

WASHINGTON COUNTY DIVISION OF PERMITS & INSPECTIONS

747 Northern Avenue Hagerstown, MD 21742 Telephone: 240-313-2460

APPLICATION FOR FIRE PREVENTION PERMIT

RECORD NO.	
PROJECT NO.	
BLDG. NO.	

1776	Hearing Impaired Call 7-1-1 for Maryland Email: www.washco-md.net	Relay	PERMIT		OG. NO			
				DAT	TE ISSUED			
JOB LOCATION:		MAI	P: BLOCK:	PARCEL:	LOT NO :	SUBDIVISION	NAME:	
PROPERTY OWNER'S	NAME:				PHONE:			
PROPERTY OWNER'S	ADDRESS:			(CITY:	STATE:	ZIP:	
NAME OF LIGHNORE					LIOENCE NO :			
NAME OF LICENSEE :					LICENSE NO:			
LICENSEE'S ADDRESS:				CITY: STATE: ZIP:				
T/A:					LICENSE NO:			
DESIGNER/CONTACT PERSON FOR TECHNICAL QUESTIONS:				DAYTIME PHONE NO:				
DESIGNER/CONTACT PERSON FOR TECHNICAL QUESTIONS:				DATTIME PHONE NO.				
DESIGNER/CONTACT ADDRESS:				(CITY:	STATE:	ZIP	
DETAILED JOB DESCR	RIPTION:							
System Type(s):	☐Mobile Food Unit	□Special Ev	ent (<mark>FOR II</mark>	ADIVIDUA	L FOOD VE	NDORS AT A SPEC	IFIC EVENT)	
□Fire Alarm	n □ Fire Pump	□Exha	ust Hood/S	Suppressio	on □S	Sprinkler	□Standpipe	
Water Supply:	☐ Public	□Private		о.рр. осо. с		, p		
11.2		Permit Submi	ttal Require	ements				
_	s, shop drawings, hydraulio			_				
•	ts, as applicable. Fire alar if utilizing ceiling-mounted			_			_	
tegena, ana,	ir attazing cerang-mounted		Conditions		icigiits and	a a reflected celli	iig ptaii.	
	d plans, with comments, mu	st be retained on	the job un	til the fina				
	shall be occupied until all re ction will be made without t							
be perfor	med before the permit issua	ance.	•				•	
	ation from the approved pla e established for the exami							
The prop	osed changes being made i	n the field.	-				•	
	der work must be performed become invalid if installation							
	s not continue to progress,							
	authorized by the owner to do the							
Washington	oing this work, I will conform to a County Division of Permits and I	nspections office twe	nty-four (24)	hours in ad	vance when I	am ready for the insp	ections.	
I further agre	ee that no work will be covered u	o until such inspectio	ns have beer	n complied v	with.			
					A ==-	CO ARE NON REE	INIDAD: F	
	Applicant's Signature		Date ALL FEES ARE NON-REFUNDABI					