



City of Downey Fire Department

11111 Brookshire Avenue
Downey, California 90241 • (562) 904-7345

FIR-24-_____

TR # _____

City Use Only

FIRE PERMIT APPLICATION

Job Address*: _____ Job Business Name*: _____

Scope of Work*: _____

Contractor Information

Business Name*: _____

Name*: _____ Phone No.* _____ Lic. No.* _____

Address*: _____ Email*: _____

Architect/Engineer Information

Name: _____ Phone No. _____ Lic. No. _____

Address: _____ Email: _____

Property Owner Information

Name: _____ Phone No. _____

Address: _____ Email: _____

Applicant Information

Name*: _____ Phone No.* _____

Address*: _____ Email*: _____

*Required Field

PERMIT TYPE*:

<p align="center"><u>Fire Alarm System</u></p> <input type="checkbox"/> Installation Total # Devices _____ <input type="checkbox"/> Minor Fire Alarm Modification <input type="checkbox"/> Fire Pumps & Related Equipment <input type="checkbox"/> Standpipe Systems	<p align="center"><u>Fire Sprinkler System</u></p> <input type="checkbox"/> Installation Total # Heads _____ <input type="checkbox"/> Modification <input type="checkbox"/> Fire Pumps <input type="checkbox"/> Underground Piping <input type="checkbox"/> Standpipes <input type="checkbox"/> Private hydrants <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<p align="center"><u>Tanks</u></p> <input type="checkbox"/> Installation/Total # Tanks _____ <input type="checkbox"/> Flammable/Combustible Liquids <input type="checkbox"/> Removal/Total # Tanks _____ <input type="checkbox"/> Flammable/Combustible Liquids <input type="checkbox"/> LP-Gas <input type="checkbox"/> Compressed <input type="checkbox"/> Cryogenic <input type="checkbox"/> Tank Modification _____
<p align="center"><u>Special Events</u></p> <input type="checkbox"/> Carnivals/Fairs <input type="checkbox"/> Christmas Tree Lot <input type="checkbox"/> Pumpkin Patches <input type="checkbox"/> Tents <input type="checkbox"/> Fireworks Stands <input type="checkbox"/> Tents – Total #/Size _____	<p align="center"><u>Fixed Fire Extinguishing System</u></p> <input type="checkbox"/> Cooking Hood <input type="checkbox"/> Spray Booth <input type="checkbox"/> Other: _____	<p align="center"><u>Miscellaneous</u></p> <input type="checkbox"/> Fire Watch (From: _____ To: _____) <input type="checkbox"/> Fire Flow Test <input type="checkbox"/> Hot Work/Welding <input type="checkbox"/> High-Pile Storage <input type="checkbox"/> Other _____

By signing, I acknowledge plan reviews requiring more than 1-hour are subject to additional fees prior to permit issuance.

Signature: _____

Date: _____