



# Forest Lake

AS GOOD AS IT SOUNDS

## Fire Protection Systems Permit Application

Type of System (Select One):

Fire Sprinkler

Fire Alarm

Fire Other

Project Address/Description or Property PIN					
Building Square Footage		Type/Use of Building		Valuation (labor and materials)	
<b>Owner Information</b>			<b>Contractor Information</b>		
Name			Company Name		
If business, Contact Name			Contact Name		
Address			Address		
City, State, Zip			City, State, Zip		
Phone			Phone		
Email			Email		
Other Information			License Number		Expiration
Preferred Contact Method: (Select One)		<b>Phone</b>	<b>Email</b>	Preferred Contact Method: (Select One)	
				<b>Phone</b>	<b>Email</b>
<b>Class of Work</b> (Select One)			<b>Add</b> (Addition to existing building)		
<b>New</b> (New building)			<b>Repair</b> (Modify existing materials)		
<b>Alter</b> (Modify existing building)			<b>Renew</b> (Renew Permit Application)		
<b>Sprinkler System Information</b>					
Type of System:			System Design Occupancy Classification (i.e. light hazard):		
<b>Describe Work Below:</b>					
<p>Notice: Separate permits are required for building, plumbing, HVAC, utility connections and electrical.</p> <p>This application shall be considered abandoned after 180 days unless permit is issued; Minnesota Rules 1300.0120, Subp 9.</p> <p>All provisions of laws and ordinances 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 state law or local law regulating construction or the performance of construction. Minnesota Rules 1300.0120, Subp 14</p> <p>Submission of this application hereby gives permission for any city official who had the responsibility to perform a duty related to this application to enter this property during a reasonable time for the purpose of determining the merits of your request; § 10.20 ENFORCEMENT, C.</p> <p>I hereby certify that I have read and examined this application and know the same to be true and correct.</p>					
				<b>Applicant</b> (Select One)	
Signature of Applicant			Date		<b>Owner</b>
					<b>Contractor</b>
Permit Number (office use)		Email: <a href="mailto:flinspections@ci.forest-lake.mn.us">flinspections@ci.forest-lake.mn.us</a>		Application Number (office use)	

### CITY OF FOREST LAKE

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# Designer List

Please identify all designers involved in this project.

Discipline	Name	Phone	Email	Preferred Contact	
Fire Protection				Phone	Email