



# City of Fairbanks Fire Department

## Division of Fire Prevention

1101 Cushman Street, Fairbanks, Alaska 99701

P: (907) 450-6614 F: (907) 450-6666



### PERMIT APPLICATION

DATE:	JOB ADDRESS:	FACILITY NAME:
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#### **OWNER**

NAME:	MAILING ADDRESS:	
EMAIL ADDRESS:	PHONE #:	ALT. PHONE #:

#### **CONTRACTOR/ENGINEER/DESIGNER**

CONTRACTOR:	COMPANY:	SOA PERMIT #:
EMAIL ADDRESS:	PHONE #:	ALT. PHONE #:

MAILING ADDRESS:

ENGINEER/DESIGNER:	COMPANY:	SOA PERMIT #:
EMAIL:	PHONE #:	ALT. PHONE #:

MAILING ADDRESS:

#### **PROJECT SCOPE**

SYSTEM TYPE (check one):  
 Sprinkler       Fire Alarm       Kitchen Fire Suppression       Other:

CLASS OF WORK (check one):  
 New       Addition       Alteration       Repair       Demolition

VALUE OF WORK:	AREA INVOLVED:	SQUARE FEET:
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DESCRIBE WORK:

#### **SEPARATE PERMITS ARE REQUIRED FOR STREET DIGGING, BUILDING, ELECTRICAL, PLUMBING & MECHANICAL WORK**

I hereby certify that I have read and examined this application and know the same to be correct. All provisions of laws and ordinances governing this type of work will be compiled and whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any law regulating construction or installation. I agree that the work will be described above per the approved plans, specifications, and conditions further set forth by the Fairbanks Fire Department. It is the duty of the applicant to ensure that the work is exposed and accessible for inspection until approved by the Fire Marshal or his acting official as specified by code.

SIGNATURE OF OWNER/CONTRACTOR/ATHORIZED AGENT:	PRINT NAME:	DATE:
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