



City of Anoka ~ 2015 First Avenue North ~ Anoka, MN 55303
Website: www.anokaminnesota.com Phone: 763-576-2720 Email: Comdev@ci.anoka.mn.us

2024 Fire Alarm and Fire Suppression Permit Application

Site address _____

The Applicant Is: The Owner and Occupant Contractor

Applicant contact name _____ Phone # _____

Property owner

Name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email address _____

Contractor:

Company name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email Address _____

Fire Protection License # _____ Expiration Date _____

Commercial Industrial Multi-Family Residential Townhouse

Fire Alarm Monitoring System Fire Suppression System

Estimated Value Of Job Including Labor & Materials \$ _____

- 20 heads or less (plan review & inspections done by City of Anoka Fire Department)
- More than 20 heads (plan review by State Fire Marshall, inspections done by City of Anoka Fire Department)
- Hoods - UL300 system

Project Description _____

1. Fire alarm systems shall be designed, installed and maintained in accordance with NFPA 72 and local codes.
2. All equipment shall be UL listed for central station monitoring or remote station monitoring.9
3. After acceptance testing has been completed and witnessed by the Fire Inspector the installing company shall provide the owner/occupant and Fire Inspector with a completed NFPA Certificate Compliance Form.

<p>See Valuation Table for Permit Fees: Fee Table</p> <p>Job Value X 0.0065 = Surcharge</p> <p>Visa, Master Card, Discover, Check or exact cash.</p> <p>*\$3.25 credit card fee for totals under \$1,000.00.</p> <p>*4% credit card fee for totals of \$1,000.00 or more.</p>	<p>OFFICE USE ONLY</p> <p>Permit Fee \$ _____</p> <p>Plan Review Fee \$ _____</p> <p>Surcharge Fee \$ _____</p> <p>Credit card fee *Note new fees* \$ _____</p> <p>Total Permit Fee \$ _____</p>
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How do you prefer to receive your permit? Will pick up USPS (if plans are large, please pick up)

Email Address _____

This permit becomes null and void if work authorized is not commenced within 180 days, or if construction work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinance governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulation construction or the performance of construction.

Applicant signature _____

Date _____ Print Name _____

Building Official/Fire Department Signature _____ Date _____