

# HOPE MILLS FIRE DEPARTMENT

5788 ROCKFISH ROAD, HOPE MILLS, NORTH CAROLINA 28348-1848

TELEPHONE (910) 429-3397 FAX (910) 424-4566

OFFICE OF THE FIRE MARSHAL

[www.townofhopemills.com](http://www.townofhopemills.com)

## APPLICATION FOR FIRE PROTECTION PERMIT

### Project Information

STREET AND NUMBER	NAME OF SUBDIVISION	LOT NO	PARCEL NUMBER

Contractor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

NC State Contractors License Number: \_\_\_\_\_ Classification: \_\_\_\_\_ Limitation: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Description of Proposed Work/Installation: \_\_\_\_\_ Email: \_\_\_\_\_

Fire Sprinkler Tap Connection	Size: _____
Fire Sprinkler Heads	Number Installed: _____
Private Fire Hydrants/Values	Number Installed: _____
Witness Fire Protection System Testing:	_____
Witness Fire Alarm System Testing:	_____
Hood Suppression System:	_____
Tent Permit:	_____
OTHER Description:	_____
***If applicable, system wired by:	_____

Permit Fee: \_\_\_\_\_ Permit # \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the North Carolina State Building Code and all other applicable state and local laws, ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specifications for the projected permitted herein.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date