

AMARILLO FIRE DEPARTMENT FIRE MARSHAL'S OFFICE

821 S. Johnson Amarillo TX 79101-1354

806-378-4238





Permit application(s) should be submitt The City of Amarillo Fire Marshal's Office 821 S. Johnson Amarillo, TX 79101	**
To avoid any delay in the permit processing required information must be included began	g, please fill out the application form completely prior to submittal. All ore the application will be approved.
Please type or print: Name of Applicant:	Position/Title:
Company Name:	
Type of Business:	
Street Address:No. Street Name	e City State Zip
Mailing Address:	
Phone: ()	_ ext: Fax: ()
Applicable State License or Registration	n Number:
License Type: T	exas License / Registration Number:
Location of Operation, Process or Occ	ipancy:
No. Street Name	City State Zip

Name of Business:

Project Information

Estimated Start Date of Construction / /	_ Square Footage:	_
Estimated Cost of Construction:	_	
□Plan Review for Construction Permit		
PLUS		
□Automatic Fire Extinguishing System	# of risers	# of heads
□Fire Alarm and Detection System	# of panels	# of devices
□Fire Pumps and Related Equipment	# of pumps	
□Private Fire Hydrants / Fire Main	# of hydrants	_
□Vent hood	# of hoods	
□Standpipe System		
□Underground		
□Clean Agent Suppression System		
□Paint Booth		
□Emergency Responder Radio Coverage Sys	tem (ERCES, BDA, DA	aS)
Total square footage coverage		
Is this a resubmittal? Yes□ No□		
specifications. The City of Amarillo Fire Prevensubmittal is acceptable.	ition Bureau will retain C	
	be bound to the City of ization is hereby given to pose of inspections of pd and am familiar with the company of the company o	Amarillo, Texas to see to it that all provisions to the City of Amarillo Fire Marshal's Office to proposed construction. I certify that under the information submitted in this and all
I,, acknown regarding the doubling of fees for any work to obtain the required permits prior to begin being doubled, and I accept responsibility for	ning construction or re	lated activities may result in the total fees
I certify that I will ensure all required permi	ts are obtained before o	commencing work to avoid any penalties.
Date://	Signature of Applicant	::
Printed Name:		

Revised 10/01/2024

***********OFFICIAL USE ONLY*******

Date Received:/_	/ Time: (Al	M/PM) By:		
Fee Amount: \$	Amount Paid: \$	Check # _	Receipt #	
Reviewed By:	Approved By: _		Permit Date://	
Permit Number				