



**City of Thomasville
Fire Department
Fire Prevention Bureau**



Application For Fire Prevention Permit

Permit #: _____ Nature of Permit: _____

Applicant: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Owner: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Project: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

NOTE: This Permit may be Revoked if conditions change as outlined in the North Carolina Fire Code, Chapter 1 §105, or when any provision of the Code, including payment of Fees, are not met.

Applicant Signature: _____ Date: _____

To Be Completed By Fire Marshal's Office:

Permit Applied For: _____ Code Number: _____

Applicable Code - Edition: _____ Occupancy Classification: _____

Construction Type: _____ Area (Sq. Ft.) _____ Stories: _____

Fire Suppression/Detection: _____ Auto. Sprinklers _____ Fire Alarm _____ Others: _____

Plans Required: _____ Plans Submitted: _____ Fire District: _____

Date: _____ Expiration Date: _____ Fees Paid: _____

Signature of Code Official / Title: _____ Date: _____

Invoice for Fire Prevention Permit Application/Review Fees

Location of Activity: _____

Property Owner: _____

Applicant: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

| | |
|---------------------|----------|
| Permit Applied For: | Fee Each |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| Total: | \$ _____ |

Paid: Cash _____ Check #: _____

Date: _____ Application Issued By: _____
Name and Title