



Application Date: _____

CSA : _____

Phone #: _____

APPLICATION FORM FOR FIRE PROTECTION PERMIT

Building Address: _____ **Building Permit #: BLD** _____

Project Description: _____

Building Use: _____ New Existing **Building Type:** Residential Commercial

Tenant/Owner(s): _____ **E-mail:** _____

Address: _____ **City:** _____ **Postal Code:** _____

Phone: _____ **Cell:** _____ **Fax:** _____

Contractor: _____ **E-mail:** _____

Address: _____ **City:** _____ **Postal Code:** _____

Phone: _____ **Fax:** _____ **Business License (Burnaby/IMBL):** _____

Sprinkler Fitters Name: _____ **TQ Number:** _____ **Phone:** _____

TYPE OF WORK:

Alteration to Existing System New System

SPRINKLER SYSTEM STANDARD:

NFPA 13 NFPA 13R NFPA 13D **Other:** _____

HAZARD CLASSIFICATION:

Light Extra Ordinary #1 Ordinary #2 Rack Storage

SPRINKLER SYSTEM TYPES :

Wet Pipe Dry Pipe Pre-Action Deluge Special Type Combined

SYSTEM DESIGN :

Hydraulic Pipe Schedule **Design Modification to Existing System:** Yes No

UNDERGROUND MAIN (provide details):

Size: _____ **Material:** _____ **Length:** _____ **Pressure:** _____

APPLICATION TO INSTALL (provide quantities):

New Sprinkler Heads: _____	Relocated Sprinkler Heads: _____	Siamese Connection: _____
Hose Cabinets: _____	Inside Hydrants: _____	Standpipes: _____
Hose Outlets: _____	Above Ground Wet/Dry Outlets: _____	Above Ground Piping: _____
Fire Pump Tester Header: _____		

BACKFLOW DEVICES:

Existing New (separate Plumbing Permit required if new) *Plumbing Permit #* _____

I hereby declare that the Provincial license and/or certification is in effect and valid and that all other information contained in this application is accurate. I acknowledge that the City is relying on this declaration for issuance of permit. I further confirm that all work performed under this permit will be done in accordance with all applicable City of Burnaby Bylaws and Provincial Regulations.

The information on this form is collected under the authority of the current Burnaby Plumbing Bylaw and is in accordance with the Freedom of Information and Protection of Privacy Act. The purpose of the collection is to process your application for a fire protection permit. It will be retained as a record of your application and may be used to contact the parties involved in this project. The name of the applicant, the name and address of the business associated with the application, the address to which the permit pertains, and the value of the work being done may be made available to the general public. If you have any questions about the collection and use of this information, please contact the Building Department at 604-294-7130.

Applicant (Print Name)

Signature

Date

STAFF TO FILL IN

Fire Protection Permit #: FPP

Issue Date: