



CENTRAL COUNTY FIRE PERMIT APPLICATION

TODAY'S DATE: _____

PROJECT ADDRESS: _____ UNIT# _____

This is a Single Family Residence _____
 Apartment Building of _____ units
 Commercial Single Story Multi-Story
 There is currently no structure on this parcel.
 Other (please specify) _____

PROPERTY OWNER TENANT

Name: _____
Address: _____
City/ST/Zip: _____
Day Phone: _____

ENGINEER DESIGNER

Name: _____
Registry # _____
Address: _____
City/ST/Zip: _____
Day Phone #: _____

CONTRACTOR OWNER - BUILDER

Lic. # _____ Lic. Class _____
Namestyle: _____
Address: _____
City/ST/Zip: _____
Day Phone #: _____
City Business Lic. # _____

Certification of Applicant (Hillsborough Only)

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all City Ordinances and State laws regulating building construction. I further state the contract price of the job is:
\$ _____ x 1/2 % (.005) = \$ _____
Signed _____ Date _____

CONTRACTOR ATTEST: I certify under penalty of perjury that I am self-employed and have *no employees*, and am therefore exempt from California Workers Compensation laws.

Signature: _____

FOR OFFICE USE ONLY:

Verify Workers Comp ON FILE _____
Expiration Date _____

DESCRIPTION OF WORK: (Please fill in and mark all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Fire Alarm System | <input type="checkbox"/> Fixed Extinguishing System | <input type="checkbox"/> Standpipe |
| <input type="checkbox"/> Fire Monitoring System | <input type="checkbox"/> High Piled Storage | <input type="checkbox"/> Storage Tank Install |
| <input type="checkbox"/> Fire Sprinkler System | <input type="checkbox"/> Sprinkler Underground | <input type="checkbox"/> Other |

Other/Additional Description:

Building Permit #: _____

PROJECT CONTACT PERSONS:

During Plan Check: _____ Fax # _____
Day Phone # _____
During Construction: _____ Day Phone # _____
Email Address: _____

Applicant's Signature:

Name Printed: