



## Gilchrist County Building Department

209 SE 1<sup>st</sup> Street Trenton, FL 32693

Phone: (352) 463-3173 Fax: (352) 354-9113

### Fire Safety Application

Please print

#### Owner Information

Owner Name:

Mailing Address:

City:

State:

Zip:

Contact phone number:

E-mail:

Proof of Ownership:  Recorded Deed  Other:

#### Applicant (if other than owner)

Name:

Address:

Contact phone number:

E-mail:

Contractor Name (if different):

License #:

#### Property Information

Description of Project:

Project Address:

City:

State:

Zip:

Parcel Number:

 New System  Replacement  Upgrade Fire Alarm \$150.00  Fire Sprinkler \$100 review plus \$1.00 per head  Commercial Kitchen \$150 Flat Life Safety \$100 1<sup>ST</sup> hour, \$60 every hour thereafter  Other Review and Inspection .08(cents) per square foot \$100 minimum

Note: Two sets of plans and manufactures' documents must be submitted for review prior to issuance of a permit. Contractor must submit license and insurance prior to permitting.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work shall be complied with whether specified herein or not.

*The Department and Applicant agree that this Document may be electronically signed. The parties agree that electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability and admissibility.*

\_\_\_\_\_  
Signature of Contractor\_\_\_\_\_  
Date