

SPRINKLER SYSTEM PERMIT APPLICATION



Hingham Fire - Rescue
Department of Fire Prevention
and Code Compliance
210 Central Street
Hingham, MA 02043

HFD SP Permit # _____
Building Permit # _____
 STANDARD PERMIT SHORT FORM PERMIT
Office: (781) 741-1488 * Fax: (781) 741-1460

NOTE: This application form must be completed and submitted to the Hingham Fire Department, Fire Prevention Office, 210 Central Street.

1. Tenant Name: _____
2. Site Address: _____ Unit/Bldg # _____
3. Complex Name: _____
4. Work being done: Modification to existing system New System
5. Total # of new & relocated heads: _____ Fire Pump required: Yes No
6. Number of Risers: _____ Number of Standpipes: _____
7. Description of Work, (be specific, use the back of the application if necessary):

8. Fee: Standard Permit: \$50.00 Short Form Permit: \$25.00 No Charge Returned

Contractor Name: _____	Phone # : _____
Contact Name: _____	Fax # : _____
Business Address: _____	
Sprinkler Contractors (SC) License Number: _____	

Check the box indicating the scope of work being done to determine which Permit you are applying for:

- New installation Commercial - Mixed Use Buildings shall use Standard Permit.
- New installation Residential Multi Family Buildings shall use Standard Permit.
- New installation Residential One & Two Family Dwellings shall use Standard Permit.
- Repair work or modification consisting of more then 5 heads shall use Standard Permit.
- Repair work or modification consisting of 5 heads or less shall use Short Form Permit.

Failure to PROVIDE ANY of the above requested information may result in a delay of the review process and the rejection of your application. Please allow a minimum of three weeks for the Hingham Fire Department review process. You will be notified when your PERMIT and PLANS are ready for pick up.

I understand that the installation shall comply with the Hingham Fire Department Guidelines and the applicable Edition of NFPA 13, and that upon completion of the installation a Test Certificate for Aboveground and Underground Piping shall be filed with the Hingham Fire Department as per NFPA 13.

PRINT NAME (APPLICANT) and PHONE NUMBER

SIGNATURE (APPLICANT)

OFFICIAL RECEIVING APPLICATION

DATE RECEIVED

DATE ISSUED