

WATER-BASED FIRE PROTECTION SYSTEM PERMIT APPLICATION



CITY OF MOORHEAD
FIRE PREVENTION DIVISION
 111 12th Street North, Moorhead, MN 56560
 (218) 299-5433 / chad.stangeland@moorheadmn.gov



[] PLAN INCLUDED	
Site Address: _____	Date: _____
Occupant: _____	Telephone: () _____
Building Name: _____	
Owner Name: _____	Telephone: () _____
Owner Address: _____	Email: _____
Contractor: _____	Telephone: () _____
Address: _____	License: _____
	Email: _____
Building Type: Commercial [] Residential [] (number of units _____) Other [] _____	
Work Description: _____	
	Number of levels: _____
Install [] Alter [] Replace []	
Dates: Start: _____	End: _____
Number of Sprinkler Heads: Wet _____ Dry _____ Number of Standpipes: Wet _____ Dry _____	
Fire Pump: _____ GPM _____ HP	
Other extinguishing systems (Describe): _____	
Hazard: _____	
Type of System:	
[] NFPA 13	
[] NFPA 13R	
[] NFPA 231C	
[] Other (describe) _____	
Monitored: [] Yes [] No	
If yes, where: _____	

Notice: This permit becomes null and void six months after date of issuance. Extensions granted by Fire Chief at time of permit issuance only.

I HEREBY CERTIFY that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel provisions of any state or local law regulating construction or the performance of construction.

*Inspection Fee: \$65.00 / hour (with 2 hour minimum)

***Permit Fee Due: \$** _____

Signed: Owner/Representative: _____ Date: _____

Approved by: _____ Date: _____

OFFICE USE ONLY	PERMIT #	*TOTAL FEE	CASH	CHECK