



# CITY OF BAYTOWN

## FIRE SYSTEMS PERMIT APPLICATION

PROJECT ADDRESS: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

OWNER'S/APPLICANT NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OWNER'S E-MAIL ADDRESS: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTRACTORS E-MAIL ADDRESS: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

FAX: (\_\_\_\_) \_\_\_\_\_

\_\_\_ RESIDENTIAL      \_\_\_ COMMERCIAL      Sq. Ft. of BUILDING: \_\_\_\_\_

DESCRIPTION OF IMPROVEMENT: \_\_\_\_\_

<i>PERMIT TYPE</i>	
FUEL TANK – Install./Removal	# OF TANKS – Install./Remove
UNDERGROUND FIRE LINE	REMOTE FDC LINE
<i>FIRE ALARMS</i>	
# OF FIRE ALARM PANELS	# OF ALERTING DEVICES
# OF INITIATING DEVICES	
<i>FIRE SPRINKLER SYSTEMS</i>	
# OF SPRINKLER RISERS	# OF SPRINKLER HEADS
<i>HOOD SUPPRESSION SYSTEM</i>	
# OF SUPPRESSION HEADS	

PLEASE SUBMIT 2 PAPER COPIES OF THE PROPOSED PLANS, AND A DIGITAL COPY THAT INCLUDE CUT SHEETS FOR ALL DEVICES USED AND HYDRALIC CALCULATIONS, WHERE APPLICABLE. THE FIRE DEPARTMENT WILL CONTACT YOU WHEN THE REVIEW IS COMPLETED. PLANS SHALL BE PICKED UP AT CITY HALL, PERMIT COUNTER.

AN APPROVED SET OF PLANS MUST BE ON THE JOB SITE DURING CONSTRUCTION AND FOR THE FINAL SYSTEM INSPECTION.

ALL MATERIALS USED WILL BE OF THE "APPROVED" TYPE AND ALL WORK SHALL BE INSTALLED IN ACCORDANCE WITH THE CITY ORDINANCES REGULATING ELECTRICAL, PLUMBING OR MECHANICAL CONSTRUCTION IN THE CITY OF BAYTOWN. NO ALTERATIONS OR ADDITIONS SHALL BE MADE IN THE PERMITTED SYSTEM WITHOUT WRITTEN PERMISSION FROM THE FIRE MARSHAL'S OFFICE.

APPLICANT PRINTED NAME \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_

OFFICE USE ONLY	
FIRE SYSTEM PERMIT NO.: _____	BUILDING PERMIT NO.: _____
FIRE MARSHAL REVIEW: _____	DATE: _____