



**COMMUNITY DEVELOPMENT DEPARTMENT**

**Code Administration Division**

**129 North Second Street, 2nd Floor Yakima, Washington 98901**

**(509) 575-6126 • Fax (509) 576-6576**

**codes@yakimawa.gov • www.buildingyakima.com**

Permit# \_\_\_\_\_

**FIRE ALARM PERMIT APPLICATION**

Address: _____		Parcel Number(s): _____	
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> # of Units _____ <input type="checkbox"/> # of Stories _____			
Existing Fire Alarm System? <input type="checkbox"/> Yes <input type="checkbox"/> No		New Fire Alarm System? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fire Alarm System Required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Non-Required Fire Alarm System? <input type="checkbox"/> Yes <input type="checkbox"/> No	
1 <sup>ST</sup> FL -Square Footage: _____		2 <sup>ND</sup> FL-Square Footage: _____	
3 <sup>RD</sup> FL-Square Footage: _____		4 <sup>TH</sup> FL-Square Footage: _____	
Change of Use? <input type="checkbox"/> Yes <input type="checkbox"/> No		Construction Type: _____	
Project Description: _____ _____			
Contact Person		Property Owner Same as Contact Person {    }	
Name: _____		Name: _____	
Address: _____		Address: _____	
City/State/Zip: _____		City/State/Zip: _____	
Phone # (Day): _____ Fax: _____		Phone # (Day): _____ Fax: _____	
Email: _____		Email: _____	
Contractor Same as Applicant {    }		Architect {    }    Engineer {    }	
Name: _____		Name: _____	
Address: _____		Address: _____	
City/State/Zip: _____		City/State/Zip: _____	
Phone # (Day): _____ Fax: _____		Phone # (Day): _____ Fax: _____	
Email: _____		Email: _____	
State Contr. Lic #: _____ Exp: _____			

I hereby certify under penalty of perjury of the Laws of the State of Washington that I have read and examined this application and know that the information contained herein is true and correct. I certify that I am the owner of the subject property, or, that I have been given express permission by the owner of the subject property to submit this application for permit. I understand that the granting of a permit does not authorize me in any way to violate or cancel any of the provisions of state or local law regulating the construction or performance of construction sought under this permit.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date