FOR OFFICE USE ONLY			
PERMIT NO	ISSUE DATE	ISSUED BY	
PERMIT FEE \$	DENIED DATE	DENIED BY	

CHADDS FORD TOWNSHIP FIRE ALARM PERMIT APPLICATION

10 Ring Road, Chadds Ford, PA 19317 Phone: (610) 388-8800 Fax: (610) 388-5057 E-mail: <u>info@chaddsfordpa.gov</u>

Property Owner	Phone No	
Address	Fax No	
	_E-MAIL	
Property Location		
Parcel #	Zoning District	
Contractor		
Address	Phone No	
	Fax No	
PA License No	E-MAIL	
Architect /Engineer		
Address	Phone No	
	Fax No	
PA NO	_ E-MAIL	

Type of Improvement	Proposed Use	
□ New Building	□ Residential	
□ Alteration	1 & 2 Family Dwelling	
□ Addition	Garage	
Other (Specify below)	Commercial (Specify below)	

Description of work _____

Square footage of project _____

Cost of construction \$

Enter the number of devices below		
Alarm Devices – smoke, heat, pulls etc		
Signaling Devices – horn, strobe, bells etc		
Supervisory devices		
Other		
Other		
Other		

PLEASE ATTACH TWO COPIES OF THE FIRE ALARM PLANS

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent. I hereby attest to the information on this application to be accurate and true to the best of my ability. I agree to conform to all applicable laws of Chadds Ford Township and certify that the code official or code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable of such permit.

Signature ______Application Date _____

Fire Alarm Permit Fee and Plan Review Schedule - Residential and Commercial

For applicable fees please see our fee schedule at www.chaddsfordpa.gov