

FIRE DEPARTMENT
SUPPORT SERVICES DIVISION

225 KIMBARK STREET
LONGMONT, CO 80501-5912
303-651-8437 Fax 303-774-4682
www.ci.longmont.co.us



PERMIT APPLICATION

- TYPE OF PROJECT** New Construction Tenant Improvement Construction Building Addition
- TYPE OF PERMIT** Kitchen Hood Fire Alarm System Clean Agent System
 Standpipe System Fire Sprinkler System Spray Booth
 LPG Storage AST Installation UST Installation
 UST Removal High Piled Combustible Storage Fire Pump

Date _____ Type of Construction _____ Occupancy Classification _____

Project Name _____ Project Address _____
Sq. Ft. _____ Number of Stories _____

General Contractor Name _____
Mailing Address _____ City _____ State _____ Zip _____
Phone () _____ Fax () _____ Email Address _____
City of Longmont Contractor License Number _____

Fire Systems Contractor Name _____
Mailing Address _____ City _____ State _____ Zip _____
Phone () _____ Fax () _____ Email Address _____
City of Longmont Contractor License Number _____

Architect Name _____
Mailing Address _____ City _____ State _____ Zip _____
Phone () _____ Fax () _____ Email Address _____

Owner Name/Representative _____
Mailing Address _____ City _____ State _____ Zip _____
Phone () _____ Fax () _____ Email Address _____

Fire Department Use Only

Building Permit # _____
Fire Plan Log # _____
Date Reviewed _____
Reviewed By _____
Date Notified _____
Received By _____

Application Received

Comments:
