



TOWN OF HOPE MILLS

5770 ROCKFISH ROAD, HOPE MILLS, NORTH CAROLINA 28348-1848

TELEPHONE (910) 426-4100

FAX (910) 429-3386

www.townofhopemills.com

APPLICATION FOR FIRE PROTECTION PERMIT

Project Information

STREET AND NUMBER	NAME OF SUBDIVISION	LOT NO	PARCEL NUMBER

Contractor: _____ Telephone Number: _____

Address: _____

NC State Contractors License Number: _____ Classification: _____ Limitation: _____

Property Owner: _____ Telephone Number: _____

Address: _____

Description of Proposed Work/Installation:

Fire Sprinkler Tap Connection	Size: _____
Fire Sprinkler Heads	Number Installed: _____
Private Fire Hydrants/Values	Number Installed: _____
Witness Fire Protection System Testing: _____	
Witness Fire Alarm System Testing: _____	
Hood Suppression System: _____	
Tent Permit: _____	
OTHER	Description: _____
***If applicable, system wired by: _____	

Permit Fee: _____

Permit # _____

I hereby certify that all information in this application is correct and all work will comply with the North Carolina State Building Code and all other applicable state and local laws, ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specifications for the projected permitted herein.

Signature of Applicant

Date