



Fire Protection Application

Important: All Fields Required

Building Information									
Project/Business Name:									
Project address:					DCES Permit # _____ Unless retrofitting an existing building all Fire Protection Applications must reference the building construction permit they are applying under.				
City/State:			Zip:						
DCAD#: _____ <small>www.dentoncad.com</small>									
<input type="checkbox"/> UNDERGROUND		<input type="checkbox"/> FIRE ALARM		<input type="checkbox"/> SPRINKLER		<input type="checkbox"/> HOOD/FIXED SYSTEM			
Company Information									
Company Name:					E-mail:				
Contact Name:									
Address:									
City/State:							Zip		
Phone:			TX State License. # _____			EXP. _____			
Property Owner Information									
Property Owner (Business or Individual):									
Address:									
City/State:							Zip:		
Email					Phone:				
Lease Space Info									
S P R I N K L E R S	<input type="checkbox"/> Light Hazard		Ordinary Hazard 1 <input type="checkbox"/> 2 <input type="checkbox"/>		Extra Hazard 1 <input type="checkbox"/> 2 <input type="checkbox"/>		<input type="checkbox"/> ESFR	<input type="checkbox"/> ELO	<input type="checkbox"/> High Pile Storage
	<u>Installation</u>		<u>Supply</u>		<u>Type</u>		<u>Standpipe</u>		Number of Heads:
	<input type="checkbox"/> New		<input type="checkbox"/> Underground Only		<input type="checkbox"/> Wet		<input type="checkbox"/> Wet		
	<input type="checkbox"/> Addition		<input type="checkbox"/> Sprinkler Only		<input type="checkbox"/> Dry		<input type="checkbox"/> Dry		
	<input type="checkbox"/> Remodel		<input type="checkbox"/> Underground w/ Hydrants		<input type="checkbox"/> Foam		<input type="checkbox"/> Combination		NFPA Code Used/Yr:
				<input type="checkbox"/> Deluge		<input type="checkbox"/> Wall Hydrant			
				<input type="checkbox"/> Preaction		<input type="checkbox"/> Dry Hydrant			
				<input type="checkbox"/> Anti-Freeze		Number - _____			
F I R E A L A R M	<u>Installation</u>		<input type="checkbox"/> Automatic F/A		Number of Devices:			HOOD FIXED SYSTEM(s)	
	<input type="checkbox"/> New		<input type="checkbox"/> Manual System					<input type="checkbox"/> Hood(s) Qty: _____	
	<input type="checkbox"/> Addition		<input type="checkbox"/> Elevator Recall		NFPA Code Used/Yr:			<input type="checkbox"/> Fixed Paint Booth System(s) Qty: _____	
	<input type="checkbox"/> Remodel		<input type="checkbox"/> Pre-Action					<input type="checkbox"/> Releasing System	
		<input type="checkbox"/> Duct Detection							

The Permit applicant understands and agrees the County Official may make scheduled or unscheduled inspections of the property upon the issuance of the permit. The applicant is aware that pursuant to Chapter 352 of the Texas Local Government Code, the County Fire Marshal may, in the interest of safety and fire prevention, inspect certain structures for fire hazards. If the permit applicant is a corporation, partnership or other legal entity other than a natural person, then the undersigned acting as the authorized representative of said entity will be responsible for ensuring the entity's compliance with all provisions. The undersigned has carefully reviewed this application and the answers to all questions. To the best of my knowledge, the answers are all true and correct.

Signature: _____ Title: _____ Date: _____