FIRE MARSHAL PERMIT APPLICATION MAC AIRPORT FIRE DEPARTMENT

6920 34th AVENUE SOUTH **MINNEAPOLIS, MN 55450-2799**

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OFFICE USE ONLY
PERMIT

		NUM	<u>BER:</u>			
DATE:	MAC NUMBE	R:				
SITE ADDRESS:						
PROJECT VALUATION: \$						
APPLICANT IS: CONTRACTOR	□ ARCHITECT	□ ENGINEER	□ OTHER			
PROPERTY OWNER/TENANT NAME						
NAME:						
ADDRESS:						
CITY:		ST:	ZIP CODE:			
CONTACT PERSON:		PHONE NUMBER:				
CONTRACTOR		Email	:			
NAME:						
ADDRESS:						
CITY:		ST:	ZIP CODE:			
CONTACT PERSON:	PHONE NUMBER					
ARCHITECT/ENGINEER		Email	:			
NAME:						
ADDRESS:						
CITY:			ZIP CODE:			
CONTACT PERSON:		PHONE NUMBER:				
REGISTRATION NUMBER:		Email	<u>:</u>			
CLASS OF WORK (CHECK ONE ONLY) NEW ADDITION ALTERATION/REMODEL MAINTENANCE/REPAIR/REPLACE						
TYPE OF STRUCTURE-CHECK ONE ONLY						
OFFICES, BANKS, PROFESSIONA STORES, RESTAURANTS, WARE HOTELS, MOTELS PARKING GARAGE OTHER NON HOUSEKEEPING SI INDUSTRIAL BUILDINGS PUBLIC WORKS/UTILITIES BUILDINGS	HOUSE HELTER	CHURCHES/RELIGIOUS BUILDINGS HOSPITAL AND INSTITUTIONAL BUILDINGS SERVICE STATIONS/REPAIR GARAGE RECREATIONAL, AMUSEMENT OTHER NON-RESIDENTIAL FENCES, SIGNS, ANTENNAS OTHER NON-BUILDING STRUCTURES				

PLEASE COMPLETE OTHER SIDE

TYPE OF SY	STEM	NEW BUILDING INS	TALLATION	
(СНЕСК ТҮРЕ О	F SYSTEM)	\Box YES \Box N	ON	
SPRINKLER SY	STEM			
FIRE EXTINGUISHE	NG SYSTEM □	EXISTING BUI	ILDING	
			NO	
FLAMMABLE/COMBUSTIB		NEW SYST		
TANK		\Box YES \Box 1		
FLAMMABLE/COMBUSTIBL	E LIQUID DISPENSING	EXISTING/ALTE	ERATION	
SYSTEM	i o	\Box YES \Box I	NO	
FIRE ALARM S	YSTEM			
TENT/CANO	PY □			
HOT WORK PI	CRMIT			
OTHER				
DESCRIPTION OF WORK				
TYPE AND NAME OF				
SYSTEM:				
				
CODES; THAT I UNDERSTAND TO START WITHOUT A PER THE CASE OF ALL WORK WHICH NOTE: AN ELECTRICAL PERM	MIT; THAT THE WORK WILL B H REQUIRES REVIEW AND API IT IS REQUIRED FOR ALL LII	BE IN ACCORDANCE WITH T PROVAL OF PLANS.	THE APPROVED PLAN I	
APPLICANT	'S SIGNATURE		DATE	
PROJECT FITLE	OFFICE USE O			
OFFICE VALUATION \$				
CONSTRUCTION TYPE	OCCUPANCY GROU	PTO7	TAL SF	
NUMBER OF UNITS	NUM	NUMBER OF STORIES		
CONDITIONS OF ISSUANCE:				
PERMIT APPLICATION APPRO	VED BY:(MAC Fin	re Marshal)	(DATE)	
	`	,	` '	
PERMIT PROCESSED				
BY:		DATE:		
PERMIT PROCESSED BY:		DATE:		