



## FIRE SUPPRESSION SYSTEM PERMIT APPLICATION

TYPE OR PRINT ALL INFORMATION

Date \_\_\_\_\_

TYPE OF SYSTEM:

- Installation of a fire sprinkler system in a new building under construction.
- Installation of a fire sprinkler system in an existing building.
- Repair, modification or alteration to an existing fire suppression system.
- Installation of a fire suppression system, other than a fire sprinkler system. (List type below)

○ \_\_\_\_\_

Building Name (If applicable) \_\_\_\_\_

Street Address of Alarm System Installation: \_\_\_\_\_

Tenant Name: \_\_\_\_\_ Tel. \_\_\_\_\_

Property Owner: \_\_\_\_\_ Tel. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

System Contractor: \_\_\_\_\_ Tel. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

System Contractor Project Manager: \_\_\_\_\_ State License # \_\_\_\_\_

\_\_\_\_\_  
(Signature)

*All applicable information outlined in NFPA standards and the Uniform Fire Code, along with fee payment must be received with this application prior to plan review. Installation of any portion of the system is not allowed prior to issuance of the permit.*

Office Use Only:

Required System:  Y  N

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Total Fee: \$40 Permit # Issued \_\_\_\_\_ Receipt # \_\_\_\_\_

Make permit fees payable to "Hailey Fire Department", P.O. Box 1192, Hailey ID, 83333 Tel. 208-788-3147, FAX 208-788-0279