

Received:		<b>City of Seguin</b> <b>Fire Marshal's Office</b> <b>PERMIT</b> <b>APPLICATION</b>		Permit #:
Approved:				Expires:
Address:				
Job Name:				
Owner:				
Phone #:		Fax #:		Email:
Contractor:				
Address:				
Designated Representative:				
Phone #:		Fax #:		Email:
<u><b>Suppression Systems</b></u> <input type="checkbox"/> Sprinkler System Number of Heads <input type="checkbox"/> Fixed Pipe Dry Chem. <input type="checkbox"/> Fixed Pipe Wet Chem. <input type="checkbox"/> Standpipe Systems <input type="checkbox"/> Underground Fire Line <input type="checkbox"/> Fire Pump <input type="checkbox"/> Other system Type		<u><b>Alarm Systems</b></u> <input type="checkbox"/> Fire Alarm <input type="checkbox"/> Other Number of Detectors Number of Pull Stations Number of A/V Heads		<u><b>Hazmat Storage</b></u> <input type="checkbox"/> Above Ground Tank <input type="checkbox"/> Underground Tank <input type="checkbox"/> LPG Tank <input type="checkbox"/> Other Chemical Quantity
<u><b>Installation Area</b></u> <input type="checkbox"/> Entire Building <input type="checkbox"/> Portion of Building <input type="checkbox"/> Special Hazard Area <input type="checkbox"/> Cooking Area <input type="checkbox"/> HVAC System <input type="checkbox"/> Smoke Control System <input type="checkbox"/> Paint Booth		<u><b>Job Type</b></u> <input type="checkbox"/> New Installation <input type="checkbox"/> Modification <input type="checkbox"/> Repair <input type="checkbox"/> Replacement <input type="checkbox"/> Removal <input type="checkbox"/> Other		<u><b>Ventilation Control System</b></u> <input type="checkbox"/> Automatic <input type="checkbox"/> Manual
I understand that this is an application only and does not authorize or condone work to begin on this project until a permit is issued.				
Signature:			Date:	