



Department of Building, Zoning & Housing
26789 Highland Road
Richmond Heights, Ohio 44143-1429
216-383-6312 Fax: 216-383-6319
richmondheightsohio.org

**PERMIT APPLICATION FOR MAINTENANCE
OF FIRE PROTECTION EQUIPMENT**

Date: _____

Type of work to be performed: _____ Scheduled work _____ Emergency work

Work will be performed on:

___ Commercial cooking suppression system ___ Standpipe system
___ Commercial exhaust system cleaning ___ Fire detection/signaling system
___ Dry/wet chemical suppression system ___ Other _____

Scope of work: _____

Work will be performed at the following location:

Occupant name: _____

Occupant address: _____

Date and time work is to be performed: _____

Contractor Name: _____

Contractor Telephone: _____ Contractor Fax: _____

I, _____, the undersigned applicant, certify the above information is true and correct to the best of my knowledge. I acknowledge proper documentation indicating the above work was performed according to the Standards adopted by the Department of Building, Zoning, and Housing will be forwarded to the Department within 10 working days.

Applicant's Signature

Date

THIS IS NOT A PERMIT

The permit will be returned by fax or mail (as requested) prior to appointment time, contact this office. Working without a permit is subject to a \$100 fine