



APPLICATION FOR FIRE PROTECTION/SUPPRESSION BUILDING PERMIT

360 South Yearling Road, Whitehall, Ohio 43213

(Phone) 614-237-8612 (Fax) 614-338-3119 www.whitehall-oh.us

Application #: _____ Date & Time: _____

3 sets of structural plans or digital drawings & \$100 non-refundable application fee are required at the time of submittal.

Project Address

	Whitehall	Ohio	43213
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Parcel # (Business) Name

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Owner's Name Owner's Address City State Zip

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Owner's Phone Owner's E-mail

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Contractor's Business Name N/A Contractor's Business Address City State Zip

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Contractor's Phone Contractor's E-mail

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Design Professional's Name Design Professional's Address City State Zip

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Design Professional's Phone Design Professional's E-mail

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FIRE SUPPRESSION

Sprinkler Hood Suppression Limited area

Type of system: Wet Dry Antifreeze Chemical Other _____

Number of heads: _____ Number of standpipes: _____ Number of risers: _____

FIRE ALARM

Alarm System: YES NO Number of devices: _____

Type of system: Central Station Local Proprietary Remote Station
 Security Smoke Detector Other _____

Describe project: _____

COST OF PROJECT \$ _____



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CERTIFICATION (read all sections, sign, date and attach any drawings and/or supporting documents)

All permits shall expire one year from the date of issue. A one-time renewal shall be permitted if the original permit has not expired. I fully understand that no excavation, construction, structural alteration, electrical or mechanical installation or alteration of any building, structure, sign, or part thereof and no use of the above shall be undertaken or performed until the permit applied for herein has been approved and issued by the City of Whitehall Building/Zoning Department.

I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to submit this application and attachments as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s).

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

Applicant Signature Please Print Clearly Date

Applicant Phone Applicant E-mail
This application is subject to review. You will be contacted when the review is completed.

STOP – OFFICE USE ONLY

Fire suppression fee	\$
Fire alarm fee	\$
Number of devices _____ x \$3.00	\$
Number of heads _____ X \$2.00	\$
Application fee	\$
Commercial plan review	\$
1% (residential) or 3% (commercial) of above fees	\$
TOTAL FEES	\$

(check, money order and cash only)

APPROVED DISAPPROVED, LETTER ATTACHED CONDITIONAL APPROVAL, LETTER ATTACHED

Chief Building Official: _____ Date: _____