

New Orleans Fire Department
317 Decatur St. N.O. LA



Fire Prevention Division
(504)658-4770 fax(504)565-7851

SIGNALING / SUPPRESSION PERMIT APPLICATION

(Permit fees not transferable or refundable.)

Work cannot start until permit is issued and posted.

Check all of the following that apply:

1. State Fire Marshal's system review letter enclosed.
2. State Fire Marshal's exemption letter enclosed.
3. Permit fee enclosed. (See attached fee schedule.)

Fee shall be a check or money order (no cash) – payable to the City of New Orleans.

MUST PRINT OR TYPE USING INK

Project Name: _____ Project Address: _____ Zip: _____

Building Square Footage (impacted area): _____ No. of Floors: _____ Occupancy Type: _____

Description of work to be done: _____

Contact Person: _____ Mailing Address: _____ City/State/Zip: _____ Phone #: _____

System Contractor: _____ Mailing Address: _____ City/State/Zip: _____ Phone #: _____

Architect: _____ Mailing Address: _____ City/State/Zip: _____ Phone #: _____

Engineer: _____ Mailing Address: _____ City/State/Zip: _____ Phone #: _____

(OFFICIAL USE ONLY)

PERMIT SECTION

Permit Approved: YES NO

Date: _____

SEAL

State Fire Marshal Project Number: PO _____

Issued By: _____ Badge #: _____

PERMIT

I hereby certify that I have read and examined this application and know the same to be true and correct and the work specified is authorized by the owner. All provisions of laws and ordinances governing this type of work must 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 or local law regulating construction or the performance of construction.

Signature: _____ Date: _____

(Note: If you desire for permit to be returned via mail, please provide a stamped, self-addressed envelope.)