



# Aptos/La Selva Fire Protection District

6934 Soquel Drive ▪ Aptos, CA 95003  
Phone # 831-685-6690 ▪ Fax # 831-685-6699

## PERMIT APPLICATION

DATE: \_\_\_\_\_ APN: \_\_\_\_\_

ADDRESS OF INSTALLATION: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

LICENSE CLASS: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

**PERMIT FOR:** NEW  ADDITION  MODIFICATION

**SPRINKLER SYSTEM:** OVERHEAD  UNDERGROUND

**\*Must include manufacturers' cut sheet for all Overhead sprinkler plans.**

**FIRE ALARM SYSTEM:**  CENTRAL STATION \_\_\_\_\_

REMOTE STATION \_\_\_\_\_

**\*Must include manufacturers' cut sheet and CSFM Listings & Monitoring Contract**

**FIXED FIRE SYSTEM:**

**\*Must include manufacturers' cut sheet and CSFM Listings**

**OTHER:** \_\_\_\_\_

### LICENSED CONTRACTOR'S DECLARATION

I hereby affirm that I am licensed under applicable provisions of the California Business and Professions Code and my license is in full force and effect.

**APPLICANT:** \_\_\_\_\_

**Worker's Compensation Insurance** Certification on File? Yes  No

### SUB-CONTRACTOR

If you plan to utilize a sub-contractor as part of this permit, please include the following:

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

LICENSE CLASS: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

I hereby affirm the above named subcontractor is properly licensed under applicable provisions of the California Business and Professions Code and license is in full force and effect.

**Worker's Compensation Insurance** Certification on File? Yes  No

I certify that I have read this application and state that the above information is correct. I agree to comply with all district and county ordinances, district, county and state laws regulating to building construction, fire and life safety requirements and hereby authorize representatives of the District to enter upon the above mentioned property for inspection purposes.

APPLICANT OR AGENT \_\_\_\_\_ DATE \_\_\_\_\_

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APPROVED FOR ISSUANCE:

PERMIT#: \_\_\_\_\_ FEE: \_\_\_\_\_ DATE: \_\_\_\_\_ INITIALS: \_\_\_\_\_