

FIRE CODE PERMIT APPLICATION "A"



This form is to be completed by the Fire Inspector at time of inspection. Applicant shall sign and submit one copy of this form with payment within fourteen days following inspection. Permit will be processed and delivered when occupancy is in compliance with permit requirements.

Fire Department Occupancy # Inspec		ion Date:		
Business Name:				
Business Address:		Suite # Zip C	Suite # Zip Code:	
Applicant:				
Business phone: Fax:		E-mail:		
PERMIT TYPE			COST	
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
Re-inspection Fee	Re-inspection #	Fee \$25 for each re-inspection after #1		
Please return pink copy of this application with check. Record Occupancy number on Check. Pink copy will be returned marked paid with permit.		TOTAL COST OF PERMITS		
		CREDIT		
		PLEASE REMIT		
nspector's Signature:_				
	es responsibility for obtaining a			
•	are established in City Code 12-	49.1.		
Applicant's Signature:_		Date:		

Fire Marshal's Office FCP 2408 Courthouse Drive Virginia Beach, Virginia 23456-9065