



<u>For office use only:</u>	Fire Permit # _____
	Associated BP # _____
	Fee pd. _____
	Rec. # _____
Fire Department Approval: _____	Date : _____
Bldg. Department Approval: _____	Date: _____

Fire System Permit Application

Date: _____ Permit Type: Fire Sprinkler Fire Alarm Comm. Cooking Suppression Special Area System

Contact Information			
Property Owner:	_____ / _____ / _____		
	Name	Phone	Email
Mailing address:	_____ / _____ / _____		
	Address	City	State Zip
Applicant (contact):	_____ / _____ / _____		
	Name	Phone	Email
Contractor:	_____ / _____ / _____		
	Name	Phone	Email
St. Cont. License #:	_____	City Business License #:	_____
Designer:	_____ / _____ / _____		
	Name	Phone	Email
St. Designer. License #:	_____	City Business License #:	_____

Project Information			
Project Location:	_____		
Block:	_____	Lot(s):	_____
		APN(s):	_____
Project affects:	<input type="checkbox"/> Single Family Dwelling	<input type="checkbox"/> Multi-family Dwelling	<input type="checkbox"/> Commercial property <input type="checkbox"/> Change in Use
Description of Work:	_____		
Valuation of Project: \$	_____		

Declarations	
<p>I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction and hereby authorize representatives of the City of Carmel-by-the-Sea and Monterey Fire Department to enter upon the above-referenced property for inspection purposes. I also agree to save, indemnify, hold harmless the City of Carmel-by-the-Sea and Monterey Fire Department, against all liabilities, judgments, costs, and expenses which may in any way accrue against said City and Department in consequence of the granting of this permit.</p>	
_____	_____
Applicant Name	Date

Applicant Signature	
City of Carmel-by-the-Sea – P.O. Box CC, Carmel-by-the-Sea, CA 93921 – 831-620-2010	