



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 SUPPRESSION PERMIT APPLICATION

FEES: \$47 Plan review/\$47 Inspection Fee = \$94.00

| | | | |
|---|--|---|--|
| Address: _____ | | Parcel Number(s): _____ | |
| Existing Fire Suppression System? ___ Yes ___ No | | New Fire Suppression System? ___ Yes ___ No | |
| Change of Use? ___ Yes ___ No | | | |
| 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 _____ | | | |

Other fees:

| | |
|---|---------------------|
| Re-inspections due to testing failure: | \$47 per inspection |
| Systems installed without a permit | \$188 per system |
| Systems installed w/o testing & business in operation | \$376 |

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