

Permit # \_\_\_\_\_



# FIRE SUPPRESSION/VENT-A-HOOD SYSTEM PERMIT APPLICATION

**\*\*PLEASE SUBMIT 3 SETS OF PLANS\*\***

Date: \_\_\_\_\_

Property Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Registered with City YES / NO - Registration #: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Permit Accepted (does not guarantee approval)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approval

\_\_\_\_\_  
Date

CASH / Check # \_\_\_\_\_

\_\_\_\_\_  
Date Paid

Permit #: \_\_\_\_\_