



# Washington Township/Avon Fire Department

## Fire Protection Permit Application

Community Safety Division

311 Production Drive Avon, IN 46123

Phone: (317) 272-2155 Fax: (317) 272-2733

### Project Information—Fill in all known information

Project Name \_\_\_\_\_

Project Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

State Project Number \_\_\_\_\_

### Fire Protection Contractor

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number (area code) \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### Business Owner

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number (area code) \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### 1. Type of Submittal (check all that apply)

**Automatic Sprinkler System (Complete Section 2A and 3)**

**New Installation**

NFPA 13 Installation

NFPA 13R Installation

NFPA 13D Installation

**Modification to an existing system (Hydraulic calculations are not required)**

Work will **NOT** (Check both or submit a New Installation):

Change the Hazard Classification of the existing system, or

Modify the design area of the existing system.

**Fire Alarm System (Complete Section 2B and 3)**

**Special Hazard Fire Suppression System (Complete Section 2C and 3)**

## 2. System Information

### A.) Automatic Fire Sprinkler Systems (one set of shop drawings, hydraulic calculations, specification sheets and CDR)

<b>Hazard Classification</b>	<input type="checkbox"/> Light Hazard	<b>Type of System</b>	<input type="checkbox"/> Wet
	<input type="checkbox"/> Ordinary Hazard I		<input type="checkbox"/> Dry
	<input type="checkbox"/> Ordinary Hazard II		<input type="checkbox"/> Preaction
	<input type="checkbox"/> Extra Hazard I		<input type="checkbox"/> Deluge
	<input type="checkbox"/> Extra Hazard II		

<b>Design Density:</b>	<b>Maximum Coverage per Head:</b>		
<b>Coverage of the most demanding head:</b>	<b>Ceiling Ht:</b> _____	<input type="checkbox"/> Obstructed	<input type="checkbox"/> Unobstructed

**Area Reductions/Increases**    Quick Response Spk. Reduction    30% Increase Ceiling Pitch >1:6  
 30% Increase for Dry System    Room Design Method    Other \_\_\_\_\_

**High Piled Storage**   Storage Height: \_\_\_\_\_    Single Row Racks    Double Row Racks  
Commodity Class:   I   II   III   IV   Plastics:   A   B   C    Multi Row Racks    Solid Pile

<b>Water Supply Data</b>		<b>Testing Location:</b>		
Static:	Residual:	Flow:	Performed By:	Date:

### B.) Fire Alarm Systems (one set of fire alarm plans, battery calculations, specifications sheets and CDR)

**Type of System:**    Manual    Automatic    Three Pulse Temporal Pattern    Voice Evacuation

**Number of Fire Alarm Annunciation Zones** (See A.4.4.6.1.2 in NFPA 72 2002 Ed.) = \_\_\_\_\_

**Fire Safety Functions:**    Fire Door Closure    Shutdown HVAC    Recall Elevator    Smoke Removal System  
 Delayed Egress Doors    Sprinkler Waterflow Alarm    Special Hazard Fire Suppression System Alarm

### C.) Special Hazard Fire Suppression System (one set of plans, agent calculations, specifications sheets and CDR)

**Type of System:**    Wet Chemical    Dry Chemical    Clean Agent    Carbon Dioxide    Foam

<b>System Make:</b>	<b>System Model:</b>	<b>Amount of Agent:</b>
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## 3. Permit Fee Calculation:

<b>Automatic Fire Sprinkler System</b>	
New Sprinkler System Installation (Number of Risers _____ x \$150)=	\$ _____
Existing System Modification (no change to the hazard classification or design area) = \$50	\$ _____
<b>Fire Alarm System</b> (Number of Fire Alarm Zones _____ x \$150)=	\$ _____
<b>Special Hazard Fire Suppression Systems</b> (Number of Systems _____ x \$75)=	\$ _____
<b>Total Amount Due:</b>	\$ _____

### FIRE DEPARTMENT USE ONLY

Please make checks payable to:  
**Washington Township/Avon Fire Department**

Date Received:	Received By:	Check Number:	Amount:
Date Entered:	Date Reviewed:	Reviewed By:	Permit Number: