THE UNIVERSITY OF OKLAHOMA DEPARTMENT OF CAMPUS SAFETY OFFICE OF THE FIRE MARSHAL

FIRE ALARM, SPRINKLER & ALTERNATIVE EXTINGUISHING SYSTEMS PERMIT

Type of Systems Permit Applying for:	
Contractor:	Project Manager:
Contractor POC:	PM Phone #:
Contractor Phone #:	PM Email Address:
Contractor Email:	Project #:
State License #:	Work Order #:
BUILDING INFORMATION	
Building Name:	Building Address:
Occupancy Type:	Project Square Footage:
Specify Whether New Installation, Remodel or Addition:	
FIRE ALARM SYSTEM INFORMATION	
System Manufacturer:	Model #:
Is the System Monitored? If So, By Who	om?
# of Pulls: # of Smoke Detectors:	# of Heat Detectors:
# of Audio/Visual Devices: # of Other Types of Devices:	
FIRE SPRINKLER SYSTEM INFORMATION	
Type of Sprinkler System:	
# of Risers: Hazard Type(s):	
Water Supply Information: Static Pressure:	Res. Pressure: Flow:
Fire Pump Manufacture:	Model #:
Rated Capacity: GPM at	PSITIS
ALTERNATIVE EXTINGUISHING SYSTEM INFORMATIO	NALG
Type of System:	Connected to Fire Alarm?
	Model #:
Size of System(s):	Manual Pulls?
PERMIT STATUS:	Date:
Justification if denied or revoked:	
BY AUTHORITY OF:	