



NEW HANOVER COUNTY FIRE SERVICES

230 Government Center Dr. Suite 130
Wilmington, NC 28403
(910) 798-7420, Fax (910) 798-7052
e-mail: fireforms@nhcgov.com



Serving and Protecting Wilmington since 1897

CITY OF WILMINGTON FIRE AND LIFE SAFETY

230 Government Center Dr Suite 150
Wilmington, NC 28403
(910) 343-0696, Fax (910) 341-0097
e-mail: fls@wilmingtonnc.gov

Is your project located in the unincorporated area of New Hanover County ___ or in the Wilmington City limits ___?

SUPPRESSION SYSTEM PERMIT APPLICATION

Site Address: _____ Zip: _____

Business Name _____

System Contractor: _____ Phone: _____ Fax: _____

Contractor Address: _____ License #: _____

Type of Occupancy: _____

Type of Fire Suppression System: ___ FM 200 ___ Wet Chemical ___ Dry Chemical

Type of Work: ___ New Construction ___ Alteration ___ Addition

Number of Nozzles: _____ Nozzle Types: _____

Number of Tanks: _____ Size of Tanks: _____

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 and function of detection devices, operating devices, auxiliary equipment and electrical circuitry if used.
- Flow rate per nozzle(s).

The undersigned hereby makes application for a permit and the inspection of all work described above and hereby agrees to comply with all building regulations and other laws applicable to the use and type of construction of the building referred herein.

Signature _____ Date _____

If applying for a City permit, you will be invoiced for any charges.
If applying for a County permit, please fill out the following.

Method of Payment: CASH CHECK CREDIT CARD CHARGE ACCOUNT # _____

FOR OFFICE USE BELOW THIS LINE

Approved by:	Date:	Fee:	Permit #
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Plans Submitted (2 sets) Y or N Date Received: _____