



# COLLIN COUNTY

Fire Marshal's Office  
4690 Community Dr.  
Suite 200  
McKinney, Texas 75071  
972-548-5576  
972-548-5574 fax  
www.collincountytx.gov

## Permit Application Installation and Alterations of Standpipe System (IFC 105.7.13)

JOB ADDRESS \_\_\_\_\_

NAME OF BUSINESS OR PROJECT \_\_\_\_\_

CONTRACTOR OR COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BUSINESS PHONE # (\_\_\_\_) \_\_\_\_\_ FAX # (\_\_\_\_) \_\_\_\_\_

CELL PHONE # (\_\_\_\_) \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

DESCRIPTION OF WORK TO BE DONE \_\_\_\_\_

COMPANY STATE LICENSE # \_\_\_\_\_

### STANDPIPE ABOVEGROUND

NUMBER OF STANDPIPES: \_\_\_\_\_

PERMIT FEE FROM COLLIN COUNTY FEE SCHEDULE \$ \_\_\_\_\_

CONTRACTOR SHALL SUBMIT THREE SETS OF PLANS AND SPECIFICATIONS FOR REVIEW. PLANS TO BE FOLDED

DOES THIS PROJECT HAVE AN EXCAVATION DEPTH IN EXCESS OF FIVE (5) FEET? IF YES, PROVIDE DETAILED PLANS AND SPECIFICATIONS THAT MEET OSHA STANDARDS. MUST BE SUBMITTED AND SIGNED BY A REGISTERED CIVIL ENGINEER OR ARCHITECT.

I HEREBY CERTIFY THAT THE PLANS SUBMITTED ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT SAID WORK WILL BE DONE IN COMPLIANCE WITH THE INFORMATION HEREIN SET FORTH AND IN COMPLIANCE WITH COLLIN COUNTY FIRE CODES, STATE RULES AND REGULATIONS AND POLICY STANDARDS AS SET FORTH BY THE FIRE MARSHAL.

SIGNED:

CONTRACTOR \_\_\_\_\_ TEXAS DL# \_\_\_\_\_ STATE \_\_\_\_\_ PRINT NAME CLEARLY \_\_\_\_\_

### FOR OFFICE USE ONLY

Date Submitted: \_\_\_\_\_ Permit No: \_\_\_\_\_ Received By: \_\_\_\_\_