514 East Fourth Street
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MARSHFIELD

The City in the Center

James B. Schmidt
Fire Chief

FIRE & RESCUE DEPARTMENT

SPRINKLER PERMIT APPLICATION

Name of Owner _____ **Date** _____/_____/_____

Site Location _____

Fire Sprinkler Contractor _____

Address _____

Phone _____ **License #** _____

System Type

- ☐ **Wet Pipe**
- ☐ **Dry Pipe**
- ☐ **Preaction/Deluge**
- ☐ **Combination Dry Pipe/Preaction**
- ☐ **Residential**
- ☐ **Outside Sprinklers**
- ☐ **Refrigerated Spaces**
- ☐ **Commercial Cooking/Ventilation**
- ☐ **Antifreeze**
- ☐ **Other** _____

FEES

Up to and including 50,000 square feet - $250.00
Greater than 50,000 square feet - $350.00
Resubmittal - $100.00

Requirements for Permit

☐ **3 sets of Sprinkler Plans (2 to be returned upon approval by this department)**

☐ **3 copies of hydraulic calculations (2 to be returned upon approval by this department)**

☐ **Permit application returned with appropriate fee**

I hereby apply for a sprinkler permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Marshfield and with Wisconsin Building/NFPA Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the fire department connection will be a 5" storz fitting; that the fire department connection will be within 150' of a municipal hydrant if municipal water is available; that the work will be in accordance with the approved plan.

The Applicant is: ◯ Owner ◯ Contractor _____

Applicants Signature

Clear Form Print

D/C Craig DeGrand, D/C Roy Dolens, D/C Ed Erickson, D/C Robert Haight, D/C Scott Owen