

SECTION D. SPECIFY WATER SOURCE FOR FIRE PROTECTION SYSTEMS

	Alamo Heights Water System		San Antonio Water System
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SECTION E. APPLICANT INFORMATION

Company Name (Contractor or Architect)	<u>Address</u>	<u>License # (if applicable)</u>
	<u>Phone #</u>	<u>Alternate Phone #</u>
Responsible Party (Person making application)	<u>Address</u>	<u>Estimated Value of Building/Project</u>
	<u>Phone #</u>	<u>Alternate Phone #</u>
Person to Contact	<u>Address</u>	<u>Fax #</u>
	<u>Phone #</u>	<u>Alternate Phone #</u>

I have read the completed application and know the same to be true and correct and hereby agree that if a permit and/or approved plans are issued, all provisions of the applicable city Fire Code will be complied with herein whether specified or not. I understand that if I do not check an item, which applies to the above address shown, on page one of this application, I will be held responsible for additional fees and/or construction requirements as called for by the applicable City Fire Code.

I UNDERSTAND THAT AS THE APPLICANT, IT IS MY RESPONSIBILITY TO INFORM ALL PARTIES INVOLVED, INCLUDING THE DESIGN PROFESSIONALS, OF ANY CODE NON-COMPLIANCE NOTED ON THE PLANS. I ALSO UNDERSTAND THAT I MAY NOT PROCEED WITH THE WORK DESCRIBED ABOVE UNTIL I RECEIVE APPROVED PLANS AND A PERMIT FROM THE ALAMO HEIGHTS FIRE DEPARTMENT.

Signature of Responsible Party

Date

A completed application and the permit fee must be paid before plan review will be conducted. Any questions may be directed to:

ALAMO HEIGHTS FIRE MARSHALL
6116 BROADWAY
SAN ANTONIO, TX 78209
TEL. (210) 824-1281 FAX (210) 828-3006

Office use only

<i>Permit #</i>	<i>Fee amount</i>	<i>Date Received/Paid</i>	<i>Check/MO#</i>	<i>Receipt #</i>	<i>Account #</i>

<i>Reviewed by</i>	<i>Approved</i>	<i>Not Approved</i>	<i>Date</i>