EMERGENCY SERVICES		Joseph Hundley ergency Services Chief Brock Smith uty Chief/Fire Marshal	- And	Apport		
Dusiness Neme		ystem Permit Ap				
	Site Address: Phone:					
System Contractor:	Address: Fax:Email:					
Building Contractor: _		Address:				
	WS/FC Building Permit Number:					
		Fype of Work on Alteration	Addition			
	Т	Type of System				
			emical			
Number of Nozzles:	Nozzle types:					
Number of Tanks:	Size of Ta	nks:				

The following information must be submitted with or on the plans:

- Size, length, and arrangement of piping
- Description and location of nozzles from protected appliances.
- Location on the function of detection devices, operating devices, auxiliary and electrical circuitry if used.
- Flow rate per nozzle(s).

Fee Schedule

The fee for suppression systems review is \$120.00.

Other Information

Plans are reviewed on a first-come, first-serve basis. Re-review will be treated as a first submit. Depending on the workload, the review could take up to two weeks to complete.

Signature:	Date:							
Office Use Only								
Two sets of plans s	ubmitted Y or N	Plan	Plans Approved Y or N					
Approved by:								
Date:	Fee:	Cash:	Check #:	5/23				

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