



CITY OF MORGAN HILL

Fire Prevention Division  
17575 Peak Ave  
Morgan Hill, CA 95037-4128  
Phone: (408) 778-6480  
Email: [Permits@morganhill.ca.gov](mailto:Permits@morganhill.ca.gov)

## FIRE PERMIT APPLICATION

### PROJECT INFORMATION:

Building Permit #: \_\_\_\_\_

Facility or Project Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

Description of Proposed Work: \_\_\_\_\_

Construction Valuation: \$ \_\_\_\_\_

### CONTRACTOR / DESIGN PROFESSIONAL:

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Ph #: \_\_\_\_\_

Email: \_\_\_\_\_

Contractors License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

MH Business License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Workers Compensation Policy #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

License Classification:  A  C-7  C-10  C-16  C-34  C-36

### SCOPE OF WORK:

Fire Sprinkler:  New  Modified  13  13R  13D

# of Heads: \_\_\_\_\_ # of Apartment or Condo Units: \_\_\_\_\_

Fire Alarm:  New  Modified  Monitoring Equipment # of Devices: \_\_\_\_\_

Underground Fire Service  On-site Fire Hydrants #: \_\_\_\_\_  Backflow #: \_\_\_\_\_

Clean Agent  Dry Chemical  Medical Gas System  Hood Suppression

Other: \_\_\_\_\_

Applicant's Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only

Date Submitted: \_\_\_\_\_ Permit #: \_\_\_\_\_