

Cumberland County Fire Marshal's Office
PO Drawer 1829
Fayetteville, NC 28302
(910)321-6736

**Application for Permit
Fire**
(See reverse side for Fire Alarm Application)

Applications and fees are submitted in Central Permitting, Historic Courthouse, 130 Gillespie St., Rm 106. Office hours for Central Permitting are 8:00 am – 4:30 pm. (910-321-6666, Fax 321-6637)

Date: _____

INSPECTION REQUESTED AT: Address _____

RESPONSIBLE PARTY: _____

Business Name (if applicable): _____

Mailing Address: _____

Phone: _____ Phone: _____

INSPECTION IS REQUESTED FOR:

___ Day Care(\$75) ___ Foster/Therapeutic(\$75) ___ Group Home(\$75) ___ ABC License(\$75)

___ Fire Alarm (\$75) ___ Auto. Fire/Extinguishing Sys.(\$1.05 per sprinkler head/minimum \$50)

___ USGT/AGST Pipes & Equip. Install/Removal (\$75) ___ Temp. Tents(\$75) ___ Other: _____

___ Special Event Title: _____

Special Event Start Date: _____ End Date: _____

OFFICE USE ONLY

Special Events: Inspection Req'd before event: Yes ___ No ___ Inspection Date/Time: _____

Fire Equipment Required: Yes ___ No ___ Type _____

Firefighters Required: Yes ___ No ___ Number Required _____

Required Attachments:

___ Plot Plan ___ Floor Plans ___ Safety Plans ___ Seating Plan
___ Blueprints ___ Hydraulic Data ___ Cert. Of Insurance ___ Manf Infor.
___ Tech Data Sheets ___ Copy of License/Cert. ___ Copy of Zoning Permit ___ Hazmat Survey
___ Other _____

Permit Type: ___ Operational ___ Construction

Cumberland County Fire Marshal's Office
Cumberland County Planning & Inspection
PO Drawer 1829
Fayetteville, NC 28302

**Application for Permit
Fire Alarm**

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WORK TO BE PERFORMED AT:

Business Name: _____

Address: _____

FIRE ALARM CONTRACTOR: _____

Mailing Address: _____

Phone: _____ Phone: _____

Contact Person: _____ Phone: _____

LOW VOLTAGE ELECT. CONTRACTOR: _____

Mailing Address: _____

Phone: _____ License #/Class.: _____ Elect. Contract Cost:\$ _____

SYSTEM TO BE INSTALLED IN A: New Structure___ Addition___ Existing Structure___

BUILDING OCCUPANCY: _____

DETAIL OF WORK BEING PERFORMED: _____

Information Required with Application: Floor Plans/Blue Prints & Technical Data Sheets

Applicant Signature: _____ **Fire Alarm Installation:** \$ 75
Elect. Permit: \$ _____

Date: _____ **Total:** \$ _____

Fire7-10Rev