

CAÑON CITY AREA FIRE PROTECTION DISTRICT

3016 East Main Street
Cañon City CO 81212
719-275-8666 FAX 719-275-1486

Fire Alarm System Permit Application

Date: _____

Project: _____

Address of project: _____

Contractor: _____ E-Mail: _____ Phone: _____

Address: _____

Contact person: _____ E-Mail: _____ Phone: _____

FAX Number _____ NICET# _____

The following items MUST be included within the documents submitted for review. Plans will not be reviewed unless all items are included. Confirm each item below is included.

- NICET Level 3 Certification or Fire Protection Engineer Stamp on Plans
- Project Address Shown on Plans
- Scaled Floor Plans Showing Device Locations
- Device Legend
- Ceiling Height and Construction for Each Room
- Voltage Drop Calculations, Battery Calculations
- System Sequence of Operation (Matrix)
- Equipment Data Sheets

Signature: _____ Date: _____

Name Printed: _____

Fee Submitted: _____ (See fee schedule) _____ Date: _____

Plans will not be reviewed until fee(s) submitted

Office use only

Accepted by: _____ Date: _____