

**ALAMO HEIGHTS FIRE DEPARTMENT
APPLICATION FOR HAZARDOUS OPERATION PERMIT**

SECTION A. SELECT TYPE OF PERMIT REQUESTED

1. Aerosol Products	12. HPM Facilities
2. Battery Systems	13. High Piled Storage
3. Cellulose Nitrate Films	14. Hot Work Operations
4. Combustible Dust-Producing Operations	15. Industrial Ovens
5. Combustible Fibers	16. Liquid or Gas Fueled Vehicles in Group A Occupancies
6. Compressed Gases	17. Magnesium
7. Cryogenic Fluids	18. Open Flames and Torches
8. Dry Cleaning Plants	19. Open Flames and Candles
9. Flammable and Combustible Liquids	20. Organic Coating
10. Fumigation and Thermal Insecticide Fogging	21. Motor Fuel Dispensing Facilities
11. Hazardous Materials	22. Spraying or Dipping

SECTION B. DESCRIPTION OF PROPERTY

Name of Business / Building	Address

Documentation regarding description of intended operation within occupancy and floor plan of occupancy showing intended installation details along with any manufacturers installation instructions must be attached to this application, accompanied by the permit fee as required by the fee schedule. Make check or money order payable to "City of Alamo Heights".

SECTION C. EXPLAIN THE USE OF THE BUILDING AND INTENDED OPERATIONS

SECTION D. MANUFACTURER'S INFORMATION (if applicable)

Company Name	Address	Phone
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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>