



**TOWN OF CAPE CHARLES
APPLICATION FOR FIRE PREVENTION PERMIT**

Date _____

BUILDING PERMIT NUMBER: _____
(IF APPLICABLE)

A permit is hereby requested to install the following fire protection system at:

Street address: _____ Lot # / Suite # _____

Owner / Occupant Name: _____

Builder: _____

Building: ___ New ___ Existing ___ Addition ___ Moved

Type of system to be installed:

Underground Fire Main	_____	Standpipe System	_____
Hydrant	_____	FDC	_____
Wet Sprinkler System	_____	Dry Sprinkler System	_____
Engine Fire Pump	_____	Electric Fire Pump	_____
Clean Agent System	_____	Total Flooding	_____
Monitored – Waterflow	_____	Monitored Fire Alarm	_____

Dry Chemical System Make/Model # _____
Wet Chemical System Make/Model # _____
Manual Fire Alarm System Make/Model # _____
Automatic Fire Alarm System Make/Model# _____

Additional information: _____

Applicant's Company Name: _____
State Registration # (Class A, B or C): _____
Signed: _____
Contract Value: \$ _____ Fee: \$ _____

I understand this permit is granted only for the work shown and described in this application.
Any falsification, misrepresentation or misleading information given VOIDS this permit.