SOUTHERN MANATEE FIRE & RESCUE

Bureau of Fire Prevention, Inspection & Investigation

APPLICATION FOR PERMIT

(To Install Fire Detection or Fire Protection System)

Project Name:		Date:
Project Address:	City:	Zip Code:
Type of Permit (Check one of the following for each a	pplication):
Sprinklers:	☐ Underground Private Fire Service	
	Aboveground Automatic Fire Supp	
Fire Alarm:	☐ Fire Alarm and Detection System	Installation
Comm. Cooking:	☐ Commercial Cooking Fire Suppres	ssion System Installation
	Other	
General Contrac	tor: Name:	
Address:	City/State:	Zip Code:
Contractor Perfo	orming the Work:	
		ct Name:
	ness Name:	
Phone #	g): Fax #:	
· ·		
	ense #:	
(N	OTE: Make sure SMFR has a current	copy of your license)
are listed below and WORK SHALL FOSTED ON THE in a comment letter	r, only an application for a permit. Permit Real must be paid at time of submittal. Fees payal BEGIN UNTIL PERMIT FOR WORK IS E JOB SITE. Any problems noted or the requito your above listed address. Three (3) sets of WCHECKLIST provided to insure all submits.	ble to Southern Manatee Fire Rescue. NO IS ISSUED BY THIS OFFICE AND IS wired re-submittal of plans will be outlined of plans shall be submitted with the Permit
Schedule i	nspections or acceptance testing at least tv	vo (2) working days in advance
F Applicable - MC PER	MIT #:	
EE PAID: \$120.00 by	□ CASH □ CHECK #:	☐ MONEY ORDER #
\$125.00 by	☐ CREDIT CARD – Contact office (941-751-7	7675) for processing. RECEIPT #:
	□ VISA □ MASTER CARD □ DEBIT CARD	ARD APPROVAL #