



Date	_____
Tracking Number	_____

**SIGNALING/SUPPRESSION PERMIT APPLICATION SUPPLEMENT B**

**APPLICANT INFORMATION**

Applicant Identity: Contractor Architect Engineer  
 Mark all that apply Other \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**CONTRACTOR INFORMATION SAME AS ABOVE**

Name \_\_\_\_\_

Company Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

State License Number \_\_\_\_\_ City License Number, if applicable \_\_\_\_\_ Expiration Date \_\_\_\_\_

**ARCHITECT INFORMATION SAME AS ABOVE**

Name \_\_\_\_\_

Company Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ License Number \_\_\_\_\_

Email \_\_\_\_\_

**ENGINEER INFORMATION SAME AS ABOVE**

Name \_\_\_\_\_

Company Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ License Number \_\_\_\_\_

Email \_\_\_\_\_



Date	_____
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**SIGNALING/SUPPRESSION PERMIT APPLICATION SUPPLEMENT B**

**Description of proposed work:**

ATTACHMENTS: Fire Marshal System Review Letter Attached  
Fire Marshal Exemption Letter Attached

**ACKNOWLEDGMENTS**

I hereby certify that I have read and examined this application and know the same to be true and correct and the work specified is authorized by the owner. All provisions of law and ordinances governing this type of work must be compiled with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY (Approvals)**

Approved and Issued by: \_\_\_\_\_ Badge #: \_\_\_\_\_ Date: \_\_\_\_\_

State Fire Marshal Project Number: PO \_\_\_\_\_