



SPRINKLER SYSTEM PERMIT APPLICATION

PHYSICAL ADDRESS: _____

SUBDIVISION: _____ BLK: _____ LOT: _____

DESCRIPTION OF WORK: _____

NUMBER OF SPRINKLER HEADS: _____

PERSON PERFORMING WORK: _____

ADDRESS: _____

TELEPHONE: _____

BUILDING CLASSIFICATION:

RESIDENTIAL COMMERCIAL

SIGNATURE: _____ DATE: _____

**MASTER LICENSE AND GENERAL LIABILITY INSURANCE
(100,000) ARE REQUIRED FOR
A SPRINKLER SYSTEM PERMIT.**



City of PEÑITAS

