

Application for Fire Alarm Installation Permit

Permit Information Sheet

Enter/Approve _____	DATE _____
PAID _____	DATE _____

Fire Marshal's Office City of Lake Jackson
10 Oak Drive
Lake Jackson, TX 77566
(979) 415-2726 Fax (979) 415-2679

OFFICE USE ONLY
APPLICATION # _____

Job Address: _____

Total Estimated Value: _____

Work Description: _____

Contractor: _____ Address: _____ Phone: _____

License #: _____

Owner/Other: _____ Address: _____ Phone: _____

Applicant expressly agrees and understands:

That any information, drawing, plan specifications, concept detail or other information regarding the operation, material, equipment, product, procedures or processes and all approved testing agency certifications will be submitted to the Fire Marshal upon his request prior to any approval being issued.

That the applicant will comply with all Ordinances, Codes, Standards, and Regulations as may apply, pertaining to, and governing such operation, procedure, installation or process.

That the permit fees specified shall be DOUBLED when work is started prior to obtaining applicable permit.

Signature: _____

Date: _____

Date Paid: N/A Amount: no cost

**Please submit three (3) sets of plans with this application.
-Two sets of plans for Fire Marshal.
-One set of plans for Building Official.