

BOROUGH OF SWISSVALE

FIRE ALARM PERMIT APPLICATION

SITE ADDRESS: _____

BUILDING TYPE: RESIDENTIAL COMMERCIAL MIXED USE NUMBER OF STORIES: _____

PROJECT DESCRIPTION:

NEW INSTALLATION RETROFIT/UPGRADE ALTERATION/ADDITIONS TO SYSTEM

GROSS FOOTAGE AREA (GFA): _____ ESTIMATED CONSTRUCTION COST: \$ _____

ESTIMATED START DATE: _____ ESTIMATED COMPLETION DATE: _____

APPLICANT OR AUTHORIZED AGENT:

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

PHONE: _____ CELL: _____ FAX: _____

E-MAIL _____

PROPERTY OWNER: SAME AS APPLICANT

OWNER NAME: _____

OWNER ADDRESS: _____

PHONE: _____ CELL: _____ FAX: _____

E-MAIL _____

INSTALLING CONTRACTOR:

CONTRACTOR NAME: _____

CONTRACTOR ADDRESS: _____

PHONE: _____ CELL: _____ FAX: _____

CONTACT NAME: _____ E-MAIL: _____

PA HOME IMPROVEMENT CONTRACTOR REGISTRATION NUMBER: _____

MONITORING ENTITY: _____ PHONE: _____

DESIGN PROFESSIONAL (ARCHITECT or ENGINEER if applicable):

NAME: _____

ADDRESS: _____

PHONE: _____ CELL: _____ FAX: _____

E-MAIL: _____ PA LICENSE NUMBER: _____

ADDRESS:	DATE APPROVED:	PERMIT NUMBER:	PLAN NUMBER:
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DETAILS OF WORK TO BE PERFORMED:

(ADD ADDITIONAL PAPER AS NECESSARY TO COMPLETE DETAILS)

SYSTEM INFORMATION:

SYSTEM MANUFACTURER: _____ CONTROL MODEL #: _____
 ADDRESSABLE SYSTEM CONVENTIONAL ZONED SYSTEM NUMBER OF ZONES USED: _____
 (*Attach diagram or drawings indicating device locations and proposed zone list to application)

NUMBER OF DEVICES:

CONTROL PANEL: _____ MANUAL PULL STATIONS: _____ NOTIFICATION DEVICES: _____
 ANNUNCIATORS: _____ SMOKE DETECTORS: _____ INTERFACE DEVICES: _____
 AUX. POWER SUPPLIES: _____ HEAT DETECTORS: _____ MONITOR DEVICES: _____

TOTAL DEVICES: _____

By signing below, I certify that I am the property owner, authorized agent thereof or the installing contractor and all information contained herein and/or furnished by me along with this application is true and correct to the best of my knowledge. Furthermore, I acknowledge:

- This system shall be installed in accordance with the approved drawings and/or specifications presented and approved.
- Any changes to the project from the submitted plans or documents must be approved by the Building Code Official.
- This system shall be installed in compliance with NFPA Chapter 72 and NFPA Chapter 70 (NEC).
- The owner or applicant agrees to provide any additional information as may be required by the Building Code Official.
- The Borough of Swissvale and its authorized representatives shall have the authority to enter areas covered by such permit at any reasonable hours to inspect and enforce applicable provisions of the codes and ordinances.
- Applicant shall provide and attach hereto a copy of the construction contract with the licensed contractor.
- Contractor shall provide proof of current general liability insurance.
- A Record of Completion shall be completed in accordance with NFPA 72. The system shall be tested and inspected in it's entirety upon completion of the installation and the Code Official shall be notified prior to said test.
- The system shall be maintained in accordance to NFPA 72 and is required to be tested and inspected annually.

PERMIT FEES- System Installation (up to 15 devices) \$50.00 Add \$25.00 for each additional 10 devices

Name of Applicant

Signature of Applicant

Date

***** OFFICE USE ONLY *****

DATE RECEIVED: _____ PLAN REVIEW REQUIRED? YES NO
 ALARM PERMIT: APPROVED DENIED ALARM PERMIT FEE: \$ _____
 DATE: _____ PLAN REVIEW FEE: \$ _____
 BY: _____ TOTAL PERMIT FEE: \$ _____
 PERMIT NUMBER: _____ UCC USE GROUP(s): _____
 REASON(S) FOR DENIAL _____

WORKERS' COMPENSATION ADDENDUM

(REQUIRED TO BE ATTACHED TO ALL BUILDING PERMIT APPLICATIONS)

SITE ADDRESS _____

PART I

The Applicant for the building permit, in compliance with Act 44 of 1993, hereby submits *(check one)*:

- Certificate of Insurance OR Certificate of Self-Insurance (must be attached)
- Affidavit of Exemption

PART II

Basis and Affidavit of Exemption

- Applicant is an Individual who owns the property.
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Worker's Compensation Act.
- All of the contractor/applicant's employees on the project are exempt-on religious grounds under Section 304.2 of the Workers' Compensations Act
- Other: Please explain: _____

My signature on behalf of or as the contractor/applicant for this building permit constitutes my verification that the statements contained herein are true and that I am subject to the penalties of 18 Pa. C.S.A. 4904 relating to un-sworn falsification to authorities.

Printed Name

Signature

Date