

**Town of Putney Fire Department
Fire Prevention Division**

Fire Alarm / Fire Suppression Systems Permit Application

Section A; Site Information:	
Name of Building / Site:	_____
Former Building Name:	_____
Physical Location: (9-1-1 Address)	_____
Building Owner Name:	_____
Property Owner Address:	_____
Property Owner Telephone: Home ()	E-mail
Work ()	

Section B; Project Information:	
What is the permit being obtained for?	
<input type="checkbox"/> Fire Alarm System Installation	<input type="checkbox"/> Fire Suppression System; non-sprinkler
<input type="checkbox"/> Fire Sprinkler System	<input type="checkbox"/> Special Process / Hazard Permit
<input type="checkbox"/> Other:	

* Official Use Only *

Site #:	Project #:	Date Rec'd:
Amount Due:	Amount Rec'd:	Check #:
Check From:		Permit #:

Please return form and payment to:

Putney Fire Department
14 Main Street; PO Box 875
Putney, Vermont 05346

Section C; Fire Alarm: Complete for all fire alarm systems or system alterations

Name of Installer: _____

VT Electrical License #: _____ VT TQP #: T-1

System Features: Manual Automatic Detection Voice Evacuation
 Horn / Strobe Notification
 System monitoring; indicate means _____

Wiring Method: Class A Class B Other: _____

This application must be accompanied by the following:

- Floor plan, drawn to scale, with device locations and ceiling heights indicated
- Manufacturer's specifications and information for each type of system component proposed for installation

NOTE: The installer must also file an Electrical Work Notice with the Vermont Division of Fire Safety prior to the start of the project

Section D; Sprinkler & Standpipe Systems: System installations or alterations

Name of Installer: _____

Installer VT TQP Certification #: T-3

Name of Designer: _____

Designer VT TQP Certification #: _____

Type of Sprinkler: Complete Residential (13 R) Domestic (13 D)
 Limited Area Wet Dry Pre Action

Type of Standpipe: Wet Dry Class: _____
 Automatic Semi-Automatic Manual

Water Supply Data: Volume: _____
Pressure: _____
Tested By: _____
Date of Test: _____

If this project is a modification to an existing system, please describe the project on a separate sheet. This application must be accompanied by: Drawings of the coverage area including equipment and device locations; manufacturer's specifications and information for each system component to be installed; fire pump manufacturer's specifications and information; complete piping plans, full height cross sections, and ceiling construction details; sprinkler water storage tank information

Section E; Automatic Fire Suppression Systems:

Complete for all suppression system install or alterations, except sprinklers

Name of Installer: _____

Installer VT TQP Certification #: T-2

Agent Type: Wet Chemical Dry Chemical

Clean Agent (specify type): _____

Other: _____

System Make: _____

System Model: _____

This application must be accompanied by the following:

- Drawing of coverage area including equipment and device locations
- Manufacturer's specifications and information
- Calculations for concentration of clean agents

Section F; Project Permit Fee:

Make check payable to Town of Putney and include with application

Water sprinkler system (new)	\$150.00 flat fee	\$ _____
Water sprinkler alterations	\$100.00 flat fee	\$ _____
Sprinkler riser inspection (new)	\$25.00 per riser	\$ _____
Sprinkler pump inspection (new)	\$50.00 per pump	\$ _____
Sprinkler supply tank(s)	\$50.00 flat fee	\$ _____
Fire alarm system (new)	\$150.00 flat fee	\$ _____
Fire alarm system alterations	\$100.00 flat fee	\$ _____
Fire alarm system panel inspection	\$50.00 per FACP/RA	\$ _____
Other suppression system	\$150.00 flat fee	\$ _____

Total Fee: \$ _____

I hereby certify that the information contained within this application is correct and accurate.

Applicant Signature: _____

Date of Application: _____