



# CONCORD FIRE DEPARTMENT

## FIRE PREVENTION DIVISION

### FIRE SPRINKLER SYSTEM PERMIT APPLICATION

<b>Standard</b> (Work other than qualified Quick Start Permits)	<b>Quick Start (Existing Systems Only)</b> (Less than 5 heads and no work in remote area, Only)						
Concord Fire Department Fire Prevention Division 100 Warren C. Coleman Blvd. N., Concord, NC 28027 (704) 920-5517; fax (704) 920-6936	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Development #</td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="padding: 2px;">Project #</td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="padding: 2px;">Permit #</td><td style="border-bottom: 1px solid black;"></td></tr> </table> <p style="text-align: center; margin-top: 10px;"><b>[THIS BOX FOR STAFF USE ONLY]</b></p>	Development #		Project #		Permit #	
Development #							
Project #							
Permit #							

Permit Fees paid at time of application are **NON-REFUNDABLE**

(Standard: Total fee due at application)  
Permit \$150 and Test Inspection \$150

(Quick Start: Total fee due at application)  
Permit \$150

NOTE: **Standard Permit** submittals for review need to include, Specifications and applicable calculations. **Quick Start Permit** submittals need to include specifications and declaration of work not occurring in design or remote area.

**\* All plans for review must be submitted through the ACCELA citizens access portal**  
<http://www.concordnc.gov/Departments/Planning/Zoning-Services/Online-Access>

Project Name/Tenant _____	Bldg Permit # _____
Site Address _____	Unit/Bldg/Suite # _____
Complex Name _____	Tax Parcel # _____

Contractor Name _____	Phone # _____
Contact Name _____	Fax # _____
Business Address _____	City _____ State, ZIP _____
State License Number _____	State License Expiration Date _____
e-mail address _____	Concord Business License # _____

~ **SCOPE OF WORK** ~

**New System(s):**

Number of Heads _____	Number of Risers/Supplies _____
Fire Pump? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, quantity _____
	Number of Standpipe Systems _____

**Modification to existing system(s):**

Number of Risers affected \_\_\_\_\_ Number of heads added, deleted, relocated \_\_\_\_\_

Do your plans conform to the requirements of NFPA 13, Plans & Calculations?  Yes  No

If no, why? \_\_\_\_\_

**Description of work (if additional space is needed the information should be placed on company letterhead)**

\_\_\_\_\_  
\_\_\_\_\_

- o Failure to provide any necessary information may result in delay of the review process or rejection of your application.
- o Failure to obtain a valid permit to working on a system will result in a doubling of your permit fees and a stop work order issued on the job.
- o A valid permit and approved plans for a standard permit, or a reference copy for a quick start, must be at the job site prior to scheduling your final inspection.
- o Please allow a minimum of two weeks for Concord Fire Department review process.

**I understand that all applicable codes apply. Errors and/or omissions on the plans and corrections from field inspections are the responsibility of the owner/contractor. All work is subject to the compliance with City of Concord ordinances and laws of the State of North Carolina.**

**SIGNATURE**

PRINT NAME (Applicant) \_\_\_\_\_

PHONE \_\_\_\_\_  
DATE \_\_\_\_\_