

**City of Seguin
Fire Marshal's Office
660 S. Hwy 46
Seguin, TX 78155
PERMIT APPLICATION**

Date Rcvd		Permit #:
Date Approved		Expires:

Address:

Job Name:

Owner:

Phone #:	Fax #:	Email:
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Contractor:

Address:

Designated Representative:

Phone #:	Fax #:	Email:
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<p style="text-align: center;"><u>Suppression Systems</u></p> <input type="checkbox"/> <input type="checkbox"/> Sprinkler System Number of Heads _____ <input type="checkbox"/> <input type="checkbox"/> Fixed Pipe Dry Chem. <input type="checkbox"/> <input type="checkbox"/> Fixed Pipe Wet Chem. <input type="checkbox"/> <input type="checkbox"/> Standpipe/Water Systems <input type="checkbox"/> <input type="checkbox"/> Other System Type	<p style="text-align: center;"><u>Alarm Systems</u></p> <input type="checkbox"/> Fire Alarm <input type="checkbox"/> Other _____ Number of Detectors _____ Number of Pull Stations _____ Number of A/V Heads _____	<p style="text-align: center;"><u>Hazmat Storage</u></p> <input type="checkbox"/> Above Ground Tank <input type="checkbox"/> Underground Tank <input type="checkbox"/> LPG Tank <input type="checkbox"/> Other Chemical _____ Qty: _____
<p style="text-align: center;"><u>Installation Area</u></p> <input type="checkbox"/> <input type="checkbox"/> Entire Building <input type="checkbox"/> <input type="checkbox"/> Portion of Building <input type="checkbox"/> <input type="checkbox"/> Special Hazard Area <input type="checkbox"/> <input type="checkbox"/> Cooking Area <input type="checkbox"/> <input type="checkbox"/> HVAC System <input type="checkbox"/> <input type="checkbox"/> Smoke Control System	<p style="text-align: center;"><u>Job Type</u></p> <input type="checkbox"/> <input type="checkbox"/> New Installation <input type="checkbox"/> <input type="checkbox"/> Modification <input type="checkbox"/> <input type="checkbox"/> Repair <input type="checkbox"/> <input type="checkbox"/> Replacement <input type="checkbox"/> <input type="checkbox"/> Removal <input type="checkbox"/> <input type="checkbox"/> Other _____	<p style="text-align: center;"><u>Burn Permit</u></p> <input type="checkbox"/> <input type="checkbox"/> Agricultural <input type="checkbox"/> <input type="checkbox"/> Land Clearing <p style="text-align: center;">Type of Protection on Site</p> <input type="checkbox"/> <input type="checkbox"/> Water Source <input type="checkbox"/> <input type="checkbox"/> Equipment _____ Burn Rules Received

FEE SCHEDULE	
Fixed Pipe Suppression systems (Vent Hood, Paint Booth, Mixing Rooms)	\$50.00
Sprinkler system with 200 heads or less	\$150
Sprinkler system over 200 heads - \$70 + \$0.50 per head	\$150 - \$1,250
Alarm systems with 200 devices or less	\$100
Alarm systems over 200 initiating or signaling devices \$100 + .50 per device	\$100 - \$1,000
Standpipe / water system permit	\$100
Smoke control system	\$75
Ventilation control system	\$50
Modification permits (sprinkler, alarm, smoke control systems)	\$75
Reinspection or retest fee (Required for any failed inspection or test)	\$30
Flammable and Combustible Liquid & LPG > 250 gallons storage tanks	\$120
Liquid Petroleum storage tanks 250 gallons or less	\$30
Home Child & Adult Day Care, MHMR HOMES, & Group Homes	\$50
Hospitals, Nursing Homes, Assisted Living, Large Child & Adult Day Care Centers	\$100
Fire Flow Test (Hydrant or like appliances)	\$100
Burn Permit	\$75

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: _____