FIRE PERMIT WORKSHEET
COMMUNITY DEVELOPMENT DEPARTMENT
1400 Highland Avenue, Manhattan Beach, CA 90266-4795
Telephone (310) 802-5500 FAX (310) 802-5501 TDD (310) 546-3501

Job Address: ○ Residential ○ Commercial

Property Owner: Phone:
Email:

Applicant: Phone:
Email:

Contractor: Phone:
Email:

CSLB License No: City License No:

Select a Project Type:
○ STAND ALONE ○ RELATED TO CONST. ○ REVISION ○ OTHER: ____________________

RESIDENTIAL
○ GARAGE ○ ENTIRE STRUCTURE ○ ACCESSORY STRUCTURE ○ OTHER: ____________________

# OF SPRINKLER HEADS: ____________________ VALUATION: ____________________

COMMERCIAL

SPRINKLERS
○ GARAGE ○ ENTIRE STRUCTURE ○ SUITE/FLOOR: ____________________

○ TRASH ENCLOSURE ○ OTHER: ____________________

# OF SPRINKLER HEADS: ____________________ VALUATION: ____________________

FIRE ALARM

AREA OF SQ. FT: ____________________ VALUATION: ____________________

FIRE EXTINGUISHER SYSTEM/OTHER

○ HOOD/SUPPRESSION SYSTEM ○ MEDICAL GAS SYSTEM ○ UNDERGROUND FIRE SERVICE LINE

○ UNDERGROUND STORAGE TANK ○ ABOVE GROUND STORAGE TANK ○ PRIVATE FIRE HYDRANT

○ OTHER: ____________________ VALUATION: ____________________

Applicant Acknowledgement Statement
I hereby acknowledge that I have read the application and state that the information I have provided is correct and agree to comply with all City Ordinances, State Regulations, and the provisions and conditions of any permit issued pursuant to this application. I understand that inspection and approval by the City Building Inspector is required. I also understand that the permit will expire if the building or work authorized is not commenced within 180 days from date of permit issuance or if work is suspended or abandoned any time after work is commenced for a period of 180 days.

Signature: ____________________ Date: ____________________

CITY USE ONLY

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UPDATED 4/30/19