



City of Clovis
Fire Prevention Division
1233 Fifth Street Clovis, California 93612
(559) 324-2200 Fax (559) 324-2846

PERMIT NUMBER

FIRE CONSTRUCTION PERMIT APPLICATION
FIRE PROTECTION SYSTEMS

TO BE COMPLETED BY THE APPLICANT

DATE:

JOB SITE BUSINESS NAME:

JOB SITE ADDRESS: SUITE / APT:

TYPE OF WORK: FIRE PROTECTION SYSTEMS

- Electronic Access Gate
Underground Fire Service
Tenant Improvement Overhead Fire Sprinkler: Number of Sprinkler Heads
Overhead Fire Sprinkler: Number of Sprinkler Heads
Fire Suppression System
Fire Sprinkler Monitoring
Fire Alarm: Number of Devices
U.L. 300 - Hood System
Temporary Fire Access Road
OTHER

Valuation \$

DESCRIPTION OF WORK TO BE DONE:

NAME OF APPLICANT: APPLICANT CELL PHONE:

Applicant's Email Address:

Installing Contractor: Phone:

Contractor's Email Address:

Address: City/State/ZIP:

FOR NEW APPLICANTS:

Lic. No: Workers Comp. Provider: Policy No:

Type: A C-10 C-16 C-34 C-36 Other City Business License? Y N BL#