

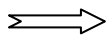


## Fire Marshal's Office Permit Application

**ALL Permit application(s) must be submitted to:**

The City of Iowa Colony  
Permit Department  
12003 Iowa Colony Blvd.  
Iowa Colony, TX 77583

**Permit Application#:** \_\_\_\_\_



*To avoid any delay in the permit processing, please fill out the application form completely prior to submittal.  
All required information must be included before application will be approved.*

**Please Type or Print:**

Name of Applicant: \_\_\_\_\_

Company Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

No.	Street Name	City	State	Zip
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Email: \_\_\_\_\_

Phone No.: (\_\_\_\_) \_\_\_\_\_ ext: \_\_\_\_\_ Fax : (\_\_\_\_) \_\_\_\_\_

Applicable State License or Registration No.:  
\_\_\_\_\_

Location of Operation, Process or Occupancy: \_\_\_\_\_

No.	Street	(Subdivision if applicable)
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Name of Business: \_\_\_\_\_

**Applicant expressly agrees and understands:**

- That any information, drawing, plan specification, concept detail, occupancy use or other information regarding the operation, material, equipment, product procedure, or processes and all testing agency certification will be submitted to the Fire Marshal upon his request prior to any approval being issued.
- That the applicant will comply with all Ordinances, Codes, State Laws, Standards and Regulations as may apply, pertaining to and governing such operation, procedure, installation or process.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

For additional information or assistance in completing this application, contact  
The Iowa Colony Fire Marshal's Office: (346) 395-4551

**Please check the appropriate permit type being requested on the reverse side of this form**  
**Where work is started prior to obtaining applicable permit... THE FEE SHALL BE DOUBLED!!**

