Fairview Caseyville Township Fire Protection District
214 Ashland Avenue
Fairview Heights, IL 62208
618-233-2121

Sprinkler Permit Application

Date of application:____/____/____

Contractor Name:_____

Address:_____

City State:_____

Phone:_____-_____-_____ Fax:_____/_____/_____

The above listed application herby makes application for:

_____

_____

_____

Cost of sprinkler installation $_____

X $2.00 per $1000.00 of installation price

+

$ 50.00 minimum sprinkler fee $ 50.00

Total $

The minimum Sprinkler fee covers plan review, inspection during installation, 1) Hydrostatic test and 1) alarm trip test. If a return trip is required for the test listed above an additional $ 25.00 fee will be required to be paid for each additional trip. This additional fee must be paid prior to Certificate of Occupancy Certificate being issued.

I have read the above and understand the fees and terms. The installation of this sprinkler system shall meet or exceed the latest NFPA standards

_____ _____
Applicant signature date

Illinois License # _____ Check # _____