



Fire Sprinkler/Suppression/Alarm Contractor Registration

To register as a Fire Sprinkler/Suppression/Alarm contractor, please complete the following:
(PRINT OR TYPE INFORMATION REQUESTED. FORM MUST BE COMPLETE AND LEGIBLE TO BE PROCESSED)

Company Name: _____
Permanent Co. Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ - _____ Fax#: (____) _____ - _____
E-mail Address: _____

Owner's Name: _____
Permanent Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ - _____ Fax#: (____) _____ - _____
E-mail Address: _____

- Copy of each Sprinkler, Suppression or Alarm License #: _____
- Copy of the owner's valid government issued ID or drivers license that displays a photo and a permanent address.
- Received copy of Fire Code Amendments.
- Received map of Industrial Districts for which permits are required.

Number of years this company has been in business: _____

THE FOLLOWING PERSONS ARE AUTHORIZED AGENTS WHO MAY OBTAIN PERMITS IN THE NAME OF THE COMPANY:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Only the persons listed above may obtain permits.
A valid photo ID may be required for individuals applying for a permit.

The City of Odessa, Building Inspection Division must be notified immediately of any changes on this form.

Permits are required at any time the owner or his agent (the contractor) intends to erect, construct, enlarge, alter, repair, move, demolish, or change the occupancy of a building or structure or to erect, install, enlarge, alter, repair, remove, convert, or replace any electrical, gas, mechanical or plumbing system, the installation of which is regulated by the building codes for the City of Odessa. Any owner or contractor who shall cause such work to be done shall first make application to the Building Official and obtain the required permit. Violations of the codes and ordinances adopted by the City of Odessa may result in the issue of citations with fines and penalty up to the amount of \$2000.00 per day for each violation.

I certify the information above is true and correct. As a registered contractor, I am aware that I am responsible for the performance of all work performed by me, an employee of the company or by a sub-contractor I have employed. I am knowledgeable of the codes and ordinances for the City of Odessa and the State of Texas and will install all work in compliance with those codes, ordinances and laws. I understand the codes, ordinances and State Laws are updated and amended periodically and it is my responsibility to be aware of these changes and updates.

_____ Signature	_____ Date	_____ Registration Expires
_____ Legibly Print Name		_____ Processed By

REGISTRATION IS VALID FOR 2 YEARS
Fire Sprinkler/Suppression/Alarm Contractor Registration 10/10





FIRE SPRINKLER/SUPPRESSION/ALARM PERMIT APPLICATION (CONTRACTOR ONLY)

PERMIT NUMBER: _____ - _____ Must use Permit Number to request inspection.

PERMITS ARE REQUIRED TO BE ISSUED PRIOR TO START OF WORK. FOR CITY TO PROCESS, APPLICATION MUST BE COMPLETE-DO NOT ABBREVIATE-ONLY ONE ADDRESS PER PERMIT

- A. [] Fire Sprinkler Permit Application*
B. [] Fire Alarm Permit Application*
C. [] Fire Suppression Equipment in Vent Hood or other Enclosure Application

*Submit three complete sets of detailed, scaled drawings and submittals with each application. Accurate measurements and square footage of all areas must be on floor plans, drawings and specs.

[] New, Addition or Replacement Installation [] Alteration or Repair of Existing System

Construction Value: \$_____

Please submit the application with all the information below. An application with incomplete information or that is illegible cannot be processed for a permit. Permits issued with inaccurate information will be voided.

PROJECT INFORMATION

Address: _____
Name of Business: _____ Type of Business: _____
Owner's Name: _____
Address of Owner: _____ City: _____ Zip: _____ Phone: _____

CONTRACTOR INFORMATION

Business Name: _____ Phone: _____
Address: _____ City: _____ Zip: _____ Fax: _____
Fire Alarm License # _____ Fire Suppression License # _____

For permit on item A or B: Total Square footage of the area of the installation (Must be accurate) _____ Sq. Ft.

NOTE: DO NOT REQUEST AN INSPECTION WITH THE SUBMITTAL OF THIS FORM. THIS FORM IS FOR THE PROCESSING OF PAYMENTS ONLY. WORK STARTED PRIOR TO THE ISSUE OF A PERMIT IS SUBJECT TO PENALTIES AND CITATIONS AS PER THE ORDINANCES FOR THE CITY OF ODESSA.

I acknowledge the information submitted on this permit application is true and correct. I agree to comply with the requirements of the codes and ordinances adopted by the City of Odessa, the laws of the State of Texas and will obtain all required inspections. I understand this application is not a permit until the processing has been completed by the city and returned to the applicant with the permit number attached.

Signature: _____ Date: _____

Print Name Legibly: _____

Plan Picked Up By: _____

Print Name Legibly: _____

CITY CONFIRMATION OF ISSUE OF PERMIT

APPROVED BY: _____ FEE: _____

ISSUED BY: _____ DATE: _____