OPERATIONAL PERMITS		FEE(S)
<input type="checkbox"/>	Foster Care Facility ( <i>Inspected ANNUALLY</i> )	125.00
<input type="checkbox"/>	Adult and Child Day Care Facility ( <i>Inspected ANNUALLY</i> )	150.00
<input type="checkbox"/>	Residential Care Facility ( <i>Inspected ANNUALLY</i> )	
<input type="checkbox"/>	<input type="checkbox"/> 3-5 licensed beds	100.00
<input type="checkbox"/>	<input type="checkbox"/> 6-16 licensed beds	150.00
<input type="checkbox"/>	<input type="checkbox"/> Over 16 licensed beds	200.00
<input type="checkbox"/>	Health Care Facility ( <i>Inspected ANNUALLY</i> )	
<input type="checkbox"/>	<input type="checkbox"/> 1-100 licensed beds	100.00
<input type="checkbox"/>	<input type="checkbox"/> 101-150 licensed beds	150.00
<input type="checkbox"/>	<input type="checkbox"/> over 150 licensed beds	200.00
<input type="checkbox"/>	Hazardous Material	125.00
<input type="checkbox"/>	Carnivals or Fairs ( <i>per event</i> )	250.00
<input type="checkbox"/>	High-Pile Storage ( <i>Inspected ANNUALLY</i> )	100.00
<input type="checkbox"/>	Pool Supply Retail Establishment ( <i>Inspected ANNUALLY</i> )	50.00
<input type="checkbox"/>	Carbon Dioxide Systems ( <i>Inspected ANNUALLY</i> )	75.00
<input type="checkbox"/>	Dry Cleaning Plant ( <i>Inspected ANNUALLY</i> )	75.00
<input type="checkbox"/>	Reserved	N/A
<input type="checkbox"/>	Temporary Storage Tanks ( <i>flammable/combustible liquids or compressed gas</i> ) *per tank (Number of: _____) ( <i>attach site plan</i> )	50.00
<input type="checkbox"/>	Hot-work operations (per site)	100.00
<input type="checkbox"/>	Flammable /Combustible Liquids	75.00
<input type="checkbox"/>	Compressed gas ( <i>annual - storage over 2000 cu feet</i> )	75.00
<input type="checkbox"/>	Rooftop heliports	500.00
<input type="checkbox"/>	Tire-rebuilding plants	500.00
<input type="checkbox"/>	Explosives / Fireworks / Pyrotechnic Special Effects Material	1,000.00
Aerial firework displays sponsored by the City of Iowa Colony shall be exempt from payment of the listed permit fees, but shall obtain a permit and have the required plan review and inspections.		
CONSTRUCTION PERMITS		
<input type="checkbox"/>	Permit Fee	150.00
<input type="checkbox"/>	Automatic Fire-Extinguishing System ( <b>Total Square Feet:</b> _____)	100.00
<input type="checkbox"/>	<input type="checkbox"/> First 10,000 Sq. Ft.	50.00
<input type="checkbox"/>	<input type="checkbox"/> Each additional 10,000 Sq. Ft.	25.00
<input type="checkbox"/>	<input type="checkbox"/> Remove, Add or Relocate 1-25 Sprinkler Heads	75.00
<input type="checkbox"/>	<input type="checkbox"/> Remove, Add or Relocate Over 25 Sprinkler Heads	100.00
<input type="checkbox"/>	Fixed fire extinguishing system	100.00
<input type="checkbox"/>	Battery Systems (liquid capacity over 50 gallons)	100.00
<input type="checkbox"/>	Compressed gases	100.00
<input type="checkbox"/>	Fire alarm and detection systems and related equipment (automatic, manual, and/or monitored)	100.00
<input type="checkbox"/>	Fire pumps and related equipment	100.00
<input type="checkbox"/>	Flammable and combustible liquids	150.00
<input type="checkbox"/>	Hazardous materials	50.00
<input type="checkbox"/>	Industrial ovens	100.00
<input type="checkbox"/>	LP-gas	25.00
<input type="checkbox"/>	Private fire hydrants (per hydrant installation)	150.00
<input type="checkbox"/>	Spraying or dipping	50.00
<input type="checkbox"/>	Standpipe systems (per 2 connections)	50.00
<input type="checkbox"/>	Smoke control systems	75.00
<input type="checkbox"/>	Underground private fire mains	50.00
<input type="checkbox"/>	Gates or barriers across roadways or private drives	50.00
Single family residential automatic fire sprinklers shall be exempt from payment of the listed permit fees, but shall obtain a permit and have the required plan review and inspections.		
Re-inspection Fees		
<input type="checkbox"/>	1 <sup>st</sup> Re-inspection	50.00
<input type="checkbox"/>	Subsequent Re-Inspections will increase	25.00
<b>Total Permit Fees:</b>		\$

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **FIRE PROTECTION SYSTEM PLAN REVIEW SUBMITTAL REQUIREMENTS**

This is not an inclusive list of Fire Code requirements:

Submit 1 sets of plans for all fire protection system reviews & one Digital in PDF format

### **Fire Underground**

1. Installer's state license
2. Fire sprinkler system 13 or 13R with remote fire department connection; provide location of fire department connection within 100 ft. of a fire hydrant.
3. Manufacture specifications and cut sheets for vault, fire department connection, valves, fire hydrants, and pipe.
4. Diagram that shows location of thrust blocks.
5. Specifications on thrust blocks construction and method of backfill.

### **Fire Sprinkler System 13, 13R, or 13D**

1. Installer's state license
2. Fire flow calculation from nearest fire hydrants
3. Hydraulic calculation for system
4. Manufacture specifications and cut sheets for valves, sprinkler heads, hangers, pipe and other devices (i.e. jockey pumps, air compressors) installed on system.
5. Location of inspector test and drains.

### **Fire Alarm System**

1. Installer's state license
2. Sequence of operation
3. Battery calculations
4. Manufacture specifications and cut sheets for all devices installed on system.
5. Location and number of HVAC smoke detectors tamper switches, and other supervised interconnects.
6. UL listing of monitoring station.

### **Fixed Fire Extinguishing Systems**

1. Installer's state license
2. Sequence of operation
3. Manufacture specifications and cut sheets for system, interconnects, and nozzles.
4. Location of manual activation devices