



# 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)



## FIRE SUPPRESSION PERMIT APPLICATION

Have you consulted with a Fire Marshal regarding this project? No Yes/Name \_\_\_\_\_

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

### Section A - Building Location and Ownership Information

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

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

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

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

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

### Section B - Applicant Information

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

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

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

### Section C - Fire Suppression System

*Complete for all fire suppression system installations or alterations to existing systems.*

Name of Installer: \_\_\_\_\_ VT TQP Certification Number: \_\_\_\_\_

Installer's Email: \_\_\_\_\_

Agent Type: Wet Chemical ! Dry Chemical  
Clean Agent (specify type) \_\_\_\_\_  
Other: \_\_\_\_\_

System Make: \_\_\_\_\_

System Model: \_\_\_\_\_

This application must be accompanied by the following:

Drawing of coverage area including equipment and device locations.

Manufacturer's specifications and information.

Calculations for concentration of clean agents.

**This section for office use only**

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

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

Please provide a description of the work being performed. Attach additional pages as necessary.

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

The Permit Fee is based on the total valuation of the fire suppression system installation for which the permit is being obtained.

For projects involving volunteer labor and donated material, the valuation of construction work is based on the value of the volunteer labor as well as the donated materials when calculating the permit fee.

Fire Suppression	\$
Design Services	\$
<b>TOTAL PROJECT VALUATION</b>	\$
Fee is \$8.00 per \$1000 of total project valuation Calculate fee by multiplying TOTAL PROJECT VALUATION by 0.008	X 0.008
<b>There is a \$50 Minimum Fee</b> This line is for the fee as calculated or \$50 whichever is greater.	\$

**\*\*\* Please make all checks payable to the Department of Public Safety \*\*\***

**Section F - Project Specific Details**

*All shop drawings should be drawn on sheets of uniform size and at a minimum should include the following information from the applicable NFPA Standard: (check all boxes that apply)*

- NFPA 17 Section 10.2**
- NFPA 17A Section 6.3**
- NFPA 2001 Section 5.1.2**
- Other NFPA Standard**

Project Start Date:

Project Completion Date:

**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:** \_\_\_\_\_

Return this completed form with all required fees, plans, and supplemental information to the appropriate Regional Office

**Waterbury Regional Office**  
45 State Drive  
Waterbury, VT 05671-8200  
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) 216-0500

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