



Fire Permit Application

Planning & Development Services · 1800 Continental Place · Mount Vernon WA 98273
voice 360-416-1320 · inspections 360-416-1330 · www.skagitcounty.net/planning

Permit #:
Received by:

Use for any of the work identified below, even when being installed in a structure with a separate building permit.

Part 1 Project/Site

Description of Work			
Work Type	<input type="checkbox"/> Sprinkler system Number of heads: _____ Type: <input type="checkbox"/> 13 <input type="checkbox"/> 13R <input type="checkbox"/> 13D <input type="checkbox"/> Underground supply main <input type="checkbox"/> Building emergency radio coverage system <input type="checkbox"/> Fixed fire suppression (hood) <input type="checkbox"/> Smoke control systems <input type="checkbox"/> Specialized (non-water) suppression system <input type="checkbox"/> Other activity deemed hazardous by IFC <input type="checkbox"/> Fire detection and alarm system Number of devices: _____ <input type="checkbox"/> Fire alarm transmitter replacement only <input type="checkbox"/> Fire alarm panel replacement only		
Work Class	<input type="checkbox"/> Commercial <input type="checkbox"/> Residential		
Site Address		City	Zip
Parcel No(s)			

Part 2 Questionnaire

Is this work associated with another project? No Yes, specify project: _____

For a sprinkler system, specify state sprinkler certificate and license #: _____ exp date: _____

Part 3 Attachments

Please attach:

- Contact Information & Signature Form
- For a sprinkler application, **two copies** of **plans** that shows all of the following:
 - Location of sprinkler heads, piping size, and layout
 - Interior, exterior, and underground fire sprinkler components
 - Indicate wet pipe or dry pipe system
 - System calculations and manufacturer's information on system components
 - Water flow and control valves
- For a sprinkler application, **two copies** of a **site plan** showing FDC and PIV locations



Contact Information & Signature Form

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Attach this form to an application that requires it. An application will not be accepted without this form.

By signing this form, the undersigned certifies that the statements, answers, and information both on this form and the remainder of this permit application are true and correct to the best of his or her knowledge and belief.

Applicant/Contact

Name _____ Mailing Address _____
 City, State _____ Zip _____ Phone _____
 Email _____

Property Owner

Same as applicant Multiple owners (attach additional page)

Name _____ Mailing Address _____
 City, State _____ Zip _____ Phone _____
 Email _____

Contractor/Designer/Installer

None Same as applicant Same as property owner

Name _____ Mailing Address _____
 City, State _____ Zip _____ Phone _____
 Email _____ License # _____ Expires _____

Financing¹

None Lender below is providing construction financing Firm below has issued payment bond

Name _____ Mailing Address _____
 City, State _____ Zip _____ Phone _____

Signature

- I am the owner of the subject property and I grant permission to field staff to enter the site to verify the presence or absence of critical areas and perform inspections of work proposed by this application; OR
- I have the consent of the owners of the subject property and have attached Agent Authorization Form(s) (SCC 14.06.090); OR
- This is a fire suppression permit, mechanical/plumbing permit, septic permit, or pre-development/pre-app meeting request; the property owner's authorization is not required.

Signature(s): _____ Date: _____
 Printed Name: _____
 Title: _____
 Company: _____

¹ Required by RCW 19.27.095(2)(d) for building permit applications.