

Village Of Williamsville

Building Department
5565 Main Street
Williamsville NY, 14221



Phone: 716-632-7747
Fax: 716-626-4964
www.walkablewilliamsville.com

Fire Protection Equipment Permit Application

Job Address: _____

Owner Information

Owner Name: _____

Owner Address: _____

Phone Number: _____ Email Address: _____

Contractor Information

Business Name: _____

Business Address: _____

Contact Person: _____

Phone Number: _____ Email Address: _____

Estimated Value of Work: \$ _____ Date of Installation: _____

Description of proposed work: _____

New Equipment Fees:		Alteration or Replacement Fees:	
<u>Automatic Fire Extinguishing System</u>		<u>Automatic Fire Extinguishing System</u>	
<input type="checkbox"/> 1 to 24 units or single restaurant hood	\$150.00	<input type="checkbox"/> 1 to 24 units or single restaurant hood	\$100.00
<input type="checkbox"/> More than 24 units or multiple restaurant hoods	\$300.00	<input type="checkbox"/> More than 24 units or multiple restaurant hoods	\$200.00
<input type="checkbox"/> Fire Pumps or Equipment not otherwise listed	\$150.00	<input type="checkbox"/> Fire Pumps or Equipment not otherwise listed	\$100.00
<input type="checkbox"/> Fire Alarm Systems	\$150.00	<input type="checkbox"/> Fire Alarm Minor Repair	\$30.00
<u>Fire & Smoke Detection Systems</u>		<u>Fire & Smoke Detection Systems</u>	
<input type="checkbox"/> 1 to 24 units	\$150.00	<input type="checkbox"/> 1 to 24 units	\$100.00
<input type="checkbox"/> More than 24 units	\$300.00	<input type="checkbox"/> More than 24 units	\$200.00

Fire Permit Fee: \$ _____ Signature X _____

The Building Department reserves the right to reject any work which has been concealed or completed without first having been inspected and approved by the department in accordance with the requirements of the Village of Williamsville Code and the Uniform Code. Reasonable, safe access must be provided to work areas.

Official Use Only:

Received By: _____ Fee: \$ _____ Date Paid: _____

Date Received: _____

Documents Received: Plans & Specs Proof of Insurance

Fire Inspector Approval: _____ Date: _____