td> </tr> <tr> <td>_____</td> <td>NEW SPRINKLER HEADS</td> </tr> <tr> <td>_____</td> <td>RELOCATED SPRINKLER HEADS</td> </tr> <tr> <td>_____</td> <td>SPARE SKRINKLER HEADS & WRENCH</td> </tr> <tr> <td>_____</td> <td>UNDERGROUND FUEL TANK</td> </tr> <tr> <td>_____</td> <td>ABOVE GROUND FUEL TANK</td> </tr> </table>	<u>QTY</u>	<u>FIRE ITEMS</u>	_____	NEW SPRINKLER HEADS	_____	RELOCATED SPRINKLER HEADS	_____	SPARE SKRINKLER HEADS & WRENCH	_____	UNDERGROUND FUEL TANK	_____	ABOVE GROUND FUEL TANK
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THE UNDERSIGNED HEREBY AGREES THAT, IN CASE SUCH PERMIT IS GRANTED, THAT ALL WORK WHICH SHALL BE DONE AND ALL MATERIALS WHICH SHALL BE USED SHALL COMPLY WITH THE PLANS AND SPECIFICATIONS HEREWITH SUBMITTED AND WITH ALL THE ORDINANCES OF SAID CITY OF DAYTON APPLICABLE HERETO.

NAME OF APPLICANT (please print) _____

APPLICANT'S SIGNATURE: _____ DATE: _____

OFFICE USE ONLY:

SYSTEM TYPE:

- ___ NEW
- ___ ADDITION
- ___ REPAIR
- ___ DEMOLISH
- ___ REPLACE
- ___ ALTER/REMODEL

INSPECTIONS:

- ___ ROUGH-IN
- ___ AIR TEST
- ___ HYDRO-STATIC TEST
- ___ FLOW TEST
- ___ TANK / PIPING REMOVAL
- ___ FIRE PUMP TEST
- ___ MAIN DRAIN TEST
- ___ TRIP TEST
- ___ FINAL

PERMIT FEE:

- PERMIT FEE: \$ _____
- SURCHARGE: \$ _____
- OTHER: \$ _____
- TOTAL:** \$ _____

REQUIRE APPROVAL:

BUILDING INSPECTOR: _____ DATE: _____

FIRE INSPECTOR: _____ DATE: _____

COMMENTS: _____
