

TOWN OF SPRING LAKE FIRE CONSTRUCTION PERMIT

PERMIT NO:FCP _____

Complete address where work will be performed:						
Permit to be issued to (Contrator/Business Name):						
Address:				Phone:		
North Carolina License No:			Town of Spring Lake Business License No:			
Complete Name of Protperty Owner:						
Property Owner's Address:						
Property Owner's Phone Number:						
Class of Work: New <input type="checkbox"/> Addition <input type="checkbox"/> Replacement <input type="checkbox"/> Other <input type="checkbox"/>						
Item	No.	Price		Item	No.	Price
Automatic Fire Extinguisher System				Hazardous Materials		
Battery Systems				Insdustrial Ovens		
Compress Gases				L.P. Gas		
Fire Alarm & Detection System & Related Equipment				Private Fire Hydrants		
Fire Pump & Related Equipment				Spraying & Dipping		
Flammable & Combustible				Stand Pipe Systems		
Inspection - Fire Construction Permit CC Code 4410				Temporary Membrane Structures, Tents		
				Tents & Canopies		
Total Permit Fees						

YOU MUST CALL TO SCHEDULE AN INSPECTION AT PROPER STAGE(S) OF WORK.

CALL THE INSPECTIONS DEPARTMENT AT (910) 436 - 0241 TO SCHEDULE INSPECTION.

The undersigned hereby makes application for permit and inspection of work described and agrees to comply with all applicable laws regulating the work performed.

Signature of Applicant _____

Date : _____

Print Name _____

Fire Inspector Signature _____

Approved

Disapproved

Date: _____

Fee Collector _____

Date: _____