

Deerfield-Bannockburn Fire Protection District Bureau of Fire Prevention 500 Waukegan Road Deerfield, IL 60015

Phone:(847)945-4088 Fax: (847)945-8951 Email: info@dbfd.org

PERMIT APPLICATION FOR AUTOMATIC FIRE ALARM SYSTEMS

Required Fee: Fees will be determined by the scope of work. A third-party plan review is required at the applicant's expense. Additional fees may be incurred for additional field inspections.

Application is hereby made for a Permit for installation and testing of an AUTOMATIC FIRE ALARM SYSTEM in or on the premises known as:			
Building Name:			
Tenant Name:			
Business Address:		Suite #:	
City:	State:	Zip:	
COMPLETE ALL APPLICABLE SECTIONS AND SIGN			
Name of Installing Company			
Business Address:			
City:	State:	Zip:	
Business Phone: ()	Contact Name:		
E-mail:	_		
FIRE ALARM SYSTEM COMPONENTS			
FIRE ALARM	SYSTEM COMPONENTS	3	
FIRE ALARM Control Panel Model:		6 Yes □ No	
		Yes □ No	
Control Panel Model:	Annunciator Panel	Yes □ No	
Control Panel Model: Zoned System:	Annunciator Panel	Yes □ No Yes □ No ns:	
Control Panel Model: Zoned System:	Annunciator Panel	Yes □ No Yes □ No ns:	
Control Panel Model: Zoned System: Yes No Number of Audio/Visual Devices: Number of Smoke Detectors:	Annunciator Panel	Yes	
Control Panel Model: Yes	Annunciator Panel	Yes	
Control Panel Model: Zoned System: Yes No Number of Audio/Visual Devices: Number of Smoke Detectors: Number of H.V.A.C. Duct Detectors: Seconds Number of Door Releases: Fixed Sup	Annunciator Panel	Yes	

Applicant's Signature

	1 – 10 Devices					
	11 – 20 Devices					
	21 – 50 Devices					
	51 – 75 Devices					
	76 -100 Devices					
PERMIT INFORMATION:						
•	All new fire alarm systems shall inc Chapter 7.	clude ALL required documentation listed in NFPA 72				
•	Initial permit application will cover	two (2) field inspections.				
•	Additional inspections may incur additional fees.					
•	A third-party plan review is required at the applicant's expense.					
•	 Items be submitted to the DBFD Bureau of Fire Prevention. This signed and completed application 					
 Items that must be submitted directly Fire Safety Consultants, INC: 4 sets of plans Voltage drop calculations (when required) Material cut sheets Payment for plan review 						
•	All permits shall expire 180 days fr	om the date of issue.				
Date I	Received:	Date Reviewed:				
Plan Review Fees Paid:		Date Paid: Date Rejected: Title:				
				S/I	S NOT APPROVED	Permit #:

FIRE ALARM DEVICES: