

BUILDING DIVISION

COMMERCIAL FIRE SUPPRESSION

64 E. Walnut St. Westerville, OH 43081-2308 t. (614) 901-6650 f (614) 901-6666

APPLICATION FORM

t. (614) 901-6650 f. (614) 901-6666		PERM	MIT # (Office use only)
DATE	PARCEL #	BLDG PERN	MIT # (If applicable)
PROJECT		PROJECT	(п аррпсаые) te #)
			ZIP
PROPERTY OW			
NAME			
ADDRESS			
			ZIP
PHONE	EMAIL		
CONTRACTOR			
COMPANY NAME	<u> </u>		
CONTACT			
ADDRESS			
CITY		STATE	ZIP
PHONE	EMAIL		
SYSTEM INFOR	MATION		
NEW SYSTEM	KITCHEN HOOD SUPPRESSION SYSTE	ALTERATION/AD TO EXISTING SYS	I I CILLED
DESCRIPTION O	F WORK		
COST OF WORK	G	ROSS SQ. FOOTAGE OF C	ONSTRUCTION

(To include all floors)



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SYSTEM INFORMATION (CONT.)						
TYPE OF SYSTEM HAZARD CONTROL OF SYSTEM DEMAND @ BASE OF RISER	LASSIFICATION					
USE GROUP CLASSIFICATION						
ASSEMBLY A- HIGH HAZARD H- STORAGE S- BUSINESS INSTITUTIONAL I- EDUCATIONAL MERCANTILE FACTORY/INDUSTRIAL F- UTILITY						
In consideration of permission granted I/We agree to constru with all applicable codes and regulations of the City of West responsible for coordinating and scheduling the required ins	erville. Please remember that the applicant is					
SIGNATURE OF APPLICANT/PROJECT CONTACT Also sign p. 3	DATE					
PRINTED NAME	PHONE NUMBER					



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APPLICATION CHECKLIST

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(611) 361 6666	(OFFICE USE ONLY)	PERMIT #		
Please ensure that you have incl (If online submission, follow the i the Online Plan Submission Ports	nstructions & require	ments in the <i>Submi</i>	<i>ission Guide</i> and s	•
Completed application form	٦.			
Building Plans: plans with t professional's seal on each				
If applicable, please describe the Incomplete applications will <u>not</u>		ns not included and	the reason(s) wh	у.
Note: Fees are <u>not</u> paid until appage (accessible from the Form				
y signing below I agree tha and that failure to do so may				
SIGNATURE O	APPLICANT		DATE	