



Office Use Only
Permit #:
FIMS #:

# FIRE SYSTEM PERMIT APPLICATION

## BUILDING & SAFETY DIVISION

City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301- 3513  
 (503) 588-6256 • Fax (503) 588-6115

Applications may be obtained online at:

<http://www.cityofsalem.net/bas>

**1. Job Site Information & Location (where the work is taking place)**

Project Name: \_\_\_\_\_  
 Job Site Address: \_\_\_\_\_  
 Suite Number: \_\_\_\_\_ Lot Number: \_\_\_\_\_

**2. Property Owner:** \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_

**3. Contact Person (receive permit correspondence)  Applicant**

Name of Person: \_\_\_\_\_  
 Full Mailing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**4. Architect/Engineer:** \_\_\_\_\_

Company Name: \_\_\_\_\_  
 Full Mailing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**5. System Design Professional:** \_\_\_\_\_

Company Name: \_\_\_\_\_  
 Full Mailing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**6. Contractor Information  Applicant (person/co performing the work)**

Name of Contractor: \_\_\_\_\_  
 Full Mailing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 OR CCB # (reqd): \_\_\_\_\_ Active

**7. Job Description:** \_\_\_\_\_

CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential (Stand Alone Systems Only)
TYPE OF WORK	
<input type="checkbox"/> Addition	<input type="checkbox"/> New
<input type="checkbox"/> Alteration	<input type="checkbox"/> Repair
REQUIRED DATA	
Permit fees are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and the profit for the work indicated on this application.	
Valuation: _____	
NOTICE	
<b>WHAT TO SUBMIT:</b> This form must be completed and accompany <b>three</b> sets of plans (drawn to scale).	
<b>ASSOCIATED PERMITS:</b> All commercial building permits that will require associated plumbing, mechanical, electrical, permits are applied for <b>separately</b> . Please submit these applications earlier in the process to avoid unnecessary delays.	

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Total Valuation	Permit Fee	Each Add'l	Total
\$1 to \$2,000	\$65.00 Minimum	-	\$65.00
\$2,001 to \$25,000	\$65.00 for the first \$2000	-	\$65.00
	plus \$6.00 for each additional \$1,000, or fraction thereof, to and including \$25,000.		x \$6.00
\$25,001 to \$50,000	\$203.00 for the first \$25,000	-	\$203.00
	plus \$4.50 for each additional \$1,000, or fraction thereof, to and including \$50,000.		x \$4.50
\$50,001 to \$100,000	\$315.50 for the first \$50,000	-	\$315.50
	plus \$3.00 for each additional \$1000, or fraction thereof, to and including \$100,000.		x \$3.00
\$100,001 & greater	\$465.50 for the first \$100,000	-	\$465.50
	plus \$2.75 for each additional \$1,000, or fraction thereof		x \$2.75
			<b>SUBTOTAL</b>
<b>Review Fees paid at INTAKE:</b>			
Fire Dept Review (\$38.82 minimum or 40% of the Subtotal above, whichever is greater)			
Automation Fee			\$5.00
<b>Permit Fees paid at ISSUANCE:</b>			
Subtotal (figured from table above)			
Investigation fee - Working without permits (Subtotal above repeated)			
State Surcharge (12% of the Subtotal above)			
Archive & Photocopy Fees (This amount will be determined by the Fire Marshall)			
Automation Fee			\$5.00

