NORTH METRO FIRE RESCUE DISTRICT FIRE PREVENTION DIVISION

101 Spader Way Broomfield, CO 80020 (720) 887-8217 (720) 887-8336 (fax) www.northmetrofire.org



Steven Gosselin Division Chief

Project Name:			
•		0:1-10	
Project Address:		City/County:	
Applicant Company Name:		Phone:	
Address:		City, State:	Zip:
CO Division of Fire Prevention & Control Suppression System Contractor Certification #:			
Please attach business card	Applicant's contact or project manager: (i.e. to whom questions should be directed and the response letter should be sent)		
	Applicant contact's email address:		
Scope: Construction of Project	tion Plans Site / Utility Building / Tenant Finish	Fire System Plans for Permit New Tenant finish / Alteration	
Description of Froject.			
Contractor's Total Valuation (<u>required</u> for fire system permit applications): \$ I hereby state that the above is correct. I recognize that the approval of plans and specifications does not permit the violation of the building codes, fire codes, city ordinances, or state law. I consent to provide entry to inspectors during normal business hours and to request inspections as needed. I consent to pay the Fire District for final plan review and permit fees set forth in the amendments of the International Fire Code and any re-inspection fees that may be required.			
Print Name:	Sig	gnature:	Date:
Premise # Plan # File / Upright # Drawer #		FOR OFFICE USE ONLY	APPROVED DENIED HOLD date:] Reviewer / Date:
Date Entered into RMS			TREVIEWEL / Date.
Comments:			