

**TOWN OF McCANDLESS
FIRE SUPPRESSION PERMIT APPLICATION**

You Must Submit the Building Permit Number: _____

Job Site Street Address: _____ Zoning District: _____

Building Name: _____ Use Group: _____

Location of Work (i.e., floor, level): _____ Hazard Group: _____

Is Building Sprinklered Throughout? _____

Owner: _____ Phone: _____

Owner's Address: _____

City/State/Zip: _____

DESCRIPTION OF WORK

TYPE OF SYSTEM:

Wet System	
Dry System	
Limited Area	
Clean Agent	
Commercial Cooking Hood Suppression System	

SYSTEM COMPONENTS:

	Size
Standpipes/Risers	
Firehose Connection	Pgh 6
Firepump	
Fire Dept. Connections	2 - 2 1/2
Underground Fire Main	

SYSTEM DESIGN:

Hydraulically Calculated	Y / N
Pipe Scheduled	Y / N
Tied Into Fire Alarm	Y / N

TYPE & NUMBER OF HEADS

	New	Relocated
Upright		
Pendant		
Sidewall		

Contractor: _____ Phone: _____

Address: _____

City/State/Zip: _____

Contractor's Rep (Please Print): _____

Signature: _____ Date: _____

Approved By: _____ Date: _____