Commercial Fire Sprinkler Application
10 Heads or Less Only
Date of Application $\qquad$

## Job Information

## Job Address

Project Name
Valuation of Work (fair market value of labor \& materials) \$

## Contractor Information

## Contractor

Phone
Address
Contractor's State
License Number

## Contractor's City

Business License
Number (Required) $\qquad$
Contact Person
Phone
Email Address

## Scope of Work

Indicate type of work and tally heads (Maximum 10 heads)

## Tenant Improvement Alterations

Relocating $\qquad$ Heads + Adding $\qquad$ Heads + Capping /plugging $\qquad$ Heads $=$ Total Heads $\qquad$

## Verify Each of the Required Conditions

> All work completed in accordance with applicable NFPA standards, city ordinances and / or standards
> Work will not change hydraulic calculations
> No moving / relocating mains or cross mains
> Limited to Light / Ordinary Hazard

## Inspection Requirements

> Plans and cut sheets (for new equipment) on site and stamped by WA State certified designer (at the appropriate level based on type of project) If Provided
> Cover Inspection of the piping prior to installation of the ceiling or ceiling tile
> Final inspection of the completed system.
I hereby certify that I am the owner (or the owner's authorized agent) of this property or an appropriately licensed contractor (or the firm's authorized agent) and the installation of the work described will be performed in accordance with all applicable laws \& codes, including state contractor registration laws. I understand that failure to comply may result in revocation of any permit from this application.
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