



## DURHAM CITY FIRE PROTECTION PERMIT APPLICATION

101 City Hall Plaza, Durham NC, 27701  
Phone: (919) 560-4144  
<http://durhamnc.gov/467/Dplans>  
[www.durhamnc.gov](http://www.durhamnc.gov)



Inspections

**JOB ADDRESS** \_\_\_\_\_ **UNIT/SUITE** \_\_\_\_\_

**JOB DESCRIPTION** \_\_\_\_\_

**BUILDING PERMIT NUMBER** \_\_\_\_\_

**CONTRACTOR** \_\_\_\_\_ **CONTR. ID NO.** \_\_\_\_\_

**EMAIL** \_\_\_\_\_ **STATE LIC. NO.** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_ **TELEPHONE NUMBER** \_\_\_\_\_

**PROPERTY OWNER** \_\_\_\_\_

**EMAIL** \_\_\_\_\_ **TEL. NO.** \_\_\_\_\_

SYSTEM TYPE:

SPRINKLER

FIRE PUMP

FIRE ALARM

HOOD SUPPRESSION

OTHER

SCOPE OF WORK:

APPLICANT: THE PERMIT HOLDER IS REQUIRED TO REPORT THIS WORK WHEN READY FOR INSPECTION. ALL WORK TO BE DONE ACCORDING TO CITY AND STATE LAWS. PRIOR TO WORK BEING STARTED, AN APPROVED PERMIT AND PLAN MUST BE ON JOBSITE. PLEASE CONTACT THE DURHAM CITY FIRE MARSHAL'S OFFICE AT 919-560-4233 ext. 19244 TO SCHEDULE A FIRE INSPECTION 48 HOURS IN ADVANCE.

**REQUESTED BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

(Please Print)

**SIGNATURE** \_\_\_\_\_