



PERMIT INFORMATION INTAKE SHEET
FIRE PREVENTION

Date: _____

Owner's Name: _____

Address: _____ Phone: _____

City, State, Zip: _____

Email Address: _____

Permit Applicant

Applicant's Name: _____

Address: _____ Phone: _____

City, State, Zip: _____

Email Address: _____

Well Water Connection
Municipal Water System

- School Air B&B Summer Camp
- Hotel Motel

Contractor License No.: _____ Class: _____

Business License No.: _____ Expiration Date: _____

Job Site Location or Description of Establishment TO BE INSPECTED

Assessor's Parcel Number (APN): _____

Description of Work

