



CENTRAL COUNTY FIRE CONSTRUCTION PERMIT APPLICATION

EXPEDITE

PROJECT ADDRESS: _____
SUITE#: _____
CITY: _____
FIRE PERMIT# _____
BUILDING PERMIT# _____

COMMERCIAL
 RESIDENTIAL

APPLICANT/INSTALLING CONTRACTOR INFORMATION

Company name: _____
Address/City/State: _____
Contact name: _____
Contact phone number: _____
Contact email address: _____
Contractor license number and type: _____
Worker's Compensation number: _____
City business license number: _____
Contact name and cell phone number during construction:

OWNER/BUILDER ONLY

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 law.

Print name: _____
Signature: _____

FOR HILLSBOROUGH PROJECTS ONLY

I hereby acknowledge that I have read this application and state that all 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) = \$_____

Signature: _____

DESCRIPTION OF WORK

Fire Alarm

- New building alarm or control panel replacement
- New fire sprinkler monitoring system
- Existing system: remodel or repair (5 or more devices)
- Existing system: minor remodel (less than 5 devices)

Fire Sprinkler

- New single-family dwelling/duplex residential system
- New commercial or multi-residential system
- Existing system: remodel or repair (5 or more heads)
- Existing system: minor remodel (less than 5 heads)
- Underground fire service line (repair/remodel)
- Standpipe system

OTHER PERMIT

- Emergency Responder Radio Coverage System
- Fixed-extinguishing system

Description:

Applicant's Signature: _____

Date: _____



Central County Fire Department

Serving the communities of Burlingame, Hillsborough and Millbrae

FIRE ALARM PERMIT

Address _____ Permit# _____

ALL NEW FACU's REQUIRE 24 HOUR BATTERY TEST (EXCEPTION: SPRINKLER MONITORING SYSTEMS)

Type	Inspector	Date	Comments
System test			
Elevator recall test			
Two-way communication test			
Two-way communication signage			
Record of Completion			
Documents cabinet			
Final			

PLEASE CALL (650) 558-7615 TO SCHEDULE AN INSPECTION