



FORSYTH COUNTY FIRE MARSHAL'S OFFICE

# Suppression System Permit Application

Business Name: \_\_\_\_\_ Site Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

System Contractor: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Building Contractor: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ WS/FC Building Permit Number: \_\_\_\_\_

### Type of Work

New Construction  Alteration  Addition

### Type of System

FM 200 \_\_\_\_\_ Wet Chemical \_\_\_\_\_ Dry Chemical \_\_\_\_\_

Number of Nozzles: \_\_\_\_\_ Nozzle types: \_\_\_\_\_

Number of Tanks: \_\_\_\_\_ Size of Tanks: \_\_\_\_\_

The following information must be submitted with, or on the plans:

- Size, length and arrangement of piping
- Description and location of nozzles from protected appliances.
- Location on function of detection devices, operating devices, auxiliary and electrical circuitry if used.
- Flow rate per nozzle(s).

### Fee Schedule

The fee for fire alarm systems review is **\$120.00**.

### Other Information

Plans are reviewed on a first-come, first-serve basis. Re-review will be treated as a first submit. Depending on the workload, the review could take up to two weeks to complete.

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

### Office Use Only

Two sets of plans submitted Y or N Date Received: \_\_\_\_\_ Plans Approved Y or N

Approved by: \_\_\_\_\_ Permit # \_\_\_\_\_

Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Cash: \_\_\_\_\_ Check #: \_\_\_\_\_

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