

CITY OF WOODSTOCK
APPLICATION FOR FIRE PROTECTION SYSTEM PERMIT
Fire Suppression Systems
(other than Fire Sprinklers)

(The Installing Contractor Shall Provide Information Requested In All Blanks and Boxes)

Address of Proposed Installation: _____, Woodstock, IL

Name of Business/Occupancy: _____

Business/Owner Name: _____ Telephone # (_____)

Suppression System Contractor Name: _____

Suppression Contractor Address: _____
 (Street) (City) (State) (Zip)

Suppression Contractor Telephone#(_____) Fax#(_____)

Contact Person: _____ Cost of Installation \$ _____

Suppression Contractor License # _____

Describe the type of system to be installed: _____

Applicant to Complete. The answer to each question below must be yes.

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Does the system comply with the requirements of the applicable NFPA standard as referenced by the International Building and Fire Codes (2015 Edition) as adopted and amended by the City of Woodstock and applicable NFPA installation standards?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has the applicant submitted the required following information for review? | | |
| a. Three sets of <u>dated and scaled</u> drawings with all room uses indicated..... | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Three sets of any necessary calculations..... | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Three sets of catalog cut sheets for all equipment used..... | <input type="checkbox"/> | <input type="checkbox"/> |
| d. The name and address of the occupancy/business, and the fire suppression contractor on the scaled drawings..... | <input type="checkbox"/> | <input type="checkbox"/> |

For Office Use:

<u>Permit Fees – Review Fee</u>	FEES PAID TO FSCI	Approved by:	
<u>Administration Fee</u>		Date:	
<u>Inspection Fees</u>		Received by:	
<u>Total Permit Fee:</u>		Date:	

Permit # _____ **Date Issued:** _____

(Revised 08/2016)