City of Lake Worth
Permit Department
3805 Adam Grubb
Lake Worth,Texas 76135
817-237-1211 x112 Fax 817-237-1333



FIRE ALARM PERMIT APPLICATION

Date:			Permit number:				
Permit Address:							
Current Legal Description:	Block/Abstract:	Lot/Tract: Addition/Survey:					
		TENANT / LEASEI	E INFORMATION				
Company Name: Contact:							
Address:			City: State: Zip:		Zip:		
Phone:		Fax:		Email:			
PROPERTY OWNER INFORMATION							
Company Name: Contact:							
Address:			City:	State:	Zip:		
Phone:		Fax:		Email:	I		
FIRE CONTRACTOR INFORMATION							
Company Name: Contact:							
Address:			City:	State:	Zip:		
Phone:		Fax:		Email:			
PERMIT INFORMATION							
Property Use: Construction Value:							
I have the owner's	Residential consent to perform	Commercial this work?	What is building used for?				
	YES	NO	Devices: Panels:				
system contains. Type of work:	number of devices	ma punels that the	Devices.	I dilei	•		
New Addition Alteration Repair Demolition Briefly describe work to be done:							
PERMIT ACKNOWLEDGEMENT							
This permit, once issued, expires by limitation 180 days form the date of issuance unless construction is commenced and inspection approval is obtained within 180 days of issuance. The authority having jurisdiction shall be permitted to grant an extension of the permit time period for an additional 180 days upon written documentation by the permitee of a satisfactory reason for failure to start or complete the work or activity authorized by the permit. Only one extension will be allowed. I understand that all permits require a final inspection. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.							
Applicant Signature: Date:							
Printed Name:			Application Received By:				

SUBMITTAL INFORMATION							
Residential Project – 3 complete sets of plan	ns submitted?		Yes No N/A				
Commercial Project – 4 complete sets of pla	nns submitted?		Yes No N/A				
Square Footage of building/lease space?		Number of Stories?	105 110 11/12				
Type of Construction?		Occupancy Group?					
Division?		Occupancy Load?					
Property Zoning?		Property Platted?					
Any Non-Conforming Uses?		If yes, please describe:					
SUBMITTAL DATE INFORMATION							
1 st submittal date:		2 nd submittal date:					
3 rd submittal date:		submittal date:					
REQUIRED APPROVAL SIGNATURES							
Permit application and plans have been reviewed and are released for construction.							
FIRE DEPARTMENT EMPLOYEE PRINTED NAME	SIGNATURE		APPROVAL DATE				
PAYMENT INFORMATION							
Fee: \$	Date Paid:		Receipt #:				
Permit Filing Date:	Permit Filing Date: Permit Expiration		Completion Date:				
Comments/Notes:							

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