



OFFICE USE ONLY

Permit #

Date Received

Fire Suppression Permit Application

| TYPE OF SUBMITTAL | | |
|--|--|-------|
| <input type="checkbox"/> New Construction <input type="checkbox"/> Add/Alteration/Replacement <input type="checkbox"/> Affidavit | | |
| TYPE OF SYSTEM | | |
| <input type="checkbox"/> Sprinkler <input type="checkbox"/> Hood Suppression <input type="checkbox"/> Other: | | |
| JOB SITE INFORMATION AND LOCATION | | |
| Job site address: | | |
| City/State/ZIP: | | |
| Project name: | | |
| DESCRIPTION OF WORK | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| PROPERTY OWNER | | |
| Name: | | |
| Address: | | |
| City/State/ZIP: | | |
| Phone: | | |
| Email: | | |
| APPLICANT | | |
| Business name: | | |
| Contact name: | | |
| Address: | | |
| City/State/ZIP: | | |
| Phone: | | |
| E-mail: | | |
| CONTRACTOR | | |
| Business name: | | |
| Address: | | |
| City/State/ZIP: | | |
| Phone: | | |
| E-mail: | | |
| CCB License: | | |
| Authorized Signature: | | |
| Print name: | | Date: |

| REQUIRED INFORMATION | | | | |
|---|----------------------|------------------------|----------------------|------------------------|
| Valuation: \$ | | | | |
| Occupancy: | | | | |
| Construction Type: | | | | |
| AFFIDAVIT INFORMATION | | | | |
| Addition of up to 10 sprinkler heads may be done under an affidavit. If all affidavit requirements (see below) are true, work may be done without plan review. A sketch showing the area of work within the building's structure should be submitted with this application. | | | | |
| PROPOSED OR ALTERED | QTY | | | |
| Sprinkler Heads | | | | |
| AFFIDAVIT REQUIREMENTS | | | | |
| <input type="checkbox"/> All work is limited to drops and armovers in a light-hazard occupancy with like sprinkler heads, e.g., standard response, quick response. | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Type: WET</td> <td style="width: 33%;">Hazard: LIGHT</td> <td style="width: 33%;">Density: .10gpm</td> </tr> </table> | | Type: WET | Hazard: LIGHT | Density: .10gpm |
| Type: WET | Hazard: LIGHT | Density: .10gpm | | |
| <input type="checkbox"/> Positions of sprinkler heads relative to architectural features such as soffits, beams, partitions, walls, etc. complies with the current adopted edition of NFPA 13. | | | | |
| <input type="checkbox"/> The proposed work does not require hydraulic calculations because sprinklers use standard spacing and are not extended coverage or other specialized type of sprinkler. | | | | |
| <input type="checkbox"/> Only one sprinkler head will be installed from one drop (exception: up to two heads from one drop may be installed when each head is in a separate fire area). | | | | |
| <input type="checkbox"/> The area covered per sprinkler head is limited to the spacing requirements of NFPA 13. | | | | |
| <input type="checkbox"/> Tenant improvements in a new building shall be equipped with Quick Response heads. | | | | |
| <input type="checkbox"/> The installation shall comply with the requirements of the current adopted edition of NFPA 13. | | | | |
| <input type="checkbox"/> Piping shall not be concealed until hangers and bracing are inspected. | | | | |
| <input type="checkbox"/> Final approval shall be subject to onsite tests and inspections. | | | | |
| BUILDING PERMIT FEES | | | | |
| Plan Review Fee | | | | |
| State Surcharge (12% of permit fee) | | | | |
| TOTAL PERMIT FEE | | | | |

This permit application expires if a permit is not obtained within 180 days.

Development Services & Permitting Center