



City of Rockford, Illinois

Community & Economic Development Department
Construction and Development Services
425 East State Street, Rockford, IL 61104
Phone: (779) 348-7171 Fax: (815) 967-4243
Web: www.rockfordil.gov

FIRE PROTECTION PERMIT

- I understand it is required that any utilization of the existing fire alarm system, cooking suppression system, full building suppression, or other life safety devices must be explicitly shown on the drawing plans, and detailed within overall narrative information. In cases where alteration may occur or the installation of new safety systems are intended, each must be submitted separately as individual permits.

1. PROJECT & OWNER INFORMATION					
Project Address					Zip
Type of Property: <input type="checkbox"/> One Family <input type="checkbox"/> Townhouse/ Two Family <input type="checkbox"/> Commercial/ Industrial					
Project Name					
Owner's Name		Phone	Email		
Owner's Address		City		State	Zip
2. CONTRACTOR INFORMATION					
Company		Contact Person			
Address		City		State	Zip
Phone		FSC License # OR Private Alarm License			
3. DESCRIPTION OR WORK					
Type of Fire System	# of systems	Type of System	# of systems	System Information	
<input type="checkbox"/> Fire Alarm/ Detection		<input type="checkbox"/> Wet Sprinkler System		Number of Sprinkler Heads	#
<input type="checkbox"/> Emergency Evacuation		<input type="checkbox"/> Dry Sprinkler System		Number of Dry Heads	#
<input type="checkbox"/> Other Alarm System		<input type="checkbox"/> Standpipe		Total Number of Standpipes	#
<input type="checkbox"/> Wet Chemical System		<input type="checkbox"/> Fire Pump		Other Systems	
<input type="checkbox"/> Dry Chemical System		<input type="checkbox"/> Fire Dept. Connection		<input type="checkbox"/> Backflow/ RPZ	#
<input type="checkbox"/> Clean Agent System		<input type="checkbox"/> Private Hydrant		Total Square Feet of Work: _____	
Total Cost of Project \$ _____					
(Labor, Materials, Equipment, Overhead & Profit)					
Signature: X _____			Date: _____		

