



FOR OFFICE USE ONLY	
Permit #(s)	_____
Date:	_____

MONROE FIRE DEPARTMENT
 163 Village Court • Monroe, WA 98272
 Phone: (360) 794-7666 • Fax: (360) 794-0959
www.monroefire.org

SUBMIT TO: CITY OF MONROE PERMIT DEPARTMENT
 806 West Main Street • Monroe, WA 98272
 Phone: (360) 794-7400 • Fax: (360) 794-4007
www.ci.monroe.wa.us

CONSTRUCTION PERMIT APPLICATION

Permit Submittal Hours Monday through Friday:

Building, Fire & Land Use permits: 9:00 am – 12:00 pm & 2:00 pm – 4:00 pm
Verify Current Fee Schedule with Permit Staff Before Submitting Application
http://www.monroefire.org/fire_marshall/forms/permit/fire_fee_schedule.pdf

NOTE: There are / are not local amendments to the fire code that affect this permit.
Local amendments may be found at http://www.monroefire.org/fire_marshall/index.cfm

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|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <input type="checkbox"/> Automatic Fire Extinguishing System (105.7.1) | <input type="checkbox"/> Industrial Ovens (105.7.8) |
| <input type="checkbox"/> Battery Systems (105.7.2) | <input type="checkbox"/> LP-Gas (105.7.9) |
| <input type="checkbox"/> Compressed Gases (105.7.3) | <input type="checkbox"/> Private Fire Hydrants (105.7.10) |
| <input checked="" type="checkbox"/> Fire Alarm & Detection Systems & Related Equipment (105.7.4) | <input type="checkbox"/> Spraying or Dipping (105.7.11) |
| <input type="checkbox"/> Fire Pumps & Related Equipment (105.7.5) | <input type="checkbox"/> Standpipe Systems (105.7.12) |
| <input type="checkbox"/> Flammable & Combustible Liquids (105.7.6) | <input type="checkbox"/> Temporary Membrane Structures Tents & Canopies (105.7.13) |
| <input type="checkbox"/> Hazardous Materials (105.7.7) | |

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS (SEE PAGE 3)

Site Address or Property Location: _____

Size of site (acre/square feet): _____

Assessor's Tax Parcel Number (14 digits): _____

Applicant: _____ Phone # (____) _____

*Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

Property Owner: _____ Phone # (____) _____

**Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

ATTACH A SEPARATE SHEET FOR ADDITIONAL PROPERTY OWNERS/ADDITIONAL ADDRESSES

*Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf. **Property Owner(s): By your signature above, you hereby certify that you have authorized the above Applicant to make application on your behalf for this application.

Contractor: _____ Phone # _____

Fax #: _____

Contractors License # _____ Exp Date _____

Mailing Address _____

Contractor's Bond Company: _____

Contractor's Bid Amount or Project Cost (labor and materials): \$ _____

Detailed description of proposal/work: _____

Lending Institution for project (if applicable): _____

Number of Devices:

Notification Appliances: _____

Manual Pull Station: _____

FACP: _____

Annunciator: _____

Smoke Detectors: _____

Heat Detectors: _____

Monitor Modules: _____

Other Detectors: _____

Total: _____

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Plan Check Fee: \$ _____

Permit Fee: \$ _____

Fire Plan Check Fee: \$ _____

State Fee: \$ _____

Other Fees: \$ _____

SEPA Fee: \$ _____

SUBMITTAL REQUIREMENTS

Fire Alarm & Detection System

CONSTRUCTION PERMIT – IFC 105.7.4

PART 1 – SCOPE

- 1a. Does project consist of Adding or Replacing a Fire Alarm Control Panel?
 - Yes – Continue to Part 3
 - No – Continue to 1b
- 1b. Is Project limited to the addition, replacement, or removal of less than 3 appliances or devices?
 - No – Continue to Part 3
 - Yes – Continue to Part 2

PART 2 – OVER-THE-COUNTER PERMIT

Your project qualifies for an over-the-counter permit if the project is the addition, replacement, or removal of less than 3 appliances or devices, none of which is an FACP. Please provide a floor plan of the installation location with this application showing the new or removed components, and place a note on the plans indicating: battery calculations are not adversely affected by this project, and will be field verified at the time of inspection. You will be issued an over-the-counter permit and may perform the work after permit issuance (and state Electrical Permit) provided that it is installed in accordance with the International Fire Code. Approval is subject to field inspection. Call for Inspection After Installation – See Part 4.

PART 3 – CONSTRUCTION DOCUMENTS

3a. REQUIRED SUBMITTAL ELEMENTS

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(These items are required in order to be considered a complete application)

- Two Copies of Floor Plan indicating the following:
 - The use of all rooms, with locations of all devices, appliances and power connection
 - Alarm control and trouble signaling equipment and annunciation
 - Battery calculations
 - Conductor type and sizes with voltage drop calculations
 - Manufacturer, model numbers, and listing information for equipment, devices, and materials along with cut sheets
 - Details of ceiling height and construction
 - The interface of fire safety control functions
 - Copy of the UL Certificate for Central Station to be utilized

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3b. JURISDICTION-SPECIFIC REQUIREMENTS

All projects within the City of Monroe must comply with the following requirements which differ from NFPA 72 and IFC requirements.

**Buildings protected with an automatic fire extinguishing system, shall have an outside BELL/STROBE provided in place of an outside HORN/STROBE.*

**Buildings constructed as “ spec” are done so at the risk of the building owner. Plans will not be approved unless the entire building is protected in accordance with audibility and visual coverage requirements of NFPA 72, regardless of future use of the building.*

**Radio and cell phone connections are acceptable means of communications.*

**All fire alarm systems must report to either a proprietary (protected-premises) or a certificated Central Station.*

**Buildings over 20,000sf must be protected by an addressable system.*

PART 4 – INSPECTION REQUESTS

Final approval is subject to field inspection. Following permit issuance, you may install your project. Once your project is complete in accordance with your approved plans, please call for inspection. Your permit files are not closed until the work has been approved by an inspector.

FIRE INSPECTION REQUEST LINE

360.805.0338

Every effort will be made to accommodate same-day inspection requests made before 8am.

Fire Inspections are performed Monday through Friday, 8am until 3pm.

Provide the following information when requesting an inspection:

1. Site Address
2. Type of Inspection Requested: Construction Permit
3. Permit Number
4. Date and Time of Requested Inspection
5. Your Name
6. Callback Phone Number