Building Inspection Department
306 NE 6th Avenue, Thomas Center B
Gainesville, FL 32602
PH 352-334-5050
FAX 352-334-2207

MAIL-IN PERMIT APPLICATION

FIRE SUPPRESSION/SPRINKLER

Type of System (Circle) Sprinkler Wet Chemical Dry Chemical Halon or Substitute

Description of Work: _____

Site Address _____

Building Occupancy Classification _____

Owners Name: _____

Address: CITY _____ STATE _____ ZIP _____

Applicant Name: _____

Company: _____

Address: CITY _____ STATE _____ ZIP _____

Contractor License Number: CITY: _____ STATE _____

Authorized Signature: _____ DATE: _____

SCHEDULE OF FEES (Required at time of submittal)

Where the value does not exceed $1.000		X	$ 100.00	
Where the valuation is over $1,000				
First $1,000		X	$ 100.00	
Each additional $1,000 or fractional part up to $250,000		X	$ 6.75	
Where the valuation is over $250,000				
First $250,000		X	$ 1,780.75	
Each additional $1,000 or fractional part up to $1,000,000		X	$ 3.50	
Where the valuation is over $1,000,000				
First $1,000,000		X	$ 4,405.75	
Each additional $1,000 or fractional part thereafter		X	$ 3.50	
SUBTOTAL				
COMMERCIAL PLAN REVIEW (20% OF SUB TOTAL AMOUNT)				
State Surcharge is 3% of total fees (Min $4.00)				

TOTAL _____

NFPA standards for fire suppression are found in 69A-60.005 of the Florida Administrative Code.