

PERMIT # \_\_\_\_\_

# FIRE PERMIT APPLICATION

**Application Date:**

\_\_\_\_\_

- SPRINKLER
- FIRE ALARM
- HOOD SUPPRESSION



## CITY OF WESTLAKE BUILDING DEPARTMENT

27700 HILLIARD BLVD.  
WESTLAKE, OHIO 44145  
PHONE (440) 617-4105  
FAX (440) 617-4144

### FOR OFFICE USE ONLY

Date Approved: \_\_\_\_\_

Date Issued: \_\_\_\_\_

FEE DESCRIPTION	AMOUNT
Arch. Plan Review Base	\$
Arch. Plan Review	\$
Permit Base	\$ 200.00
Permit	\$
<b>SUB TOTAL</b>	<b>\$</b>
<b>3% BBS</b>	<b>\$</b>
<b>TOTAL</b>	<b>\$</b>

### PROJECT OR TENANT INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

UNIT # \_\_\_\_\_

FLOOR AREA: \_\_\_\_\_ SQ. FT.

WORK AREA SQ. FT. \_\_\_\_\_ SQ. FT.

DEVICE COUNT: \_\_\_\_\_

### CONTRACTOR INFORMATION

COMPANY NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

REGISTRATION NUMBER: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_

CONTACT FAX: \_\_\_\_\_

CONTACT E-MAIL: \_\_\_\_\_

**CIRCLE TYPE: SPRINKLER, FIRE ALARM, HOOD SUPPRESSION SYSTEMS MINIMUM  
OF 4 SETS OF PLANS SUBMITTED FOR REVIEW**