

# Application For Fire Protection Permit

(OFFICE USE ONLY)

## THE CITY OF KEY WEST

604 Simonton St. Key West Fl. 33040  
 Phone: 305-809-3956 Fax: 305-809-3978

**Note: All owner builders must apply In person and be present at time of all Inspections**

At Time of submittal a \$25 application fee is due.

Street Address of proposed construction: \_\_\_\_\_

Property owners name as appears on deed: \_\_\_\_\_ Phone #: \_\_\_\_\_

Property owner's mailing address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contractors name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contractor's address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Detailed Description of Work:

FEE SCHEDULE				
DESCRIPTION	QTY	UNIT PRICE	EXTENDED PRICE	
Underground Pipping		\$30.00		
Water Connection		\$9.00		
Total # of Heads		\$ 0.50		
Ansul System		12.00/1000		
Alarm System		12.00/1000		
Please Circle One Of The Following:				
Fire Alarm System				
Sprinkler System				
<b>Estimated Cost of Work</b>		<b>\$</b> _____	<b>MINIMUM FEE \$30.00</b>	
<b>TOTAL</b>		<b>\$</b>		

**HARC** \_\_\_\_\_

Warning to owner: Your failure to record a notice of commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your notice of commencement.

I as owner or contractor of record for this project agree that I will comply with the provisions of Florida Statute 469.003 and to notify the Department of Environmental Protection of my intent to demolish/renovate a structure and remove asbestos, when applicable, in accordance with state and federal law.

I hear by certify that I have read and examined this application and know that same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with, whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any local, state or federal laws regulating construction or the performance of construction.

"Notice: In addition to the requirements of this permit, there may be DEED RESTRICTIONS and/or additional restrictions applicable to this property that may be found in the public records of this county and there may be additional permits required from other government entities such as water management districts, state agencies or federal agencies."

Chapter 837.06 F.S. False Official Statements- Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree punishable as provided for in s. 775.082 or s. 775.083

I have obtained all necessary approvals from Associations, Government Agencies, H.A.R.C. and other parties as applicable, in order to complete the above described work. Owner Printed Name: _____  Owners Signature: _____  State of Florida County of Monroe Sworn to and scribed before me this _____ day of _____, 20____  by:  (seal)  Personally known _____ or Produced identification _____	I have obtained all necessary approvals from Associations, Government Agencies, H.A.R.C. and other parties as applicable, in order to complete the above described work. Qualifiers Printed Name: _____  Qualifiers Signature: _____  State of Florida County of Monroe Sworn to and scribed before me this _____ day of _____, 20____  by:  (seal)  Personally known _____ or Produced identification _____ (office use only)
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\_\_\_\_\_  
 Building Official, Assistant Building Official  
 or Plan Reviewer  
 Reviewed for issuance of permit  
 Cost of Permit: \$ \_\_\_\_\_