

MAPLE HEIGHTS BUILDING DEPARTMENT
5353 LEE ROAD, MAPLE HEIGHTS, OH 44137-2574
216-663-4094 OR FAX 216-587-9094

PERMIT APPLICATION FOR FIRE EQUIPMENT INSTALLATION

The information requested below is required for a permit to be issued by The Maple Heights Building Department.
Please supply all information requested

TYPE OF PERMIT

{ } Sprinkler Installation { } Underground Sprinkler { } Fire Alarm System Installation
{ } Sprinkler Repair { } Hood Suppression Installation { } Fire Alarm System Test
{ } Sprinkler Test { } Hood Suppression Repair { } OTHER _____

ESTIMATE DOLLAR AMT OF JOB: _____

LOCATION OF JOB: _____

BUSINESS NAME: _____ PHONE NO.: _____

BRIEFLY DESCRIBE WORK TO BE PERFORMED: _____

_____ CONTRACTOR/APPLICANT:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT PERSON _____

TITLE/POSITION _____ PHONE NO. _____

STATE FIRE MARSHAL'S LICENSE NO. (IF APPLICABLE) _____

Installers are required to have State Fire Marshal's License and Drivers License on site for the Building Department verification.

ARE YOU REGISTERED WITH THE MAPLE HEIGHTS BUILDING DEPARTMENT? [] YES [] NO

The Maple Heights Building Department shall witness all acceptance tests.

Signature _____ Date _____ Approved By _____ Date _____

PLAN REVIEW FEE \$ _____ BASE PERMIT FEE \$ _____

ADD' PLAN REVIEW FEE \$ _____ ACTIVATION DEVICE FEE \$ _____

3% OBBS FEE \$ _____

TOTAL PERMIT FEE \$ _____