



City of Balcones Heights
3300 Hillcrest
Balcones Heights, TX 78201
210-957-3547
inspections@bhtx.gov

PERMIT NUMBER

FIRE PROTECTION SYSTEM PERMIT APPLICATION

SELECT THE TYPE OF PERMIT REQUESTED		
<input type="checkbox"/> Vent / Hood Suppression System Complete Sections 1, 2, & 3	<input type="checkbox"/> Fire Alarm System Complete Sections 1, 2, & 3	<input type="checkbox"/> Fire Sprinkler System Complete Sections 1, 2, 3, & 4
<input type="checkbox"/> Paint / Spray Booth Protection System Complete Sections 1, 2, & 3	<input type="checkbox"/> Underground Fire Support Line Complete Sections 1, 2, 3, & 4	<input type="checkbox"/> Smoke Control System Complete Sections 1, 2, & 3
<input type="checkbox"/> Alternative Fire Suppression System Complete Sections 1, 2, 3, & 5	<input type="checkbox"/> Fire / Smoke Dampers Complete Sections 1, 2, & 3	<input type="checkbox"/> Gated Access / Control Complete Sections 1, 2, & 3

Section 1 - Location Information

Project / Business Name	Project / Business Address
<i>COMPLETE COPIES OF LICENSED ARCHITECT, ENGINEER, OR RME STAMPED PLANS AND SPECIFICATIONS MUST BE ELECTRONICALLY SUBMITTED WITH THIS APPLICATION. PLANS SHALL NOT EXCEED 30" X 36" AND SHALL BE "SCALED" DRAWINGS. PAPER COPIES ARE NOT ACCEPTED.</i>	

Section 2 - Contractor Information

Contractor / Applicant Name	Address:	Office Phone:
City:	State:	Zip:
Email:	Contact:	Emergency Contact:
License Number:	License Expiration Date	Emergency Contact Number:

Section 3 - Building Usage

BRIEFLY EXPLAIN THE USE OF THE BUILDING OR FACILITY BELOW

Section 4 - Water Source Information

<input type="checkbox"/> San Antonio Water System (SAWS)	<input type="checkbox"/> Other (Specify)
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Section 5 - Alternative Protection System Information

BRIEFLY EXPLAIN THE ALTERNATIVE FIRE PROTECTION SYSTEM BELOW

I have read the completed application and know the same to be true and correct and hereby agree that if a permit and / or approved plans are issued, all provisions of the applicable City Codes will be complied with whether herein specified or not. I understand that if I do not check an item above, which applies to the project / address indicated above, I will be held responsible for additional fees and / or construction requirements as called for by the applicable codes. I further understand that I shall be responsible for informing all parties involved, including the design professionals, of any code non-compliance noted on the approved plans. I also understand that I may not proceed with any work described above until I receive a permit from the City of Balcones Heights.

Signature: _____ Date: _____

Fee Calculations

Vent / Hood Suppression System (Indicate type system)	Permit Fee
	\$100.00

Each System installed must have a separate permit

Paint / Spray Booth Protection System (Indicate type system)	Permit Fee
	\$250.00

Each System installed must have a separate permit

Underground Fire Suppression Support Line (Indicate size and type of piping)	Permit Fee
	\$200.00

Smoke Control System (Indicate location of system)	Permit Fee
	\$175.00

Alternative Fire Protection System (Indicate type of system)	Permit Fee
	\$250.00

Fire / Smoke Dampers (Indicate #)	Fee Per Damper	Permit Fee (# x \$2.00)
	\$2.00	

Fire Alarm System (# initiating & signaling devices)	(# Devices x \$.50)	Base Fee	Permit Fee (base fee + device fee)
		\$200.00	

Fire Sprinkler System (# heads)	(# heads x \$.50)	Base Fee	Permit Fee (base fee + device fee)
		\$250.00	

ALL APPLICABLE PERMIT FEES MUST BE PAID AT THE TIME PLANS ARE SUBMITTED FOR REVIEW.

CHECK OR MONEY ORDERS ARE PAYABLE TO THE **CITY OF BALCONES HEIGHTS**.

ELECTRONIC SUBMISSIONS CAN BE SENT AN ELECTRONIC LINK FOR PAYMENT.

Estimated Value of Fire Protection System Project:

Dollar Amount Required

Date Received:	Fee Paid:	Check/M.O.#:	Cash	Credit Card	Received By:
Building Permit #	System Permit #:	Date Approved:	Approved By:		Approved:
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Reviewed by:					