

CONCORD FIRE & LIFE SAFETY

FIRE EXTINGUISHING SYSTEM PERMIT APPLICATION

Submit at:

Concord Fire & Life Safety
 Fire Marshal's Office
 100 Warren C. Coleman Blvd N.
 Concord, NC 28027
 (704) 920-5517; fax (704) 920-6936

Development # _____
 Project # _____
 Permit # _____

[THIS BOX FOR STAFF USE ONLY]

Permit Fees paid at time of application are **NON-REFUNDABLE**
 (Standard: Total fee due at application)
 Permit \$150 and Test Inspection \$150 – Payable to City of Concord

** If you want an approved copy returned, please submit 2 copies & enclose a self-stamped, addressed envelope.*

Project Name/Tenant _____	Bldg Permit # _____
Site Address _____	Unit/Bldg/Suite # _____
Complex Name _____	Tax Parcel # _____

Contractor Name _____	Phone # _____
Contact Name _____	Fax # _____
Business Address _____	City _____ State, ZIP _____
State License Number _____	State License Expiration Date _____
e-mail address _____	Concord Business License # _____

~ TYPE OF WORK ~

Type of Fixed Extinguishing System:

A device is defined as: fusible link, nozzle, manual pull station, or agent cylinder.

- | | | |
|--|--------------------|-----------------------|
| <input type="checkbox"/> Kitchen Hood (UL 300) | # of devices _____ | Releasing Panel _____ |
| <input type="checkbox"/> Paint and/ Spray Booth | # of devices _____ | Releasing Panel _____ |
| <input type="checkbox"/> Other _____ | # of devices _____ | Releasing Panel _____ |

Description of work (if additional space is needed the information should be placed on company letterhead):

NOTE: A separate fire alarm permit is required for the connection of any fire protection system to a new or existing fire alarm system.

I understand that all applicable codes apply. Errors and/or omissions on the plans and corrections from field inspections are the responsibility of the owner/contractor. All work is subject to the compliance with City of Concord ordinances and laws of the State of North Carolina.

SIGNATURE

PRINT NAME (Applicant)

PHONE

DATE
