Department of **CITY PLANNING**

OFFICE OF BUILDINGS FIRE LIFE SAFETY GROUP DIVISION 55 Trinity Avenue, 3rd Floor, Suite 3800

FIRE SPRINKLER

Control				(404) 546-0183		Permit Appli	Lation
		Building Permit Number:			lential	Commercial	
		JOB ADDRESS					
	Issued By		Street Address			Suite / Uni	t Number
			Business Name	,			
		CONTRACTOR INFORMATION	Certificate of Competency Holder's Name	Company Na	me		
		Check Box	certificate of competency fronters frame	Company Na	inc .		
		if Contractors	Street Address				
		Phone Number, Fax Number, and/or				7: 0.1	
	Issue Date	Address changed so our records can be	City	State		Zip Code	
		updated.	Phone	Fax	Ī	Email	
			CL-	CC -			
			State License Number WORK DESCI		Competency Number	QTY FEE	COST
		FIRE SPRIN	KLER SYSTEM - PER H			\$0.40	COSI
		D. A. CIVIET ONLINE DELIVERATED C					
7		BACKFLOW PREVENTERS				\$10.00	
		Fire Water service line - Commercial (Per Linear Foot)				\$0.50	
	er						
	ermit Number	Fire Water serv	vice line - Residential			\$10.00	
	Pe	COMMENTS / JOB DESCRIPTION:					
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T							
-							
NO		The above sta	atements are true to the best of my knowledge, and I,	the undersigned do hereby agree that La	m responsible for this installati	ion meeting all code requir	rements
USE			, ,	, ,		Date:	
FOR OFFICE USE ONLY		Contractor's Signature:				Permitting Fees: \$	
			can be scheduled through th		W	Technology Fee:	
FOF		calling (404) 658-6800			Total	Fees:	\$