

PLANS EXAM - PERMIT APPLICATION

City of Lynden — Fire Department, Code Enforcement Division
Phone 360-354-4400 Fax 360-354-1452

EXAM/PERMIT # _____

P E R M I T I N F O R M A T I O N

Project Address: _____ Parcel Number _____

Legal Description of Property: Lot _____ Block _____ of _____

Business _____ Mailing Address _____ Phone _____

Owner _____ Mailing Address _____ Phone _____

General Contractor _____ Mailing Address _____ Phone _____

General Contractor License # _____ Expiration Date _____ City Business License # _____

Proposed use of building — describe work: _____

Square footage: Living area _____ (1st floor _____ 2nd floor _____) Garage _____ Porch/Patio/Deck ___/___/___

Square footage: Bonus room _____ Basement _____ Number of bedrooms _____ Number of bathroom/s _____

Class of Work: New Addition Alteration Repair Demolition Building relocation & site address _____

Owner's estimated construction cost \$ _____ **Permit construction value (for office use only): \$** _____

Systems		
#	Type of	
	Dry Auto Sprinkler	
	Wet Auto Sprinkler	
	LASS	
	Preaction Sprinkler System	
	Deluge	
	Combination	
	Antifreeze system	
	Standpipe Class I (2.5 x 1, 2.5 x 2)	
	Standpipe Class II (1.5 x 1, 1.5 x 2)	
	Standpipe Class III (1.5 and 2.5 combo)	
	Standpipe auto dry	
	Standpipe auto wet	
	Standpipe Manual dry	
	Standpipe Manual Wet	
	Standpipe Semiautomatic dry	
	SUB TOTAL	\$
	PERMIT	\$
	TOTAL FEE	\$

Systems Ground Devices		
#	Type of Equipment	
	Vault	
	Primary Isolator	
	Secondary Isolator	
	Double Check Valve Assembly	
	Single Check Valve Assembly	
	Flam I or II Tank (1,100 gallons up)	
	Fuel oil tank residential (removal/abandon)	
	Flam I or II Tank (1,100 gallon or less)	
	OTHER:	
	SUB TOTAL	\$
	PERMIT	\$
	TOTAL FEE	\$

Explosives and/or Hazardous Materials (Fees place in other)		
Fireworks Display []	Haz-Mat close []	Haz-Mat store []
Fireworks sales []	Haz-Mat Out-of/svc []	Haz-Mat transport []
Fireworks Eng Stby []		Haz-Mat handle []
Haz-Mat modify []		Haz-Mat repair []

Application expires if not issued within 180 days from date of application. An unexpired permit may be extended once, not exceeding 180 days, if requested in writing. When an explanation is required contact Fire Chief.

APPLICANT SIGNATURE: _____ **DATE:** _____

PERMIT FEES (For Office Use Only)		FEE
Building fire flow		
Auto Sprinkler plans exam + install		
Fire Suppression hood system plans exam + install		
Fire Alarm/detection system plans exam + install		
TOTAL		
Estimated Plan Check Fee (Non Refundable)		
Receipt #	Date Paid:	
BALANCE DUE		
Receipt #	Date Paid:	

NOTICE — Permit Applications must be submitted in person at the Lynden Fire Department, 215 4th Street. 354-4400