ADDRESS: ______________________________________________________ DATE: ________________________

OWNER/APPLICANT: __________________________________ PHONE/EMAIL: ____________________________

PROJECT DESCRIPTION: PERMIT #: B____-____________

____________________________________________________________________________________________
____________________________________________________________________________________________

ALL STRUCTURES:

AVAILABLE FIRE FLOW IS LESS THAN THE MINIMUM REQUIRED ___________ GPM AT 20 PSI Yes ☐ No ☐

FIRE HYDRANT LOCATIONS EXCEED 400-FEET ALONG AN APPROVED PATH: Yes ☐ No ☐

FIRE DEPARTMENT ACCESS EXCEEDS 150-FEET ALONG AN APPROVED PATH: Yes ☐ No ☐

DETACHED ACCESSORY DWELLING UNITS:

TOTAL GROSS FLOOR AREA EXCEEDS 1,200 SQUARE FEET: Yes ☐ No ☐

PRIMARY RESIDENCE HAS AUTOMATIC FIRE SPRINKLERS: Yes ☐ No ☐

REMODELS/ADDITIONS/ATTACHED ACCESSORY DWELLING UNITS:

AUTOMATIC FIRE SPRINKLERS ARE EXISTING: Yes ☐ No ☐

TOTAL GROSS FLOOR AREA OF EXISTING STRUCTURE: ______________ 50% = __________________

PROPOSED TOTAL GROSS FLOOR AREA OF ADDITION: ________________________________

PROPOSED TOTAL GROSS FLOOR AREA OF REMODEL: _________________________________

GROSS FLOOR AREA WHERE CHANGES TO USABILITY OCCUR:  ______________

GROSS FLOOR AREA OF CEILING FINISHES TO BE MODIFIED: ______________

TOTAL ADDITION + REMODEL AREAS EXCEEDS 50% OF EXISTING TOTAL GROSS FLOOR AREA: Yes ☐ No ☐

AUTOMATIC FIRE SPRINKLERS REQUIRED: Yes ☐ No ☐

1 Record area of modification that is not otherwise already identified elsewhere in this section.

NOTES: _____________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

___________________________________________      ______________________________       _____________
Signature: Fire Marshal or Representative   Print Name     Date