

**CITY OF POWELL
FIRE PROTECTION PERMIT**

Permit # _____



The undersigned hereby makes application for a Fire Protection Permit, according to the following specifications:

Company/Contractor Name: _____
 Address: _____ E-Mail: _____
 City / State / Zip: _____
 Phone No: _____ Cell Phone No: _____ Fax No: _____

Site Information:

Project Name: _____
 Project Address: _____
 Owner Name: _____ Address: _____
 City/State/Zip: _____ Phone No. _____

Check One:

_____ 1, 2, or 3 Family Residential _____ 4 (or more) Family Residential (# of units _____) _____ Commercial

Check One:

_____ New Construction
 _____ Alteration of Existing
 _____ Addition to Building
 _____ Replace/Repair Existing

Check One:

_____ Fire Suppression Permit
 _____ Fire Alarm Permit
 _____ Chemical - Wet or Dry
 _____ Other- Specify Type: _____

Indicate Number of devices to be installed and / or altered:

Number of Sprinkler Heads: _____
 Number of Fire Alarms, Stations, _____
 Horns, Strobes or Other: _____ **Total Devices:** _____

FEES: City of Powell

Plan Review - # of hours _____ X \$100.00 \$ _____
 Fire Protection Permit \$ **\$100.00**
 Add \$5.00 per device (Total Devices above)
 # _____ x \$5.00 = \$ _____

Subtotal: \$ _____

Add 3% of Subtotal for State of Ohio Surcharge \$ _____

Total: Payable to the City of Powell \$ _____

FEES: Liberty Township Fire Department

Plan Review Fee \$ **75.00 (Per System)**

Construction Inspection Fee \$ **200.00 (Per System)**

Total: Make Payable to Liberty Township \$ _____

Signature of Certified

Contractor or Authorized Agent: _____ **Date:** _____

City of Powell Building Department · 47 Hall Street · Powell, OH 43065 · (614) 885-5380 · Visit our web site at www.cityofpowell.us for information, applications and to schedule inspections.