



**FIRE SPRINKLER/SUPPRESSION/ALARM
PERMIT APPLICATION**
(CONTRACTOR ONLY)

PERMIT NUMBER:
____ - ____
Must use Permit Number to request inspection.

PERMITS ARE REQUIRED TO BE ISSUED PRIOR TO START OF WORK.
FOR CITY TO PROCESS, APPLICATION MUST BE COMPLETE-DO NOT ABBREVIATE-ONLY ONE ADDRESS PER PERMIT

- A. Fire Sprinkler Permit Application*
- B. Fire Alarm Permit Application*
- C. Fire Suppression Equipment in Vent Hood or other Enclosure Application

*Submit three complete sets of detailed, scaled drawings and submittals with each application.
Accurate measurements and square footage of all areas must be on floor plans, drawings and specs.

New, Addition or Replacement Installation Alteration or Repair of Existing System

Construction Value: \$_____

Please submit the application with all the information below. An application with incomplete information or that is illegible cannot be processed for a permit. Permits issued with inaccurate information will be voided.

PROJECT INFORMATION

Address: _____
Name of Business: _____ Type of Business: _____
Owner's Name: _____
Address of Owner: _____ City: _____ Zip: _____ Phone: _____

CONTRACTOR INFORMATION

Business Name: _____ Phone: _____
Address: _____ City: _____ Zip: _____ Fax: _____
Fire Alarm License # _____ Fire Suppression License # _____

For permit on item A or B: Total Square footage of the area of the installation (Must be accurate) _____ Sq. Ft.

NOTE: DO NOT REQUEST AN INSPECTION WITH THE SUBMITTAL OF THIS FORM. THIS FORM IS FOR THE PROCESSING OF PAYMENTS ONLY. WORK STARTED PRIOR TO THE ISSUE OF A PERMIT IS SUBJECT TO PENALTIES AND CITATIONS AS PER THE ORDINANCES FOR THE CITY OF ODESSA.

I acknowledge the information submitted on this permit application is true and correct. I agree to comply with the requirements of the codes and ordinances adopted by the City of Odessa, the laws of the State of Texas and will obtain all required inspections. I understand this application is not a permit until the processing has been completed by the city and returned to the applicant with the permit number attached.

Signature: _____ **Date:** _____

Print Name Legibly: _____

Plan Picked Up By: _____ **Date:** _____

Print Name Legibly: _____

CITY CONFIRMATION OF ISSUE OF PERMIT

APPROVED BY: _____

FEE: _____

ISSUED BY: _____

DATE: _____

