



# City of Auburndale

## Fire Department Permit Application



Permit Type	New	Revision	Extension	Permit #:
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Site Address:
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Parcel #:	Zoning Class:
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Structure Use	Residential	Commercial	Mobile Home	Other	# of Units:
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Property Owner Name:	Email:
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Full Address:	Phone:
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COA Contractor #:	Qualifier Name:
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Qualifier Phone:	Qualifier Email:
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Description of Work (including location):
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	Square Footage:
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# of Plumbing Fixtures:	Type of Fixtures:
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Permit Type		
Fire Alarm/Detection System	Automatic Fire Suppression System	ANSUL System
Radio/BDA System	Fire Pump	Fuel Tank
Residential Hood System	Commercial Hood System	Spray Booth/Room
Fireworks Display (Outdoor/Indoor)	Tent/Temporary Structure	Food Truck
Other:		

Fuel Tanks	Installation	Removal	#:	Above Ground	Below Ground
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**Sprinkler systems which contain 50 or more heads and fire alarm systems valued over \$5,000 in cost are to be dated, signed, and stamped by a Florida Registered Professional Engineer.**

Application is hereby made for a permit with the Auburndale Fire Department to do the work as described above and in consideration of the issuance of such permit. I agree that this application is subject to being built as referenced to the approved plans and in accordance with all zoning ordinances, building codes, and other ordinances of the City of Auburndale and laws of the State of Florida applicable thereto. It is understood that any deviation from the information contained herein, unless approved by the Fire Marshal, will render this fire department permit null and void.

**Additional documents include Checklist and Guidelines. See [www.auburndalefl.com](http://www.auburndalefl.com)**

**I hereby certify that the information set forth above is true and correct and that I am the owner of the property or lessee or acting as the agent of either and have been authorized by them to make this application.**

Applicant Name:	Company:
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Signature:	Date :
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Email:	Phone:
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Email to [permit@auburndalefl.com](mailto:permit@auburndalefl.com)