THE REPORT OF THE PARTY OF THE

TOWN OF PENNEY FARMS, FLORIDA

Tel: (904) 529-9078 Fax: (904) 284-4405 4100 Clark Avenue – P.O. Box 1041 Penney Farms, Florida 32079

Fire Sprinkler System Permit

Please provide two (2) copies of plan and submittals.

Project Name:	Building Per	mit #:
Parcel #: 911 Site Address:		
Contractor Name: Business Address:		
Contact Person:	Phone #:	Email:
Business License #	Co	unty:
Scope of Work: Enter total number of fire sprinkler h	neads:	
If the alteration consists of the relocation, sealed by a State of Florida Licensed Prof • Permit must be filled out con • Town minimum permit fee \$125 • Fire Plan Review and Inspection • Fees must be paid before per	essional Engineer. FS 633.10 npletely or permit will be 0 5.00 n \$75.00	++++ PAID ++++
Signature Owner Date	s :	ignature Contractor Date:
NOTARY as to Owner	NOT	'ARY as to Contractor
Date: My Commission Expires:		Date:
DATE PERMIT ISSUED:		