



# Fire Protection Permit Application

City of Rochester, New Hampshire  
DEPARTMENT OF BUILDING SAFETY  
31 Wakefield St. Rochester, NH  
Telephone: (603) 332-3508  
Fax: (603) 509-1912

Issue Date: \_\_\_\_\_  
Permit #: \_\_\_\_\_  
(This area for office use only)

Map # \_\_\_\_\_  
Lot # \_\_\_\_\_  
Block # \_\_\_\_\_  
Zoning \_\_\_\_\_

**Location (Street # & Street Name):** \_\_\_\_\_

**Owner:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Cell #:** \_\_\_\_\_ **Email**  
\_\_\_\_\_

**Preferred Contact Method:**     Telephone                       Cell                       Email

**Project Type:**     Residential [Number of Dwelling Units: \_\_\_\_\_]                       Commercial

**Sprinkler System:**     NFPA 13                       NFPA 13R                       NFPA 13D

**Alarm System:**   

**Commercial Hood:**     Type I                       Type II                       Suppression System

**ATTACHMENTS AND SUBMITTALS REQUIRED AT THE TIME OF APPLICATION:**

- Rochester Fire Department Installation/Plan Review Application with Payment.
- 2 Sets of plans & Calculations.

**Notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Instructions for Permit Applications

1. All information must be printed legibly.
2. Owner name, address and phone number.
3. Location and address of work site.
4. Plans & payment must be submitted at time of application.

**Notes:**

The property owner of record may exercise their right to perform their own work on their residence if he or she lives at the residence and the residence is a Single Family Dwelling occupied by the owner of record

It is the responsibility of all contractors, to obtain the necessary permits from the Department of Building Safety office at City Hall before ANY work has begun. Work must begin within six (6) months of the issuance of any permit.

Permits are non-transferable. If this is an "After the Fact" permit, it will be subject to a fee two times the normal permit fee.

It is the responsibility of the contractor to obtain all inspections required. A rough-in inspection is required before any work is covered, and a final inspection is required when all work is complete. This signed application constitutes consent on the applicant's part to allow for all inspections at the property location listed.

No permit will be issued until all of the above information is furnished, and all the above conditions met.

**INSPECTIONS REQUIRED:**

**Contact the Rochester Fire Department for Required Inspections and Scheduling.**

Department of Building Safety Approval would certify that the applicant could proceed with installation of the approved fire protection system(s) in accordance with specifications submitted. Any deviation from the specifications submitted will require an amendment to this permit or additional permits.

If you have any questions, feel free to contact the Building Safety Department at (603) 332-3508 or the Rochester Fire Department at (603) 335-7545

**Statement of Compliance:**

I have read and understand the statement and hereby agree to all of the terms stated therein. I agree to abide by any and all codes relating to my field of work, including all national, state and local codes. I also realize that any false statement made in the application for permit may be grounds for revocation of said permit.

**\*\*\* Plans will be forwarded to Rochester Fire Department for Approval\*\*\***

**Cost of Construction:** \_\_\_\_\_ **Permit Fee:** \_\_\_\_\_

**Paid:**  Cash \$ \_\_\_\_\_  Check # \_\_\_\_\_

Permit fee is based on \$9.00 per \$1,000.00 of Construction Cost (Rounded Up Nearest \$1,000.00) plus a \$10.00 application fee  
Minimum Permit Fee is \$20.00

\_\_\_\_\_  
Applicant Signature \_\_\_\_\_  
Date

~~~~~ (DO NOT WRITE IN THIS SPACE) ~~~~~

Approved By  
Building Safety Director: : \_\_\_\_\_ Date: \_\_\_\_\_