



LANCASTER FIRE DEPARTMENT FIRE ALARM PERMIT APPLICATION



Residential Fee: \$25
Commercial Fee: \$100

OFFICE USE ONLY

Issue Date: _____ Permit No.: _____ Expiration Date: _____

Occupancy ID: _____ Processed By: _____

Original Data Change Renew Permit Suspension

Knox Boxes Are Required for All Commercial Buildings

Name of Business/Resident: _____

Physical Address of Alarm Site: _____

Phone Number at Alarm Site: _____ Secondary Phone No.: _____

Hours of Operation: _____

Alarm Type: Residential Commercial

Alarm is Activated By (Check all that Apply):

- Smoke Detector Beam Detector
- Heat Detector Ansul System
- Fire Sprinkler Manually Activated Pull
- Contact Points-Perimeter

Alarm Installation Information:

Company Name: _____

Phone No.: _____

Person/Business Responsible for Maintenance of Alarm System:

Name: _____

Phone No.: _____

Contact Persons: Must have access to premises and alarm, with a 30 minute response time to alarm site.

(Three people, minimum, are required for contact)

Contact Name	Primary Phone Number	Secondary Phone Number

I have read the completed application and know the same to be true and correct. I hereby agree that if a permit is issued, I will comply with all provisions of Lancaster Ordinances and State Laws. I understand that I will be responsible for payment of all fees and charges and any civil action which may arise from the operation of this alarm system.

Please notify the Fire Department immediately of any changes to this Fire Alarm Permit.

Payment shall be mailed to:

LANCASTER FIRE DEPARTMENT

100 CRAIG SHAW MEMORIAL PARKWAY, LANCASTER, TX 75134

PERMITS ARE VALID ONE (1) YEAR FROM ISSUE DATE AND MUST BE RENEWED TEN (10) DAYS BEFORE EXPIRATION.

Signature: _____ Date: _____