THOMAS S. GULOTTA
COUNTY EXECUTIVE

DAVID M. BARTOW
FIRE MARSHAL

NASSAU COUNTY FIRE COMMISSION
OFFICE OF THE FIRE MARSHAL
899 JERUSALEM AVENUE
P.O. BOX 128
UNIONDALE, NEW YORK 11553-0128
516-572-1000

APPLICATION FOR FIRE ALARM PERMIT

TYPE OF APPLICATION **New** ☐ **Amendment** ☐

ALARM SYSTEM LOCATION

Name _____

Address _____ Apt/Suite _____

Post Office _____ Zip Code _____

Village _____ Phone _____

Closest Intersections 1: _____

2: _____

Residential (1 or 2 Family) ☐ Multiple Residence ☐

Office ☐ Mecantile ☐

Industrial ☐ Storage ☐

Public Assembly ☐ Institutional ☐

Educational Facility ☐

Special Information (Guard Dogs, Directions, Hazardous Materials, Invalids, etc.):

CENTRAL STATION INFORMATION

Name _____ Phone _____

Address _____ City, St, Zip _____

ALARM INSTALLER INFORMATION

Name _____

Address _____

City, St., Zip _____

FM No.: _____

NYS Unique ID No.: _____

NYS Unique ID Expiration Date: _____

Phone _____

System Installation ☐ System Maintenance ☐

System Monitoring ☐ System Inspection ☐

INSTALLING COMPANY CERTIFICATION

I, _____ (NYS License Qualifier), _____ (Title)

of _____ (NYS Licensed Company Name) _____ (Signature) _____ (Date)

certify that the above proposed or existing system does or will comply with all Nassau County, New York State and Local Ordinances, codes and regulations. I also certify that before installing the above system all required plans and fees have been submitted to the Fire Marshal, and a set of the approved plans are on site of the installation. I also certify that a copy of this permit application will be conspicuously affixed at the fire alarm control panel or its proposed location at the premises prior to commencing of and during installation of any part of the system.

FIRE MARSHAL USE ONLY

Check No.: Receipt No.: FOA No.: **No Charge** ☐ By

FD No.: FD Name: FD Alarm No: Verified By

Location ID No.: By | Permit No.: FAP ID No.: By

FC-1414.9/80 REV.9/97 **WHITE** - *Office* **PINK** - *Installer* **GOLDENROD** - *FD* **YELLOW** - *Permit Holder*