



TRAVERSE CITY FIRE DEPARTMENT
FIRE PREVENTION BUREAU
 500 WEST FRONT ST. TRAVERSE CITY, MI 49684
 PHONE: (231)922-4930 FAX: (231)922-4872

FIRE ALARM/DETECTION SYSTEM PERMIT APPLICATION

DATE: _____ PERMIT # _____ (FOR OFFICE USE ONLY)

APPLICANT NAME: _____ CONTACT: _____

APPLICANT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

APPLICANT PHONE NUMBERS: DAYTIME: _____

CELL: _____ EMAIL: _____

ELECTRICAL PERMIT#: _____

SPECIFIC BUILDING USE: _____

SITE ADDRESS: _____

CODE/STANDARD/YEAR USED FOR DESIGN: _____

PLAN REVIEW AND FEE SCHEDULE

| <u>EQUIPMENT</u> | <u>NUMBER</u> | <u>X</u> | <u>COST PER ITEM</u> | <u>=</u> | <u>FEE</u> |
|--|---------------|----------|----------------------|----------|------------|
| Alarm control panel | _____ | | \$100.00 | | _____ |
| Each remote annunciator | _____ | | \$ 20.00 | | _____ |
| Each booster power supply | _____ | | \$ 20.00 | | _____ |
| Each alarm/supervisory/auxillary device point connection | _____ | | \$ 6.00 | | _____ |
| Each notification device/speaker | _____ | | \$ 3.00 | | _____ |
| TOTAL PERMIT FEE | | | | | _____ |

Minimum permit fee \$100.00 for minor system modifications (at discretion of reviewer)

One (1) inspection included in permit fee
 Additional inspections charged at \$100.00 per hour, minimum one (1) hour charge.

APPLICANT SIGNATURE: _____