

City of Fort Oglethorpe

Building Department 500 City Hall Drive Fort Oglethorpe, Georgia 30742 706-866-2544 ext. 1201

FIRE ALARM PERMIT APPLICATION

1. APPLICANT:			
Address:			
City:		State:	Zip:
Phone:			
2. Alarm Site Business Name:			
Address:			
3. Alarm Company:			
Address:			
City:		State:	Zip:
Phone:			
Georgia Business License #			
4. Property Owner (if different)	from applican	t):	
Address:			
City:		State:	Zip:
Phone:			
5 Contractor Name			
5. Contractor Name:			
Address:		Stata	7in.
City:			_
Phone:			
Georgia License #			
Signature:			
6. Project Cost: \$			
7. Describe Work:			
contractor is responsible for all work to be any deficiency is found by the Inspection D			
olicant Signature:		Date:	
		Date:	