FIRE SUPPRESSION & FIRE ALARM SYSTEMS
Permit Application

University Place WASHINGTON

3609 Market Place W, Suite 200
University Place, WA 98466-4488
PH: 253.566.5656

	PERMIT #: FPS	
PROJECT ADDRESS (Street, City, State, Zip):	**PARCEL #:**	
Project Name:	Project Square Ft.:	
APPLICANT:	Phone:	Fax:
Address (Street, City, State, Zip):	E-Mail Address:	
PROPERTY OWNER:	Phone:	Fax:
Address (Street, City, State, Zip):	E-Mail Address:	
CONTRACTOR*:	Phone:	Fax:
Address (Street, City, State, Zip):	License #/Exp Date:	

Contractor must have a valid City of University Place business license prior to doing work in the City. Contact the Business Licensing Office @ 253.566.5656.

STATE FIRE SPRINKLER CONTRACTOR'S #:_____

TYPE OF INSTALLATION:

- ☐ Automatic Sprinkler- RESIDENTIAL
- ☐ Automatic Sprinkler- COMMERCIAL
- ☐ Automatic Fire Alarm System:
  - ○ addressable ○ conventional
- ☐ Manual Fire Alarm System
- ☐ Standpipe System
- ☐ Underground Sprinkler Supply
- ☐ Range Hood Suppression
- ☐ Other (Specify):_____

EXTENT OF WORK: ☐ New ☐ Addition ☐ Remodel

BACKFLOW: Size:_____

Make:_____

TYPE OF OCCUPANCY USE:_____

Model:_____

APPLICATION GUIDELINES:

1. Submit one (1) set of shop drawings - hydraulic calculations and cut sheets to be included with each set.
2. All fire protection systems require tests. The test requirements will be attached to the approved plans. These tests must be conducted in the presence of the Fire Code Official. Fire inspections are performed on Tuesdays and Wednesdays, or by prearranged appointment with Fire Code Official. Call 253.460.2540 by 3:00 p.m. on the business day prior to the requested inspection date.
3. Provide a current copy of your contractor's license and fire sprinkler level (2/3) competency certificate. NICET level I for residential, level III for commercial.

I hereby certify that the information provided is correct and that the construction on the above-described property, the occupancy, and use will be in accordance with the laws, rules, and regulations of the State of Washington and the University Place Municipal Code.

Print Name:_____ ☐ Owner ☐ Agent/Other (specify):_____

Signature:_____ Date:_____