



# Automatic Extinguishing Systems Permit Application



Guil-Rand Fire Department

Fire Marshal's Office

10506 S. Main St

Archdale, NC 27263

inspections@guil-randfire.com

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Check one: ☐ Designer ☐ Contractor ☐ Owner/Tenant

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

*The Contact Person will receive all the correspondence, notices and comments.*

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Type of fire protection system:

Check one: Commercial Cooking System (AES) ☐ Clean Agent System

☐ Dry Chemical System ☐ CO2 / Inert Gas

Description of Work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Work Area: \_\_\_\_\_ SF

Plan Review fees: *Invoice will be sent to the identified company above. See Fee Schedule for pricing.*

**Plan Reviews = \$100.00 Per System / Permit Inspection Fee= \$150.00 Per System**

Submittal requirements:

- ALL Automatic Extinguishing Systems(AES) require drawings and a current manufacturer's issued certification for the installer.

I hereby certify that all information in this application is correct. The Fire Marshal's Office will be notified of any changes in the approved plans and specifications for the system permitted herein.

\_\_\_\_\_  
Applicant Signature

**\*\* Plans will not be reviewed without a completed permit application \*\***