



**CITY OF WACONIA
FIRE SUPPRESSION
APPLICATION PERMIT**

201 S. Vine Street
Waconia, MN 55387

Permit #

Site Address			
Owner			
Address			
Tenant			
Sprinkler Contractor			Contact Person Phone
Address	City	State	Zip
Type of work being done	<input type="checkbox"/> New <input type="checkbox"/> Alteration	<input type="checkbox"/> Addition <input type="checkbox"/> Repair/Replace	JOB VALUATION \$
Type of standard	<input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13D	<input type="checkbox"/> NFPA 13R	
Location in building			Notes:
Please check all that apply			
<input type="checkbox"/> Wet System	<input type="checkbox"/> Deluge System		
<input type="checkbox"/> Dry System	<input type="checkbox"/> Anti-Freeze System		
<input type="checkbox"/> Pre-action System	<input type="checkbox"/> Fire Pump		
<input type="checkbox"/> Stand Pipe	<input type="checkbox"/> Cooking Hood		
<input type="checkbox"/> Spray Booth/Hood	<input type="checkbox"/> Other ()		
Number of heads installed:	OFFICE USE ONLY		
Fees must be paid, plans approved and a permit issued prior to beginning any work.			
THE UNDERSIGNED STATES THE INFORMATION PROVIDED IS ACCURATE AND HERBY AGREES TO DO ALL WORK IN ACCORDANCE WITH THE CITY CODE AND THE MINNESOTA STATE LAWS REGULATING FIRE SUPPRESSION.		Occupancy Group	
		Type of Construction	
		Permit Fee	
		Plan Review Fee (65% of Permit Fee)	
		State Surcharge = value x .0005 or 50 cents, whichever is greater	
		TOTAL PERMIT FEE	
Signature	Date	Title	Date
Print Name			
This is to certify that the above application and accompanying documents are in accordance with the community Zoning Ordinance and may proceed as requested. This document when signed by authorized personnel constitutes a temporary Certificate of Zoning compliance and allows construction to commence. Before occupancy, a Certificate of Occupancy must be issued.			
Administrator/Clerk/Planner/Zoning Administrator	Date	Special Conditions	