

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

EXHAUST HOOD PERMIT APPLICATION

Have you consulted with a Fire Marshal regarding this project?									
All sections are required to be filled out completely and shall be typed or printed legibly									
Section A - Building Location and Ownership Information									
Ruilding Name	Former Name								
Building Name					miller Name				
Building Address									
		911 Number / S	Street		City	State	Zip		
Building Owner _							_		
Address									
-		Mailing Addre			City	State	Zip		
Phone -	E-mail								
Section B - Applicant Information									
Company	Contact Person								
Address									
-		Mailing Addre			City	State	Zip		
Phone _			E	mail					
Costion C. Tyberrat Hand Cristons									
Section C - Exhaust Hood System									
Complete for all new exhaust hood installations or alterations to existing systems.									
	Name of Installer: Installer's Email:								
Hood Type: Type 1 Type 2 Other:									
riood rype.	Турст	Type 2	Outo	•					
Size of hood: Le	ngth	Width		Size o	of duct:				
Total square feet of hood opening:				SQ. feet of duct:					
Filter size: SQ inches per filter				Fan CFM:					
Total number of filters:				Calculated duct velocity:					
Surface the hood is mounted on:					Construction:		Carbon Steel!		
Limited Combustible Combustible				(check	one)	No. 20ga.	Stainless Steel		
Non-Combustible			Duct (Construction:	No. 16ga.	Carbon Steel!			
Indicate clearand	e provided:	inches		(check	k one)	No. 18ga.	Stainless Steel		
P P This section for office use only P P									
Structure ID		Work Item ID			ceived Date	Reviewer			
Check From		Check #	Check Amount	•	Event ID	<u> </u>	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 exhaust hood system	Exhaust Hood System	\$						
installation for which the permit is being obtained.	Suppression System	\$ separate permit						
For projects involving volunteer labor and donated material, the valuatior	Design Services	\$						
of construction work is based on the value of the volunteer labor as well as the donated materials when calculating the permit fee.	TOTAL PROJECT VALUATION	\$						
Fee is \$8.00 per \$1000 o Calculate fee by multiplying TOTAL PROJECT	VALUATION by 0.008	Χ 0.008						
There i	s a \$50 Minimum Fee	Ś						
This line is for the fee as calculated or \$5								
* * * 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:								
Submitted plans shall be in compliance with NFPA 91 or NFPA 96 and the following:								
 Plans shall include complete hood, duct, and mounting dimensions Plans shall include distances from combustibles 								
Plans shall include distances from combustibles Plans shall include a roof detail showing the exhaust fans and all equipment within 15 feet								
Specific information and manufactures UL listing shall be provided for all hoods calculated								
for other than code requirements.								
☐ Complete calculations shall be shown for both the CFM and FPM used in sizing the exhaust duct and fan.								
Project Start Date: Project Completion	n Date:							
General Information	n							
		file Otatal that Law the						
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								
45 State Drive 56 Howe St, Bldg A, Ste 200 100 Min	eral St, Ste 307 380 Hurr	on Regional Office icane Lane, Ste 101 iston, VT 05495						
		2: (802) 879-2300						