



CITY OF CONCORD, NEW HAMPSHIRE
Community Development Department



FIRE PREVENTION PERMIT APPLICATION

_____ Permit # _____
Date Building Permit # Project #

_____ Project Address Job Site Telephone #

_____ Owner Name Owner Address (include City or Town / State / Zip)

_____ Contractor Name Contractor Address (include City or Town / State / Zip)

Contractor Phone: Office _____ Cell _____

E-Mail _____

	Quantity	Fee
Sprinkler System _____		
Sprinkler System Modification _____		
Extinguishing System (specify type) _____		
Suppression System - gasoline pumps - self serve _____		
Commercial Cooking Vent/Hood _____		
Cooking Suppression System _____		
Fire Alarm System _____		
Fire Alarm Modification _____		
Fire Pump Installation _____		
Other _____		

Application Fee **\$ 30.00**

NOTE: 2 sets of plans required for review.

TOTAL \$ _____

FOR FIRE PREVENTION OFFICE USE ONLY

Paid by: Cash _____
Check# _____
Credit (Auth.#) _____

~CONTRACTOR MUST BE PRESENT FOR INSPECTION~

Applicant certifies that all information given is correct and true and that all work performed will comply with all applicable City of Concord and State of New Hampshire Codes. **Please contact the Fire Prevention Office at 225-8651 to schedule an inspection no less than 72 hours prior to the date and time your project will be ready to inspect.**

Allow 7 to 10 days for response and/or issuance of permit

_____ Applicant Name (Print)

_____ Applicant Signature