



PROVIDE ONE COMPLETE SET OF PLANS ELECTRONICALLY TO:
JONI.MAY@HUDSONOAKS.COM

THE CITY OF HUDSON OAKS HAS ADOPTED THE 2015 INTERNATIONAL FIRE CODE

Fire Alarm / Fire Sprinkler Application

Permit Number: _____	Zoning District: _____
Name of Business: _____	Square Foot: _____
Project Address: _____	Building Type _____
	Occupancy _____
Type of Permit:	FIRE ALARM <input type="checkbox"/> FIRE SPRINKLER <input type="checkbox"/>

CONTRACTOR MUST BE REGISTERED WITH THE CITY

Fire Alarm Contractor Company	Contact Person	Phone Number	Email Address
Fire Sprinkler Contractor Company	Contact Person	Phone Number	Email address

It shall be unlawful to use or occupy or permit the use or occupancy of any building or premises created, erected, changed, converted or altered or enlarged in its use or structure until a Certificate of Occupancy shall have been issued by the administrative official. A permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All permits require final inspection.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant: _____

Date: _____

OFFICE USE ONLY:

Approved by: _____	Date Approved: _____
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Fire Alarm Plan Review Fee: _____
Fire Alarm Inspection Fee: _____
Fire Sprinkler Plan Review Fee: _____
Fire Sprinkler Inspection Fee: _____

Total Permit Fee: _____
Issued Date: _____
Issued By: _____
BV Project # _____