



Sprinkler Permit Application

Address of Property: _____

Contractor Information:

Business Name: _____

Contact Name: _____

Business Licence #: _____ TQ #: _____

Business Address: _____

Phone: _____ Email: _____

Item	Quantity	Item	Liner Meters
Sprinkler heads (first 20)		Fire Services (30 M)	
Each additional head		Dom. water service (30 M)	
Fire hose cabinets		Each additional 30 M	
Fire house out/inlets		<i>* Fee rate based on 30 M increments</i>	
Standpipes			
Backflow preventer			
Siamese connections			
Fire hydrants			
Other: _____		Quantity: _____	

Contractor's signature: _____ Date: _____