

DEPARTMENT OF PLANNING AND DEVELOPMENT REVIEW
BUREAU OF PERMITS AND INSPECTION
ROOM 110 CITY HALL
900 E. BROAD STREET
RICHMOND, VIRGINIA 23219
PHONE (804) 646-4169
FAX (804) 646-1569

## FIRE ALARM PERMIT APPLICATION

	TRACK 1
PERMIT NO.	
R	
PROJECT NO.	
В	

## THIS IS AN APPLICATION <u>ONLY</u>. IT IS NOT AUTHORIZATION TO START ANY WORK. NO WORK SHALL START UNTIL A PERMIT IS POSTED ON THE JOB SITE.

	1 JOB/PR	OPERTY ADDRESS			TART OR								FLOOR/RO			
H H H	3 CONTRACTOR NAME				4	4 LICENSE TYPE			CLASS	6	STATE LICE	NSE NO.				
MATION	7 CONTRACTOR STREET ADDRESS						CONTRACTOR TELEPHONE NO. / EMAIL ADDRESS									
INFOR	OITY STATE							ZIP CODE ① CONTRACTOR FAX NO.								
	1) PROPERTY OWNER NAME  1) PROPERTY OWN				NER ADDRESS/ZIP											
	14 DESCR	IBE CURRENT STR	UCTURE (	JSE			13	DESCRIBE PR	OPOSED S	STRUCTURE U	SE					
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FORMA'	OFFICE	OFFICE BLDG.			GARAGE	AGE DECK AD2			PORCH AD3			PORCH		REMOD LIGHT AL1	EL	
BUILDING INFORMATION	ONLY	3 ALTER/			Ø NEV	IEW BUILDING 28 MOVING/ RELOCATIO				/ PREPAIR/ TION REPLACEMENT						
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NC NC		IBE SCOPE OF WO		CLODING MATERIA	IL, LABOR, SUBCO	VIRACIS OVERP	IEAD AN	ID PROFII		Φ						
WORK																
DESCI	35 CONTAC	CT PERSON							€ CON	TACT PHONE I	NO.		€ CONT	TACT FAX NO.		
7		CT ADDRESS						ZIP CODE		39 ∈						
MATION			150.50		NAME						WI7 (IL		PHONE NO			
S O	PICK UI	I WANT TO BE CAL P PERMIT WHEN IS	SSUED? '	□ YES □ NO									THORE NO	•		
	4) ENGINE	EER NAME		<b>@</b>	ENGINEER PHONE N	ONE NO. 43 ENGINEER FAX NO.			•	44 EMAIL						
	DE 4 Zone F	SCRIPTION Panel		QUANTITY	Speaker	SCRIPTION		QUANT	TTY					YES	NO	
	12 Zone				Flow Sw	ritch				Voice Evacuation						
Ш	Annuncia	able FACP ator			Tamper Switch Fire Pump Monitor					Stair Pressurization Smoke Evacuation						
DONE	Heat Det					enerator Monitor					Off Site Monitoring					
O BE	Smoke Duct Det				Suppres	Suppression Activation				Wiring Methods						
³K Ţ	Strobe/H	lorn							Cable							
OF WORK TO	Strobe							Conduit								
	Pull Stat	ion							Sprinkle			ре				
TYPE	Bell								NFPA 13 NFPA 13D			)				
										NFPA						
										Manua						
										Autom	auc S	ystem				
										Fully S	Sprinkl	ed?				
3	I HEREBY A	FFIRM THAT UNDER	THE PROV	/ISIONS OF TITLE 54.	1-1101 OF THE CODE	OF VIRGINIA, I AN	1 NOT SU	JBJECT TO LICE	NSURE AS	A CONTRACTO	R OR SU	BCONTRAC	TOR. BY THI	S AFFIDAVIT I	ASSUME FULL	
IDAVIT		CONTRACTOR.	IUN OF TH	E PROPOSED WORK	IN ACCORDANCE WITH	SIGNATURE	RUILDIN	G CODES AND L	AW. I ALS(	UNDERSTAND	IT IS A	VIOLATION	DATE	AW TO KNOWI	NGLY HIRE AN	
語						OIGIVAI UNE							DATE			
CATION	<b>A</b> I							CERTIFY THAT	THE BUILI	DING AT						
ASBESTOS CERTIFICATION	HAS BEEN INS	SPECTED OR MEETS T	HE EXCEPTION	(NAME OF APPLIC ONS OF SECTON 110.3,	CANT) THE VIRGINIA UNIFORM SHA "STANDARDS FOR (	I STATEWIDE BUILDIN					PER REO			OR OR SUITE) N AIR ACT" NATIO	ONAL EMISSION	
STOS C	STANDARD F	OR THE HAZARDOUS A	AIR POLLUTA	ANT (NESHAPS) AND O	SHA "STANDARDS FOR (	CONSTRUCTION WOR	KERS".									
ASB	SIGNATURE VIOLATION ON PRO					BODED	DPERTY DELINQUENT TAXES DUE?				ICC TYPE OF CONSTRUCTION					
<u></u>		YES 🗆 NO	)	☐ YES	□ NO	□ YE		] NO			DE? □ NO		IOO TIPE (	o, constnuc	TION	
OFFICE USE ONLY	EXISTING U		PROPOS	SED USE GROUP	FEE CALC.		PERMIT		FEE RECE		IPT NO.		CASH 🗌 C	CHECK (	CREDIT CARD	
S n z	IS PROPER	TY IN 100 YR	FLOOD	ELEV.	SITE ELEV.			CHESAPEAKE	BAY PROT	ECTION AREA	?	CHESAP	EAKE BAY M	ANAGEMENT	AREA?	
FICE	FLOOD PLAIN?  YES NO YES NO YES NO YES NO DATE  APPLICATION APPROVED BY DATE															
Ö	APPLICATIO	ON APPROVED BY				DATE	Al	PPLICATION DIS	SAPPROVE	:n RA				DATE		

