



PERMIT # \_\_\_\_\_

**Alameda County Fire Department  
Bureau of Fire Prevention  
FIRE ALARM INSTALLATION  
APPLICATION and PERMIT**

City of Dublin       City of San Leandro       Unincorporated Alameda County

Job Name: \_\_\_\_\_ Date: \_\_\_\_\_

Job Address: \_\_\_\_\_ City: \_\_\_\_\_

Description of Building Use: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

**CONTRACTOR INFORMATION: ATTACH A COPY OF WORKER'S COMP AND BUSINESS LICENSE**

Company Name: \_\_\_\_\_ License Type/Number \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_ FAX #: \_\_\_\_\_

**FIRE ALARM SYSTEM: ATTACH UL, FM, SFM LISTING SHEETS FOR ALL COMPONENTS**

New System     Tenant Improvement     Addition     Repair

Is a regulatory agency requiring this system be installed?  Yes     No

Is the purpose of the system installation for  Life Safety/Evacuation     Property Protection

Is the system a conventional  2 wire system     4 wire system     Smart/Addressable System     Other \_\_\_\_\_

NUMBER OF DEVICES:    Pull Stations \_\_\_\_\_    Smokes \_\_\_\_\_    Heats \_\_\_\_\_    Flow \_\_\_\_\_    Strobe/Horns \_\_\_\_\_

Speakers \_\_\_\_\_    Number of Zones \_\_\_\_\_    Other (type & number) \_\_\_\_\_

**MONITORING SYSTEM**

New System     Addition/Modification     Repair

Monitoring Company: \_\_\_\_\_ Listing #: \_\_\_\_\_

Type Alarm Panel: \_\_\_\_\_

**- Fire Department Office Use Only -**

**FIRE ALARM INSPECTION/TEST RECORD:**

**Fire Alarm System:**

Functional Test \_\_\_\_\_ By: \_\_\_\_\_ Wire Integrity Tests: \_\_\_\_\_ By: \_\_\_\_\_ Sys Final: \_\_\_\_\_ By: \_\_\_\_\_

**Monitoring System:**

Functional Test \_\_\_\_\_ By: \_\_\_\_\_ Wire Integrity Tests: \_\_\_\_\_ By: \_\_\_\_\_ Sys Final: \_\_\_\_\_ By: \_\_\_\_\_

**APPROVALS:**

Rejected: \_\_\_\_\_ Rejected: \_\_\_\_\_ Rejected: \_\_\_\_\_

Contact Notified: \_\_\_\_\_ Contact Notified: \_\_\_\_\_ Contact Notified: \_\_\_\_\_

Approved By: \_\_\_\_\_ Approval Date: \_\_\_\_\_ Applicant Notified: \_\_\_\_\_

**FEES DUE:** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_ **Comments:** \_\_\_\_\_

Plans Received: \_\_\_\_\_ Date Due: \_\_\_\_\_ Plans Received: \_\_\_\_\_ Date Due: \_\_\_\_\_

**A COPY OF THIS APPLICATION SHALL BE INCLUDED WITH ALL RESUBMITTALS**

<input type="checkbox"/> <b>PROPERTY OWNER</b> <input type="checkbox"/> <b>TENANT</b> Name: _____ Address: _____ City/State/Zip: _____ Phone: _____ Fax: _____ Business Name (Tenant): _____ Owner's Signature: _____	<input type="checkbox"/> <b>ARCHITECT</b> <input type="checkbox"/> <b>ENGINEER</b> License No. _____ Designer's Name: _____ Company Name: _____ Address: _____ City/State/Zip: _____ Phone No.: _____ Fax No.: _____
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<input type="checkbox"/> <b>CONTRACTOR</b> License No. _____ Class: _____ Company Name: _____ Address: _____	<input type="checkbox"/> <b>OWNER/BUILDER</b> Phone No.: _____ City/State/Zip: _____ Fax No.: _____
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**LICENSED CONTRACTOR'S DECLARATION:** I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect:  
**Date:** \_\_\_\_\_ **Contractor's Signature:** \_\_\_\_\_

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the Contractor's License Law for the following reason: (Sec. 7031.5 Business and Professions Code). Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractor's License Law, Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, or that he or she is exempt there from and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

I as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale. (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project. (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with contractor(s) licensed pursuant to the Contractor's License Law.)

I am exempt under Sec. \_\_\_\_\_ Business and Professions Code for this reason \_\_\_\_\_

**Date** \_\_\_\_\_ **Owner's Signature** \_\_\_\_\_

**WORKERS' COMPENSATION DECLARATION:** I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for Workers' Compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy numbers are:  
**Carrier:** \_\_\_\_\_ **Policy No.:** \_\_\_\_\_  
(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

**Date** \_\_\_\_\_ **Applicant's Signature** \_\_\_\_\_

**WARNING:** Failure to secure workers' compensation coverage is unlawful, and shall subject an employer to criminal penalties and civil fines up to one hundred thousand dollars (\$100,000), in addition to the cost of compensation, damages as provided for in Section 3706 of the Labor Code, interest and attorney's fees.

**CONSTRUCTION LENDING AGENCY:**

I hereby affirm under penalty of perjury that there is a construction-lending agency for the performance of the work for which this permit is issued. (Sec. 3097, Civil Code)

**Lender's Name** \_\_\_\_\_ **Lender's Address** \_\_\_\_\_

**IMPORTANT APPLICANT IS HEREBY MADE TO THE BUILDING OFFICIAL FOR A PERMIT SUBJECT TO THE CONDITIONS/RESTRICTIONS SET FORTH ON THIS APPLICATION AND THE FOLLOWING:** 1) Construction activity is prohibited between the hours of 7:00 p.m. and 7:00 a.m. and on Sundays and Holidays. 2) The approved plans and Permit Inspection Card must remain on the job site. 3) Final inspection of the work authorized by this permit is required. **INSPECTION REQUESTS** may be placed by calling (925) 833-6620 no later than 4:00 p.m., Monday through Friday, on the workday before the desired inspection date. **Inspectors' Office Hours are Monday-Friday, between 7:00 a.m. – 8:00 a.m., at (925) 556-4544 (no requests for inspections may be taken at this number).**

**DECLARATIONS:**

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of the City of Dublin to enter upon the job premises at any reasonable time to inspect any work installed under this permit, to remove any nonconforming construction at my expense and to otherwise act as and when required by the City of Dublin.

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Signature of Owner, Agent, Builder, Officer      Print Name of Applicant