



**Fire Alarm System Permit Application**

City of Moorhead Fire Prevention Bureau, 111 12th Street North, Moorhead, MN 56560

**For Inspections call: 218-299-5248**

**E-mail in pdf form to: rich.duysen@ci.moorhead.mn.us or Fax to: Rich Duysen 218-299-5072**

Date of Application:		Permit Number:		Receipt Number:	
<b>Application is hereby made to the Moorhead Fire Prevention Bureau to:</b>					
<input type="checkbox"/> Install a new automatic fire alarm system			<input type="checkbox"/> Modify an existing automatic fire alarm system		
<b>Site Location</b>	Address		Business Name		
<b>Applicant (or Contractor)</b>	Name		Street Address		
City		State	Zip Code	Phone Number	
<b>Automatic Fire Alarm Systems</b>	Type of System (Automatic, Manual, Combined)		Total Area of Coverage	Total Number of Devices	
Type of Device		Temperature Rating of Heat Detectors		Applicable NFPA Standards Used	
Special Hazards to be Protected (high-piled storage, flammable liquids, etc.)					
Additional Information:					
<b>Permit Fee Calculation</b>					
1. Fair market value of job		\$ _____			
1a. Enter amount based on 2% x Fair market value of job				\$ _____	
2. State surcharge (.0005 times value of 1 above)				\$ _____	
<b>3. Total permit fee for installation and plan review (add 1a and 2)</b>				<b>\$ _____</b>	
<b>Information:</b>					
The undersigned agrees to perform this job in accordance with the above information, attached plans and specifications, and the applicable provisions of the National Fire Protection Association Standard(s).					
For applications involving the installation of fire protection equipment, the applicant agrees to submit a copy of the plan for review. The plan will show the proposed installation(s) and the location, spacing, and type of equipment to be installed.					
For new installations or in situations where 25% or more of the system's equipment has been moved or changed, the applicant further agrees to conduct an acceptance test in the presence of a representative of the Moorhead Fire Prevention Bureau. The acceptance test must be scheduled at least 24 hours in advance.					
Applicant Name <b>(Please print clearly)</b> : _____					
Applicant Signature: _____			Date: _____		
<b>Approval:</b>					
<b>Fire Marshal Signature:</b> _____			Date: _____		