



For official use only:
APP #: _____
Complete: _____

FIRE PERMIT APPLICATION

PROJECT INFORMATION

Name of Project/Plaza/Subdivision _____

Job Address _____ Unit/Bay # _____

Folio # _____ Legal: Lot _____ Block _____ Section _____

Tenant Name _____ Property Type: [] Residential [] Commercial

Proposed Use _____ Previous Use _____

Type of Work: [] New [] Addition [] Alteration [] Demo [] Repair [] Supplemental [] Other _____

Existing Sq. Footage _____ New Sq. Footage _____ Number of Floors _____

Type of Construction _____ Occupancy _____ Occupant Load _____

Is the proposed work a corrective action for a code violation? [] No [] Yes Case # _____

Description of Work _____

Code in Effect: FBC _____

Total Estimated Value: Entire Project \$ _____ This Application \$ _____

OWNER INFORMATION

Name _____

Address _____ City _____ State _____ ZIP _____

Phone _____ Email _____

Contact Name _____ Contact Phone _____

CONTRACTOR INFORMATION

Name _____ License # (State Cert / BC COC) _____

Address _____ City _____ State _____ ZIP _____

Phone _____ Email _____

Contact Name _____ Contact Phone _____

DESIGNER INFORMATION

Name _____

Address _____ City _____ State _____ ZIP _____

Phone _____ Email _____

Contact Name _____ Contact Phone _____

OTHER INFORMATION

Fee Simple Titleholder's Name (if other than owner) _____

Fee Simple Titleholder's Address (if other than owner) _____

Bonding Company Name and Address _____

Mortgage Lender's Name and Address _____

Agent Name, Email and Phone _____

Tenant Name, Email and Phone _____

Contractor to check all applicable permit types and complete quantities. **Shaded areas are for City use only.**

PERMIT TYPE	QUANTITY	CITY FEE	PERMIT TYPE	QUANTITY	CITY FEE
<input type="checkbox"/> New Construct/Add/Alt	_____ SF	\$ _____	<input type="checkbox"/> FIRE PUMPS		
<input type="checkbox"/> FIRE ALARM PANELS			<input type="checkbox"/> Control 750 GAL/MIN	_____ #	\$ _____
<input type="checkbox"/> Annunciator Panel	_____ #	\$ _____	<input type="checkbox"/> Control 1000 GAL/MIN	_____ #	\$ _____
<input type="checkbox"/> Detector Heads	_____ #	\$ _____	<input type="checkbox"/> Control 1250 GAL/MIN	_____ #	\$ _____
<input type="checkbox"/> Pull Stations	_____ #	\$ _____	<input type="checkbox"/> Control 1500 GAL/MIN	_____ #	\$ _____
<input type="checkbox"/> Horn Strobe/Strobe	_____ #	\$ _____	<input type="checkbox"/> Control 1750 GAL/MIN	_____ #	\$ _____
<input type="checkbox"/> Flow/Tamper Switches	_____ #	\$ _____	<input type="checkbox"/> Control 2000 GAL/MIN	_____ #	\$ _____
<input type="checkbox"/> Phone Stations	_____ #	\$ _____	<input type="checkbox"/> FIRE SUPPRESSION		
<input type="checkbox"/> Smoke Detector	_____ #	\$ _____	<input type="checkbox"/> 1 Cylinder/2 Heads	_____ #	\$ _____
<input type="checkbox"/> Access Control Locks	_____ #	\$ _____	<input type="checkbox"/> Additional Heads	_____ #	\$ _____
<input type="checkbox"/> FIRE SPRINKLERS			<input type="checkbox"/> Additional Cylinders	_____ #	\$ _____
<input type="checkbox"/> Flow/Tampers	_____ #	\$ _____	<input type="checkbox"/> Control Panel	_____ #	\$ _____
<input type="checkbox"/> Siamese Connection	_____ #	\$ _____	<input type="checkbox"/> Detector Head	_____ #	\$ _____
<input type="checkbox"/> Hose Cabinet	_____ #	\$ _____	<input type="checkbox"/> Tents/Canopies	_____ #	\$ _____
<input type="checkbox"/> Sprinkler Heads	_____ #	\$ _____	<input type="checkbox"/> Misc:	_____ #	\$ _____

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

FEE	AMOUNT
Zoning Balance	\$ _____
Zoning Technology	\$ _____
Board of Rules & Appeals	\$ _____
Certification Maintenance	\$ _____
DBPR Surcharge	\$ _____
DCA Surcharge	\$ _____
Fire Technology	\$ _____
Other	\$ _____
FEE TOTAL	\$ _____
DEPOSIT CREDIT	\$ _____
TOTAL DUE	\$ _____

Signature _____ Date _____
Owner or Agent

Print Name _____

STATE OF FLORIDA, COUNTY OF BROWARD
Sworn to (or affirmed) and subscribed before me this _____
day of _____, 20____, by _____

NOTARY'S SIGNATURE as to Owner/Agent

Print NOTARY PUBLIC's Name

Personally Known Produced Identification

Type of Identification Produced _____

Signature _____ Date _____
Contractor's Qualifier

Print Name _____

STATE OF FLORIDA, COUNTY OF BROWARD
Sworn to (or affirmed) and subscribed before me this _____
day of _____, 20____, by _____

NOTARY'S SIGNATURE as to Contractor

Print NOTARY PUBLIC's Name

Personally Known Produced Identification

Type of Identification Produced _____

Permit is not valid until signed by an authorized representative of the CITY OF SUNRISE FIRE DEPARTMENT and all applicable fees are paid.

FOR OFFICE USE ONLY: Application Approved By _____ Date _____
Current License on File? Yes No Checked By _____ Date _____