



Fire Alarm & Sprinkler Permit Application

Date _____

PERMIT NO. _____

Required fields are marked with ➤ and must be filled in. Please ensure that all required fields have been completed. If you are not using a mechanics' lien agent, please mark "None" in that section. If there is no tenant or lessee, mark "None" in that section.

ADDRESS OF BUILDING

➤ _____ Falls Church, VA _____ ➤

Street Address _____ Unit # _____ Zip _____

CONTRACTOR OR OTHER APPLICANT

MECHANICS' LIEN AGENT (Residential Only) NONE

➤ Name _____ Phone H. O. C. _____ ➤

➤ Address _____ ➤

City _____ State _____ Zip Code _____

VA State License Number _____ Class _____

BUILDING OWNER INFORMATION

TENANT OR LESSEE INFORMATION NONE

➤ Name _____ Phone H. O. C. _____ ➤

➤ Address _____ ➤

City _____ State _____ Zip Code _____

TYPE OF SYSTEM TO BE INSTALLED

CONTRACT PRICE

Low-Voltage Fire Alarm System Water Sprinkler System Chemical Fire Suppression System

➤ \$ _____

TYPE OF WORK

Qty	Fire Alarm Item	Qty	Sprinkler/Chemical Suppression Item
	Panels		Stand Pipe: Number of Standpipes: _____ Floors Each: _____
	Pull Stations: _____ Bells: _____ Strobes: _____ Gongs: _____		Pumps
	Heat Detectors: _____ Smoke Detectors: _____ Door Locks: _____		Heads
<i>enter total qty</i>	Flow Switches: _____ Tamper Switches: _____		

Please note the State Contractor License endorsement requirements necessary for a permit. To install a fire alarm, you must have a Master Electrician's License and either the ELE or FAS endorsement on the State Contractor's License.

To install a sprinkler system you must have the SPR endorsement, or a PLB endorsement for limited-area sprinklers as defined by BOCA. To install any chemical fire suppression system, you must have the FSP endorsement.

VA STATE MASTER ELECTRICIAN'S LICENSE

Name: _____ VA State License #: **2710-** _____ Expires: _____

Check Policy - The City of Falls Church accepts checks as a form of payment. However, should your check be returned to us for any reason, it is our policy to electronically debit your account for the amount of the check plus a processing fee of \$50.00.

I hereby certify the proposed work is authorized by the property owner and I have been authorized by all involved parties to make this application. We agree to conform to all applicable laws, codes, and ordinances of the City of Falls Church.

➤ Signature of Applicant _____ Date _____ Address _____

➤ Print Name _____ Phone to Call When Permit Ready _____ City _____ State _____ Zip Code _____

The City of Falls Church is committed to the letter and spirit of the Americans with Disabilities Act. This document will be made available in alternate format upon request. Call 703 248-5080, (TTY 711).

OFFICIAL USE ONLY

Approvals

Permit Fee

Building Official _____ Date _____
Approved Per VUSBC Only

Base Permit Fee _____

2% State Levy _____

Total Permit Fee _____

No other approvals required IBTS Fire Review Required? Yes No Date Received _____