BY SUBMITTING THIS APPLICATION, I CERTIFY I AM IN COMPLIANCE WITH THE CODE OF VIRGINIA, SECTION 54.1-1100 ET SEQ; RULES AND REGULATIONS OF THE VIRGINIA BOARD OF CONTRACTORS AND CHAPTER 14, CODE OF THE CITY OF RICHMOND.

**RESIDENTIAL ONLY - 1 & 2 FAMILY** 

FEE SCHEDULE · BASED ON VALUE OF CONTRACTOR'S ESTIMATE OR ESTIMATE CALCULATED BY R.S. MEANS, WHICHEVER IS HIGHER AMOUNT. VALUE OF WORK INCLUDES LABOR,

**OVER \$2000** \*Add \$6.07 per thousand or fraction thereof for residential construction.

VALUE OF WORK

Add a 2% state surcharge to the final calculated fee.

\$0 - \$2000

**PERMIT FEE** \$63.00 \$63.00\*

**COMMERCIAL ONLY** VALUE OF WORK PERMIT FEE \$0 - \$2000 \$131.00 \$131.00\* OVER \$2000 \*Add \$8.50 per thousand or fraction thereof for commercial construction.

Add a 2% state surcharge to the final calculated fee.

MATERIALS, SUBCONTRACTS, OVERHEAD
AND PROFIT. THE FEE IS BASED ON
CONTRACTOR'S ESTIMATE OR ESTIMATE
CALCULATED BY R.S. MEANS, WHICHEVER
IS HIGHED AMOUNT

	CODE	DESCRIPTION	CODE	DESCRIPTION	CODE DESCRIPTION		CODE	DESCRIPTION	
	A1A	THEATER/STAGE	B5	FIRE STATION	H5	HIGH HAZARD	NU	NO USE SANCTIONED VACANT STRUCTURE	
	A1B	THEATER NO STAGE	B6	FUNERAL HOME	11	GROUP HOMES 17 OR MORE	R1M	MOTEL	
	A2A	NIGHTCLUB	B7	LAUNDRY	I2A	INSTITUTIONAL INCAPACITATED	R2A	DORMITORIES	
S	A2B	RESTAURANT EAT IN	B8	MEDICAL OFFICE	I2B	INSTITUTIONAL DAY NURSERY	R2B	MULTIFAMILY	
90	A3B	MUSEUM/ART GALLERY	B9	OFFICE	13	DETENTION FACILITY	R2C	LODGING HOUSES	
Ö	A3C	LIBRARY	B10	BUSINESS - OTHER	14	ADULT CARE FACILITY	R3A	1&2 FAMILY OVER 3 STORIES	
Ž	A3D	PASSENGER TERMINAL	E1	EDUCATION/SCHOOL 1 TO 12	I4B	CHILD CARE >5 CHILDREN <2.5 YRS	R5A	SINGLE FAMILY ATTACHED UNDER 4 STORIES	
G. D.	A3F	LECTURE HALL	E2	DAYCARE OVER 2 1/2 YEARS	MU	MIXED USE	R5B	TWO FAMILY ATTACHED UNDER 4 STORIES	
SE	АЗН	CHURCH	F1	FACTORY MODERATE HAZARD	M1	RETAIL CONVENIENCE STORE	R5C	SINGLE FAMILY DETACHED UNDER 4 STORIES	
ä	A4A	RECREATION CENTER	F2	FACTORY LOW HAZARD	M2	RETAIL DEPARTMENT STORE	R5D	TWO FAMILY DETACHED UNDER 4 STORIES	
	B1	AUTO DEALERSHIP	H1	HIGH HAZARD	M3	RETAIL SUPERMARKET	R4A	ASSISTED LIVING 5 TO 16 PEOPLE	
	B2	DENTIST/DOCTOR'S OFFICE	H2	HIGH HAZARD	M4	RETAIL STORE	S1	STORAGE MODERATE HAZARD	
	В3	BANK	НЗ	HIGH HAZARD	M5	RETAIL AUTO SERVICE STATION	S2	STORAGE LOW HAZARD	
	B4	CAR WASH	H4	HIGH HAZARD	R1H	HOTEL	U	TEMPORARY/MISC	

