



# VERMONT DEPARTMENT OF PUBLIC SAFETY DIVISION OF FIRE SAFETY

Office of the State Fire Marshal, State Fire Academy and State HAZMAT Team

[www.firesafety.vermont.gov](http://www.firesafety.vermont.gov)



## Construction Permit Application for Renovation and Modification Projects under \$200,000 in Existing Buildings

This application is not for other construction project types: New Construction, Additions, Change of Use

All sections are required to be filled out completely and must be typed or printed legibly

Have you consulted with a Fire Marshal regarding this project? Name: \_\_\_\_\_

**\*\* The project must meet one of the below definitions and be under \$200,000 \*\***

**Modification** - The reconfiguration of any space; the addition, relocation, or elimination of any door or window; the addition or elimination of load-bearing elements; the reconfiguration or extension of any system; or the installation of any additional equipment.

**Renovation** - The replacement in kind, strengthening, or upgrading of building elements, materials, equipment, or fixtures, that does not result in a reconfiguration of the building spaces within.

### Section A - Owner Site Location and Owner Information

Building Name \_\_\_\_\_

Building Address \_\_\_\_\_  
911 Number / Street City State Zip

Building Owner Name \_\_\_\_\_

Owner Address \_\_\_\_\_  
Mailing Address City State Zip

Owner Phone # \_\_\_\_\_ Owner E-mail \_\_\_\_\_

### Section B - Applicant Information

Company \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_  
Mailing Address City State Zip

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Contractor and/or Architect

Name \_\_\_\_\_  
Company Primary Contact

Address \_\_\_\_\_  
Mailing Address City State Zip

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

*👉 👉 This section for office use only 👈 👈*

Structure ID	Work Item ID	Received Date	Reviewer
Check From	Check #	Check Amount	Event ID
			Date Permitted

**Section C - Description / Scope of work**

Please provide a description of the work being performed. Attach additional pages as necessary to sufficiently describe the work. Dimensional drawings, plans and/or a fire safety analysis may be required by the area Fire Marshal as a requirement to this permit.

**Section D - Building Use and Protection Information**

This section is intended to establish general information pertaining to the current and/or proposed use.

**Describe below how the building is currently used?**

**Additional Building Information**

Occupancy Classification(s) \_\_\_\_\_

Comments:

**Fire and Life Safety Systems - New or modified as part of this project**

Single Station Alarms	Install/Add Smoke Alarms	Install/Add Carbon Monoxide Alarms	
Fire Alarm System*	New System	Modifying Existing	Existing
Sprinkler System*	New System	Modifying Existing	Existing
Other Systems*	New System	Modifying Existing	Existing

**\*Separate Permit Application and Fee Required for Fire Alarm, Sprinkler and Other Systems**

**Section E - Project Valuation and Fee calculations**

The Permit Fee is based on the total valuation of the modification or rehabilitation work for which the permit is being obtained. Electrical, Plumbing and Elevator trades must file a work notice in addition to certifying the valuation of the work as part of this permit.

Calculate fee by multiplying TOTAL PROJECT COST by .008	<b>Total Project Cost</b>	\$	
<b>There is a \$50 Minimum Fee</b>	Fee is 8.00 per \$1000.		x .008
This line is for fee calculated or \$50 whichever is greater	<b>Total Fee</b>	\$	
<b>Checks payable to Department of Public Safety</b>			

**General Information**

I hereby attest by my signature under 13 V.S.A. 3016 (filing a false claim with a Department or Agency of the State) that I am the owner, or owner's designated representative and that the information contained within this form is correct and accurate to the best of my knowledge:

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Barre Regional Office**  
1311 US Rte 302, Ste 500  
Barre, VT 05641  
Phone: (802) 479-4434

**Rutland Regional Office**  
56 Howe St, Bldg A, Ste 200  
Rutland, VT 05701  
Phone: (802) 786-5867

**Springfield Regional Office**  
100 Mineral St, Ste 307  
Springfield, VT 05156  
Phone: (802) 885-8883

**Williston Regional Office**  
380 Hurricane Lane, Ste 101  
Williston, VT 05495  
Phone: (802) 879-2300