

## Fire Protection Application For Yard Hydrants and Under Ground Fire Service Mains



Fire Prevention Bureau • 1645 Superior Ave., E • 216.664.6664 • F: 216.664.6681 Hours of Operation: Weekdays 7:30 am to 4:30 pm

All approved permits are subject to revocation for cause at any time.

The issuance of a fire permit by the Fire Prevention Bureau does not exempt the applicant from any required review and approval by the Department of Building and Housing.

|  | , , , , , , , , |                |                      | NUMBER OF STREET                     |                                    |     |  |
|--|-----------------|----------------|----------------------|--------------------------------------|------------------------------------|-----|--|
| This section: City of Cleveland Use Only     |                 |                |                      | DATE APPROVED                        |                                    | FEE |  |
| BUILDING PERM                                | MIT NUMB        | ER             |                      |                                      |                                    |     |  |
| B-   |                 |                |                      |                                      |                                    |     |  |
| FACILITY / PRO                               | JECT INFO       | ORMATI         | ON                   |                                      |                                    |     |  |
| NAME OF FACILITY / PROJECT                   |                 |                | OCCUPANCY            | FACILITY STREET                      | T ADDRESS                          |     |  |
| CITY<br>Cleveland                            | STATE<br>OH     | FACILITY       | ZIP                  | FACILITY TELEPH                      | HONE NUMBER                        | ER  |  |
| FACILITY EMERGENCY CONTACT NAME AND POSITION |                 |                |                      |                                      | EMERGENCY CONTACT TELEPHONE NUMBER |     |  |
| SECTION OR UNDERGROUND                       |                 |                |                      | SECTION                              |                                    |     |  |
| UNDERGROUNI SERVICE MAIN SIZE                | FIRE SE         | CORNECTION AND | MAIN<br>TY MAIN SIZE |                                      | RISER SIZE                         |     |  |
|  |                 |                |                      |                                      |                                    |     |  |
| (REMOTE) POST INDICATOR                      |                 |                |                      | (REMOTE) FIRE DEPT CONNECTION YES NO |                                    |     |  |
| DUCTILE IRON PIPING UT                       | ILIZED          |                |                      |                                      |                                    |     |  |
| INSTALLATION AND BLOC                        | KING COMPLIES   | S WITH NFPA    | A 13 AND/OR NFF      | YES                                  | NO EDITION                         |     |  |
| ő  |                 |                |                      |                                      |                                    |     |  |
| YARD HYDRAN                                  | TS              |                |                      |                                      |                                    |     |  |
| DESCRIPTION  City Main Size:                 | inche           | es Supp        | oly Size:            |                                      |                                    |     |  |
| PUMPS Number:                                | Size:           | •              | -                    | GPM at                               | PSI                                |     |  |
| BRAND / MAKE                                 |                 |                | · ·                  |                                      |                                    |     |  |

| NAME OF FACILITY                            | FACILITY STREET ADDRESS  |
|---|--|
| conditions herein contained, and to comply  | for shall constitute an agreement on (my/our) part to abide by all the with all ordinances of the City of Cleveland, the laws of the State of Ohio |
|   | the State Fire Marshal, the Chief of the Division of Fire and the Board of the installation of Fire Protection, Detection or Fire System.          |
|   |  |
| Building Standards & Building Appeals, rela |  |

| APPLICANT NAME AND TITLE (PRINT OR TYPE) |             | APPLICANT TELEPHONE NUMBER                       |     |  |  |
|--|-------------|--|-----|--|--|
| APPLICANT STREET ADDRESS                 | CITY        | STATE  | ZIP |  |  |
| APPLICANT EMAIL ADDRESS                  |             | FIRE PROTECTION LICENSE #                        |     |  |  |
| SIGNATURE<br><b>X</b>                    | DATE        | ATE  |     |  |  |
| GENERAL CONTRACTOR COMPANY               | INFORMATION | 2:   |     |  |  |
| COMPANY NAME                             | OHIO FIRE   | OHIO FIRE PROTECTION ANNUAL CERTIFICATION NUMBER |     |  |  |
| STREET ADDRESS                           | CITY        | STATE  | ZIP |  |  |
| PHONE NUMBER                             | ESTIMATED   | ESTIMATED COST                                   |     |  |  |
| REMARKS                                  |             |  |     |  |  |
| PROPERTY OWNER INFORMATION               |             |  |     |  |  |
| BUSINESS NAME                            | OWNER NA    | OWNER NAME                                       |     |  |  |
| OWNER STREET ADDRESS                     | CITY        | STATE  | ZIP |  |  |
| OWNER PHONE NUMBER                       | ]           | 8  | 1   |  |  |
| PROPERTY OWNER SIGNATURE                 | DATE        |  |     |  |  |

| FIRE PREVENTION BUREAU SECTION - DO NOT WRITE IN SHADED AREA |               |                              |                                  |      |  |  |  |
|--|---------------|------------------------------|----------------------------------|------|--|--|--|
| <ul><li>☐ Approved</li><li>☐ Disapproved</li></ul>           | PERMIT NUMBER | CHIEF OF DIVISION PER (NAME) | FIRE PLANS EXAMINER SIGNATURE  X | DATE |  |  |  |

## **COMPLETE APPLICATION INSTRUCTIONS**

permitting job is complete.

- You must submit 3 sets of plans stamped by an architect, certified engineer or plans professional along with this completed application including Building Permit Number. This application must be filled out by a certified contractor, one licensed by the State of Ohio.
- The shop drawings will then be examined by the Fire Chief or his designee. Once he/she counts the number of devices / heads / gallons of product, etc. he/she will then process the fee. (See the fee schedule)
- 3. As the Fire Chief or his designee reviews the plans, he/she will note any changes that are needed to be made. Do not start any job without your approved permit.
- 4. Once your plans have been approved for permitting, you will receive a notice to the email you provided along with the fee amount due:
  - **A.** Upon receipt of approval and fee amount, please bring check or money order made out to "City of Cleveland" for the amount identified in your notice.
  - **B.** Your stamped plans will be returned, and permit issued at that time. Our office is located at 1645 Superior Ave, Cleveland, Ohio. Office hours for pickup and delivery of plans and permits are Monday thru Friday 8:15am 4:00pm. Schedule may differ for City Holidays. There is parking in the rear of the building off Rockwell or on E 17th; however, you will need to enter the building at the Superior Ave entrance (corner of E17th & Superior). **C.** Once work is complete, call 216-664-6664 to schedule inspections. Once inspections are complete, the