## INSTRUCTIONS ON FILLING OUT A FIRE ALARM PERMIT APPLICATION

At the top right hand corner of the application is a capital E. This is the space where your permit number will be written after you have paid for the permit. There is also a capital B, this is where you will write any building permit number that is associated with the electrical permit application.

Box #1 - Fill in the number & street address where the work is being done.

Box #2 - This is to be used on multi-story commercial and multi-family residential projects. It can be left blank on single family and duplex permit applications.

Box #3 - Fill in the name of the contractor doing the work or your name if you are the owner/tenant and are applying for the permit as the owner/tenant.

Box #4 - Fill in the classification that is on your contractor's license such as ELE, ESC, etc.

Box #5 - Check the class of license located on your contractor's license.

Box #6 - Fill in state board of contractor's license number. It will always begin with 2701 or 2705 and be followed by six digits. Do NOT use a license number that begins with 2710 as this is a tradesman card number and does not allow you to apply for a permit.

Box #7 - Fill in the contractor's street address.

Box #8 - Fill in the contractor's telephone

Box #9 - Fill in the contractor's city, state and zip code.

Box #10 - Fill in the contractor's fax number.

Box #11 - Fill in the name of the property owner.

Box #12 - Fill in the property owner's address.

Box #13 - Fill in the property owner's daytime phone number.

Box #14 - Fill in the current use of the property such as restaurant, single family dwelling, duplex, etc.

Box #15 - Fill in the proposed use of the property such as restaurant, office, duplex, etc.

Boxes #16 through #29 - Office use only.

Box #30 - Fill in when dealing with single family houses and duplexes. Note the detached and attached designation. If the house stands alone and does not touch the house on either side, it is detached.

Box #31 - Fill in the number of apartment units in the building.

Box #32 - Check the appropriate box, if applicable.

Box #33 - COST INFORMATION - Fill in the cost of all labor, materials, overhead, subcontracts and profit. This may be used to determine how much you pay in permit

Box #34 - Give a brief description of the work to be done.

Box #35 - Fill in the name of the person to contact if there are questions about the application or drawings.

Box #36 - Fill in the contact person's phone number.

Box #37 - Fill in the contact person's fax number.

Box #38 - Fill in the contact person's complete address.

Box #39 - Fill in the contact person's e-mail, if available.

Box #40 - Check whether or not you would like to be called to pick up the permit. If you check "yes", fill in your name and phone number.

Box #41 - If submitting drawings done by an engineer please fill in their name here.

Box #42 - Fill in the Engineer's phone number.

Box #43 - Fill in the Engineer's fax number.

Box #44 - Fill in the Engineer's e-mail address.

TYPE OF WORK TO BE DONE - Give the quantities of all smoke detectors, heat detectors, annunciators, horns/strobes, panels, bells, strobes, speakers, flow switches, tamper switches, duct detectors and other items listed under type of work being done heading.

Fill in the wiring method being used such as EMT, RMC, MC, PLFA Cable, NPLFA Cable, etc. Please do so next to wiring method designation. If riser rated or plenum rated, mark as such.

Box #A, B & C - Fill out the asbestos certification with the Applicant's name, property address and signature, if renovating an existing commercial structure. (This section is not applicable to residential structures of 4 units or less.)

> OFFICE USE ONLY - DO NOT WRITE IN THIS AREA.