



BUILDING PERMIT APPLICATION-*ELECTRONIC*

City of Reno
Community Development Department
1 E. First Street – P.O. Box 1900, Reno, NV 89505
(775) 334-2063 · www.reno.gov

Email completed application to: eplans@reno.gov

**FIRE SRINKLER/
SUPPRESSION/ALARM**

Case No.: _____

Rec'd By: _____

Parcel Number: _____ **Address:** _____

Description of Work:

Business/Tenant Information:

Tenant Name: _____ Phone No.: _____
Description of Business: _____ Hours of Operation: _____
Address: _____ Email: _____
Property Owners Name: _____ Phone No.: _____
Mailing Address: _____ Fax No.: _____

(choose one) **Fire Suppression** **Fire Sprinkler** **Fire Alarm**

Valuation : \$ _____

Contractor Information:

Contractor: _____ Contact Name: _____
Nevada Contractor License #.:(req'd) _____ Reno Business Lic #: _____
Address: _____
Phone No.: _____ Fax No.: _____
E-mail: _____

Design Professional Information:

Designer: _____ Phone no.: _____ Fax: _____
Company Name: _____
NICET Designer: _____ Registrant No.: _____ Level: _____
NSFM License: Yes No

Building Code Information:

Edition of Code: _____ Fire Code Used: _____
Type of Construction: _____ Occupancy Group: _____ Occupancy Use: _____ Sq ft.: _____
Type of Construction: _____ Occupancy Group: _____ Occupancy Use: _____ Sq ft.: _____
Type of Construction: _____ Occupancy Group: _____ Occupancy Use: _____ Sq ft.: _____

Applicant – (Person to Contact Regarding This Project):

Name and Company: _____ Phone No.: _____
Email: _____ Fax No.: _____

Project Information - Please fill out other side →

Fill in one section completely as applicable

FIRE SPRINKLER

Project Information:

Valuation: \$ _____
No. of Units: _____
Project Sq. Footage: _____
Site Improvements Permit No.: _____

No. of Stories: _____
Building Height: _____
Shell Permit No.: _____
Tenant Improvement Permit No.: _____

Fire Alarm System? Yes No

Remote FDC ? Yes No

Remote PIV ? Yes No

Riser Room ? Yes No

Stand Pipes ? Yes No

Fire Pump ? Yes No

Storage Tanks ? Yes No

Size of Storage Tanks: _____

Classification of Use: Incidental Use Area

Accessory Use Area

Mixed Occupancies: Separated Non-Separated

Type of Sprinkler System: Wet Dry

Antifreeze

FIRE SUPPRESSION

Project Information:

Valuation: \$ _____
No. of Stories _____
Project Sq. Footage: _____
Type of Agent: _____

No. of Buildings: _____
No. of Units: _____
Location within building: _____
Quantity: _____

Fire Sprinkler System? Yes No

Fire Alarm System? Yes No

Do you have ?

Plan View

Calculations

Hood Details

Vicinity Map

Elevations

1) Duct Collar Size

Location within Building

Specifications Sheets

2) Hood size

FIRE ALARM

Project Information:

Valuation: \$ _____
No. of Stories _____
Building Height: _____
Type of Agent: _____

No. of Units: _____
Project Sq. Footage: _____
No. of Devices: _____

Fire Sprinkler System? Yes No

Do you have ?

Plan View

Calculations (Battery & Voltage Drop)

Vicinity Map

Elevations

Location within Building

Specifications Sheets

Applicant (print) _____ (sign) _____